Core Competencies for the Clinical Transplant Coordinator

Updated in 2009
Assumption Statements

This document outlines the core competencies for practitioners/coordinators in the field of clinical transplantation.

These general practitioner/coordinator competencies are broad in scope to acknowledge the diverse professional practices unique to each transplant center.

These competencies are meant to be applicable to both adult and pediatric age groups.

LEGEND

# Competency Category

Competency statement(s)

Specific core competencies of behaviors/tasks/responsibilities
• Subcategories of behaviors/tasks/responsibilities

The Clinical and Procurement Coordinator maintain patient records, both donor and recipient, in compliance with the Health Insurance Portability and Accountability Act (HIPAA) regulations.

1. Transplant Referral and Evaluation

The Clinical Transplant Coordinator (CTC) demonstrates understanding and ability to facilitate/coordinate evaluation and OPTN/UNOS listing of potential transplant candidate.

The CTC

Identifies appropriate candidate upon referral, and interacts with appropriate staff. Identifies requirements for candidate evaluation. Obtains a translator if needed. Coordinates with multidisciplinary team the evaluation process for potential transplant candidate, including, but not limited to:
• Medical/surgical evaluation
• Psychosocial evaluation
• Educational assessment
• Laboratory evaluation
• Radiological evaluation
• Nutritional evaluation
• Financial Assessment

Interprets serological results of the potential transplant candidate and their implications for transplant.

Obtains recipient blood type, tissue typing and cytotoxic antibodies according to transplant center and UNOS protocol.

Identifies possible co-morbidities in the transplant candidate and evaluates as indicated. Ensures that patient is assessed for presence of malignancy prior to listing.

Identifies absolute and relative contraindications to transplantation.

Ensures patient understands risk and benefit of immunizations required prior to transplantation.

Functions as candidate advocate by applying knowledge of growth, development, educational and cultural background during candidate/family/legal guardian interactions.

Educates candidate/family/legal guardian about:
• Living donation options
• Evaluation process
• OPTN regulations
• Organ allocation
• Waiting phase
• Transplant process
• Donor/recipient Confidentiality
• Risks/benefits, including utilization of expanded donors, high risk donors, if applicable.
• Center and national expected and actual survival rates.
• Post-operative phase including immunosuppressive therapy and effects signs and symptoms rejection and infection, and diagnostic surveillance of rejection and infection.
• Potential financial issues pre and post transplant.
• Potential research protocols of the transplant program.
• Candidate/family/legal guardian responsibility throughout the transplant process.

Identifies and responds to the psychosocial and economic needs of the transplant candidate/family/legal guardian during evaluation.

Collects and evaluates medical, psychosocial and financial data for review by transplant team.

Communicates with referring physicians, other health care providers, payors and transplant team members regarding the candidate’s status and evaluation outcome.

Demonstrates knowledge of, and compliance with, OPTN/UNOS policies and listing requirements.
Clinical Transplant Coordinator

Informs and educates patient/family/legal guardian at time of listing.

Ensures patient and referring physician are informed in writing of transplant listing, denial or postponement.

Acts as resource person for internal and external health care providers.

Provides and maintains comprehensive documentation of evaluation process and makes appropriate referrals to specialists.

Provides data to OPTN/UNOS for listing statistics.

2. Pre-Transplant Waiting Period
The CTC demonstrates knowledge and the ability to monitor and coordinate care of the candidate awaiting organ transplantation. The CTC maintains knowledge of CMS/UNOS requirements for certified transplant centers and ensures required documentation is completed.

The CTC

Assesses candidate/family/legal guardian’s educational deficits of transplant process.

Develops and institute pre-transplant care plan. Transplant candidate/family/legal guardian’s needs are addressed on an organ/age specific basis.

Maintains/ensures communication with patient, referring physicians, payors, other health care providers and transplant team members.

Recognizes potential problems, abnormal diagnostic findings and/or significant changes during the waiting phase, coordinating required care.

Ensures routine annual testing is obtained per transplant center protocol. This includes but is not limited to PRA levels (cytotoxic antibody screen), laboratory blood tests, chest x-rays, and organ specific testing. Maintains routine health maintenance and surveillance for malignancy during the waiting period.

Identifies and responds to the psychosocial and economic needs of the transplant candidate/family/legal guardian during waiting phase.

Exhibits ability to maintain and update candidate-listing status per OPTN/UNOS regulations. Demonstrates the ability to update the patient on an annual basis regarding their status on the waiting list.

Maintains knowledge and educates the patient on organ specific alternatives to cadaveric transplants. Provides patient education on alternatives such as LVAD destination therapy, bridge to transplant, and living donor transplants.

Identifies the need for candidate re-evaluation and initiates when appropriate. Communicate these needs to the transplant team.

Acts as resource person for internal and external health care providers.

