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**DOCUMENT TITLE:**
Adult Transplant Leadership Team

**DOCUMENT NOTES:**

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**Document Information**

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ABMT-GEN-006
ADULT TRANSPLANT LEADERSHIP TEAM

1 INTRODUCTION

1.1 The Adult Blood and Marrow Transplant (ABMT) program at Duke University Medical Center is comprised of faculty physicians, professional nurses, hospital administrators and support staff. The physician, nurse and administrative leaders set the direction for the ABMT program, assure high quality care and measure outcomes. Duke University Medical Center ABMT program is a national leader in the area of stem cell transplantation.

2 PROGRAM MEDICAL DIRECTOR

2.1 The Adult Program Medical Director is licensed in the state of North Carolina and board certified in Internal Medicine and Oncology. The Medical Director is experienced and trained in hematopoietic progenitor cell therapy. The Medical Director is responsible for the clinical and administrative operations and assuring compliance with established standards of care.

2.2 The Adult Program Medical Director is responsible for:

2.2.1 Establishing program goals, assuring clinical quality and directing the research efforts.

2.2.2 Faculty performance and annual performance reviews.

2.2.3 Teaching faculty and contributing to the education of house staff and nursing personnel.

2.2.4 Participating in regular educational activities within Duke University and for professional organizations.

2.2.5 Contributing to the body of knowledge of stem cell therapy by leading the laboratory research team at Duke University.

2.2.6 Responsible for all elements of the design of the clinical program including quality management, selection and care of patients and donors, cell collection and processing.

2.2.7 Oversight of the medical care provided by the clinical program including medical care provided by the physicians on the transplant team.

2.2.8 Responsible for verifying the knowledge and skills of the physicians of the transplant team.

2.2.9 Responsible for the management of the clinical unit.

2.2.10 Conducting clinical and bench research and providing expert medical care for patients with leukemia, lymphoma, multiple myeloma, breast cancer and other diseases that can be treated with stem cell transplantation.
2.2.11 Functioning as co-director with the Pediatric Medical Director of the Clinical Stem Cell laboratory.
2.2.12 Directing the Stem Cell Collection facility.

3 COLLECTION FACILITY MEDICAL DIRECTOR

3.1 The Adult Program Collection Facility Medical Director is licensed in the state of North Carolina and board certified in Internal Medicine and Oncology. The Collection Facility Medical Director is experienced and trained in hematopoietic progenitor cell therapy. He/she is responsible for the clinical and administrative operations of the collection facility.

3.2 The Adult Program Collection Facility Medical Director is responsible for:

3.2.1 Clinical and administrative operations of the collection facility.
3.2.2 Functioning as co-director with the Pediatric Medical Director of the Clinical Stem Cell laboratory.

4 ADMINISTRATIVE DIRECTOR

4.1 The Administrative Director is responsible for the financial and administrative aspects of the program. The Administrative Director manages the business and support staff and works closely with finance and contracting to assure cost effective care and appropriate reimbursement for patient care services.

4.2 The Administrative Director is responsible for:

4.2.1 Providing vision and direction to planning, development and management of strategic initiatives that assure program growth and development, positive financial performance and quality of patient care.

4.2.2 Developing a sound and fluid knowledge base about the insurance industry, federal regulations, the Duke Health System and managed care contracts as they relate to the ABMT Program.

4.2.3 Identify clinical and administrative areas for programmatic improvement, and coordinate the planning, development, implementation and evaluation of innovative strategies that assure continued growth and development and maintain the program’s prominence as a world leader in stem cell transplantation.

4.2.4 Ensure appropriate bottom line targets are developed and met relative to quality of care through the hospital’s quality assurance program; assure development and implementation of outcomes management and associated performance targets, including but not limited to patient satisfaction surveys, physician relations and continuing education; monitor variances; recommended and implement corrective action.

4.2.5 Monitor market forces and internal conditions, trends in the health care industry and overall costs, and develop strategies that ensure maximum awareness of the program and its services by referring physicians, potential patients, payors, case managers, other health care centers, etc. Integrate goals of hospital into service line.
5 CLINICAL OPERATIONS DIRECTOR

5.1 The Clinical Operations Director is a Registered Nurse licensed in the state of North Carolina with a graduate degree in nursing or health care administration. The Clinical Operations Director is responsible for managing the patient care on the inpatient unit, the outpatient treatment unit and the return physician clinic.

5.2 The Clinical Operations Director is responsible for:

5.2.1 The daily management of patient care on 9200 and the ABMT clinic.
5.2.2 Rounding regularly on all patients during their treatment to assure quality of nursing care.
5.2.3 Maintaining an interface with departmental personnel to coordinate clinical operations activities to ensure adequate staffing, space and facilities.
5.2.4 Assuring annual performance reviews are completed on all direct reports.
5.2.5 Developing nursing staff expertise through education and training.
5.2.6 Ensuring effective processes for staff development, recruitment and retention.
5.2.7 Recruiting, hiring and orienting new staff members.
5.2.8 Ensuring a safe environment of care for all staff, patients and families.
5.2.9 Ensuring appropriate bottom line targets are developed and met relative to quality of care through the hospital’s quality assurance program.
5.2.10 Monitoring and reporting quality assurance and performance improvements to hospital and BMT Quality Assurance Committee.
5.2.11 Ensuring criteria for employment for all staff are identified, communicated and maintained beginning at entry into system and annually as required.
5.2.12 Serving as a professional role model and mentor to staff.

6 REVISION HISTORY

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<th>Description of Change(s)</th>
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| 04           | J. Frith | • Section 3 Added Collection Facility Medical Director to the list of Adult Transplant Leadership Team and added the description of responsibilities of the Collection Facility Medical Director.  
• 5.1 Added return physician clinic.  
• Reformatted throughout the document. |
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