3. Peri-Operative Period
CTC exhibits knowledge and ability to facilitate transplant process when organ becomes available to transplant candidate. This includes defining and adhering to the current OPTN/UNOS regulations and allocation policies.

The CTC

Participates in transplant process according to transplant center protocol.

Communicates with the organ procurement agency and collects the appropriate data necessary for decision-making regarding organ acceptance/refusal for transplant.

Shares necessary information about the donor organ, including ABO compatibility, with the transplant surgeon/physician.

Reviews potential recipient’s current medical status to determine eligibility for transplant.

Shares pertinent information about the intended recipient with the transplant team that may influence outcomes or necessitate deviation from protocol.

Discusses organ characteristics with intended recipient i.e. expanded donor criteria, CDC high risk.

Assesses need for and obtains results of final cytotoxic crossmatch.

Facilitates admission or transfer of patient to the transplant facility.

Arranges any preoperative procedures required (i.e., dialysis).

Notifies transplant team of pending surgical procedure.

Acts as a liaison between the donor and recipient transplant teams.
Clinical Transplant Coordinator

Arranges transportation of teams/organ to/from donor hospital and transplant center.

Exhibits ability to remove transplant recipient from list per OPTN/UNOS regulations.

Provides outcome specifics to OPO for donor family follow-up.

Identifies and responds to educational and psychosocial needs of family/legal guardian during recipient transplant surgery.

Maintains communication with referring physician, health care providers and payors.

Verbalizes understanding of standing orders and acts as resource for internal and external health care providers.

Provides and maintains comprehensive documentation of donor/recipient information.

4. Post-Transplant In-Patient Period

The CTC demonstrates understanding of post-transplant management including medications, complications, interventions and discharge planning in the coordination of recipient care. The CTC demonstrates the ability to collaborate effectively with multidisciplinary team.

The CTC

Monitors patient progress post-transplant.

Identifies complications and considers interventions with the transplant team.

Communicates recipient’s status to referring physician, health care providers and payors.

Identifies and responds to the educational, psychosocial and economic needs of recipient/family/legal guardian during hospitalization.

Educates recipient/family/legal guardian regarding care and responsibilities after transplantation:

- Vital signs
- Diet and activity
- Frequency of follow-up visits and lab studies
- Reporting abnormalities to transplant center/primary care provider
- Signs and symptoms of rejection/infection
- Medications (purpose, dosage, frequency and side effects)
- Explanation of procedures required for follow-up (heart biopsies, etc.)
- Need for periodic follow-up at transplant center
- Importance of recipient/family/legal guardian’s commitment to transplant medical and medication regimen.

Collaborates with nursing staff, social workers and other health care providers to establish and implement patient care plan according to current standards of care.

Verbalizes understanding of standing orders, and acts as resource for internal and external health care providers.

Informs recipient of their voluntary option of, and the process for, written communication to the donor family.

Coordinates/ensures discharge planning to provide for recipient’s continuity of care.

Provides and maintains comprehensive documentation of recipient’s progress and education.
5. Post-Transplant Out-Patient Period

The CTC demonstrates knowledge and ability to coordinate the care of the transplant recipient in the outpatient setting to achieve optimal physical, social and emotional rehabilitation.

The CTC

Identifies and responds to recipient/family/legal guardian’s educational, psychosocial and economic needs in post-transplant phase.

Reinforces education and follow-up requirements necessary for successful outcome.

- Transplant drug regimen and side effects
- Signs and symptoms of infection
- Signs and symptoms of rejection
- Diagnosis of rejection
- Diagnosis of infection
- Short and long terms complications of transplant and medications
- Transplant team personnel, roles, and available support services
- Patient and graft survival
- Available financial resources
- Recording data (temperature, weight, microspirometry, BP)
- Frequency of follow-up visits and laboratory studies
- Who to call and when

Observes, monitors, assesses and reports to appropriate health care provider the recipient’s:

- Physical and emotional status
- Short and long-term complications of immunosuppression
- Drug toxicity
- Infectious complications.
- Risk for rejection
- Adherence to treatment regimen

Assists family/legal guardian with adjustment for recipient’s physical, social and emotional rehabilitation.

Assesses recipient’s compliance with medications and medical regimen; collaborates with transplant team to attain and maintain compliance.

- Medication Renewal
- PA forms
- Medication changes to comply with insurance company formularies

Collects and reviews data pertinent to recipient’s health and organ function with transplant physician/health care provider

- Pertinent physical examination findings (e.g. vital signs, fluid balance.)
- Lab data and diagnostic results

Implements changes in drug/treatment therapy as ordered by physician(s) and/or health care provider.

Verbalizes understanding of post-transplant protocol and acts as resource for internal and external health care providers.

Arranges for consultations, diagnostic procedures and hospitalization when indicated.

- Lab and/or diagnostic studies
- Follow-up clinic visits
- Home health care
- Consultations (e.g. social work, psychologist, dietician)
- Outpatient therapies
- Hospitalization
- Reinforces and facilitates need for well care (i.e., periodic mammography, pap smears and colonoscopy).
- Ensures recipient is screened annually for malignancy.
- Assesses recipient’s need for immunizations.

Facilitate appropriate sharing of information regarding recipient (e.g. referring physician, other health care providers and payors.)

Provides and maintains comprehensive documentation of recipient progress.

Refer recipient for emergency evaluation and treatment when indicated.
Respond to recipient or family inquiries regarding the donor
- Follow Transplant Center/OPO protocols for sharing of information
- Encourage recipient to send donor family thank you letter

Report required data to OPTN/UNET

6. Living Donation
The CTC will demonstrate knowledge and ability to facilitate living donation/transplantation, and will utilize that knowledge to coordinate the care of the living donor for evaluation and live organ donation.

The CTC
Identifies appropriate live donor candidate upon referral, and interacts with appropriate staff.

Identifies requirements for and maintains confidentiality of the living donor evaluation.

Ensures process of informed choice has been followed according to transplant center protocol.

Coordinates with multidisciplinary team the evaluation process for the potential live donor candidate.

Documents pertinent information to ensure continuity of care/coordination.

Applies knowledge of growth, development, educational and cultural background during live donor candidate and family interactions.

Educates live donor candidate and family about the evaluation, donation, and hospitalization process, risks and benefits, and short/long term follow-up care and documents accordingly.

Discuss potential short term and long term implications to health after donation.

Discuss financial implications post donation as it pertains to health insurance, time off from work, Family Medical Leave Act (FMLA).

Identifies donor’s learning needs, coping skills, decision making process, long-term expectations and commitment regarding the donation process.

Identifies and responds to the educational, psychosocial and economic needs of the live donor candidate and family during evaluation/surgical procedure and postoperative course.

Verbalizes understanding of live donor protocol, and acts as a resource for internal and external health care providers.

Collects and reviews evaluation results with the transplant team.

Participates in the determination of a potential live donor’s suitability to donate for transplant according to transplant center protocol and OPTN/UNOS regulations.

Facilitates admission date with donor and transplant candidate, and notifies transplant team members of pending surgery.

Assists family with adjustment for live donor’s physical and emotional rehabilitation.

Oberves, monitors, reviews and reports live donor’s physical and emotional status to the appropriate transplant team members.

Maintains/ensures communication with donor’s primary physician, other health care providers and payors throughout the evaluation phase, surgical procedure and postoperative recovery.

Provides and maintains comprehensive documentation of living donor’s progress according to transplant center protocol.

Functions as donor advocate with other members of the transplant team.

Identify contraindications to donation per program protocol.

Familiar with OPTN/UNOS regulations that pertain to living donation

7. Professional Development
The CTC demonstrates proficiency and continual growth in the knowledge of transplantation.

The CTC
Obtains ABTC certification.

Maintains ABTC certification.

Reviews and integrates into practice the current professional literature in the field of transplant.
Attends practice-related conferences.

Participates in professional transplant/procurement organizations.

Reviews current transplant-related research.

Shares knowledge through mentoring/precepting newly hired CTCs.

Participates in and supports ongoing clinical research within the transplant center and publishes results as appropriate.

8. Professional Practice

The CTC demonstrates understanding and the ability to assume responsibility for individual judgments to achieve the highest quality of care for the transplant candidate, recipient, family and living donor.

The CTC

Maintains the highest standards of professional conduct.

Assures informed consent for live donation and transplantation.

Assures equitable access to transplantation for patients.

Assures access for patients to treatment alternatives.

Protects the rights of patients, their families/legal guardians, and health care team members.

Respects individual privacy and holds confidential all information obtained in the course of practice.

Assures open and clear communication with patients, families and health care team members (including local health care provider, case managers) without bias or discrimination.

Plans, conducts and evaluates educational materials and activities provided for patients and families/legal guardians to respond to their educational needs.

Plans, conducts and evaluates educational presentations, workshops and seminars utilizing materials developed for professional education.

Assures that quality and performance improvement standards are developed, implemented and maintained.

Demonstrates knowledge and understanding of the regulatory oversight requirements for Transplant Centers. (CMS, OPTN/UNOS)

Knowledgeable of transplant center outcomes and performance standards.

Maintains current knowledge of and complies with institutional policies and procedures.

Maintains cooperative relationships with other health care professionals.

Acts to protect the public trust when health care and safety are endangered.

Assists OPOs and other community organizations with educational presentations and information appropriate to the needs of transplant professionals and the public.

Abbreviations

- ABTC American Board for Transplant Certification
- CMS Center for Medicare and Medicaid Services
- CTC Clinical Transplant Coordinator
- NATCO, The Organization for Transplant Professionals
- OPO Organ Procurement Organization
- OPTN Organ Procurement and Transplantation Network
- UNOS United Network for Organ Sharing