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PBMT-GEN-003 DUKE UNIVERSITY MEDICAL CENTER PEDIATRIC BLOOD AND MARROW TRANSPLANT PROGRAM CLINICAL PROGRAM LEADERSHIP

1 INTRODUCTION

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

2 DIVISION CHIEF (FACT PROGRAM MEDICAL DIRECTOR)

- 2.1 The Division Chief is licensed in the state of North Carolina, board certified in Pediatric Medicine and Hematology/Oncology, and experienced and trained in hematopoetic progenitor cell therapy. He/She is responsible for the clinical and administrative operations and assuring compliance with established standards of care. Additionally, he/she serves as the designated Program Medical Director for accreditation processes for FACT (Foundation for Accreditation of Cellular Therapy).
- 2.2 Other responsibilities include, but are not limited to:
 - 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 All elements of the design of the clinical program including quality management, selection and care of patients and donors, cell collection and processing.
 - 2.2.6 Oversight of the medical care provided by the clinical program including medical care provided by the physicians on the transplant team.
 - 2.2.7 Verifying the knowledge and skills of the physicians of the transplant team
 - 2.2.8 Management of the clinical unit.
 - 2.2.9 Contributing to the body of knowledge of stem cell therapy by leading the laboratory research team at Duke University.

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- 2.2.10 Conducting clinical and bench research and providing expert medical care for patients with leukemia, lymphoma, neuroblastoma, brain tumors, inborn errors of metabolism, hemoglobinopathies, congenital bone marrow failure syndromes, congenital immunodeficiency syndromes, acquired aplastic anemia and other diseases that can be treated with stem cell transplantation.
- 2.2.11 Ensuring ongoing communication and collaboration with the Directors of the Clinical Stem Cell Laboratory (STCL).
- 2.2.12 General Oversight of all PBMT facilities for transplant and cellular therapy, including immune effector cells.

3 COLLECTION FACILITY MEDICAL DIRECTOR

- 3.1 The Pediatric Program Collection Facility Medical Director is licensed in the state of North Carolina, board certified in Pediatric Medicine and Hematology/Oncology, and experienced and trained in hematopoietic progenitor cell therapy. He/she is responsible for the clinical and administrative operations of the corresponding collection facility.
- 3.2 The Pediatric Program Collection Facility Medical Director is responsible for:
 - 3.2.1 Clinical and administrative operations of the corresponding collection facility.
 - 3.2.2 Functioning as co-director with the corresponding Adult Program Collection Facility Medical Director.

4 ADMINISTRATIVE DIRECTOR

- 4.1 The Administrator Director is responsible for providing overall direction and leadership of The Children's Health Center, Valvano Day Hospital and Lenox Baker Hospital Based Clinics. This person has an advanced degree in a business or healthcare-related field. The administrator ensures the effective administrative management of clinical functions related to personnel and policy in order to meet the mission of patient care. The Administrator Director is responsible for the supervision of Nurse Manager for the Children's Health Center and Valvano Day Hospital.
- 4.2 The Administrator Director is responsible for:
 - 4.2.1 Providing strategic and administrative direction to the health center providers in such areas as personnel, information systems and operation or procedural matters.
 - 4.2.2 Attending monthly operational meetings, maintain liaison, discuss problems and recommend appropriate actions or solutions consistent with overall ambulatory goals.
 - 4.2.3 Participating, with other senior Children's Clinical Service Unit (CSU) leadership, in the analysis, planning and strategy formulation of ambulatory entity goals and the implementation of plans and programs,

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- analyze practice operations and needs to determine potential enhancements or improvements in clinic procedures and activities, develop and/or recommend supporting policies and procedures.
- 4.2.4 Directing and coordinating work of designated employees, management personnel activities to meet CSU/Departmental, Hospital and Health System objectives related to the provision of patient care within designated clinical areas.
- 4.2.5 Ensuring a safe environment of care for all staff, patients, and families.
- 4.2.6 Maintaining liaison with all levels of administrative, physicians and outside organizations to coordinate the business of assigned practice or entity administration, accomplish directives and to facilitate the resolution of problems.
- 4.2.7 Establishing major schedules, task assignments and allocation of manpower, space and equipment to ensure conformance with commitments for assigned ambulatory clinics/practices.

5 CLINICAL OPERATIONS DIRECTOR, CHILDREN'S CLINICAL SERVICE UNIT

- 5.1 The Clinical Operations Director (COD) is a Registered Nurse (RN) licensed in the state of North Carolina with a graduate degree in nursing or health care administration. This Director is responsible for managing the patient care on the inpatient unit and coordinating transfer of care to the pediatric clinic. The Clinical Operations Director is responsible for the daily management of patient care on the Pediatric Inpatient Units including the Pediatric BMT Unit, supervising the Nurse Manager of the Inpatient Pediatric BMT Unit; rounding regularly on all patients during their treatment to assure quality of nursing care.
- 5.2 The COD is responsible for ensuring the following, in collaboration with the Inpatient Unit Nurse Manager:
 - 5.2.1 Maintaining an interface with departmental personnel to coordinate clinical operations activities to ensure adequate staffing, space and facilities.
 - 5.2.2 Assuring annual performance reviews are completed on all direct reports.
 - 5.2.3 Developing nursing staff expertise through education and training.
 - 5.2.4 Ensuring effective processes for staff development, recruitment and retention.
 - 5.2.5 Recruiting, hiring and orienting new staff members.
 - 5.2.6 Ensuring a safe environment of care for all staff, patients and families.
 - 5.2.7 Ensuring appropriate bottom line targets are developed and met relative to quality of care through the hospital's quality assurance program.

- 5.2.8 Monitoring and reporting quality assurance and performance improvements to applicable hospital committees.
- 5.2.9 Ensuring criteria for employment for all staff are identified, communicated and maintained beginning at entry into system and annually as required.
- 5.2.10 Serving as a professional role model and mentor to staff.

6 SENIOR BUSINESS MANAGER

- 6.1 The Senior Business Manager is responsible for the financial and administrative aspects of the program. The Senior Business Manager has an advanced degree in business or hospital management. The Senior Business Manager manages and works closely with finance and contracting to assure cost effective care and appropriate reimbursement for patient care services.
- 6.2 The Senior Business Manager is responsible for:
 - 6.2.1 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.
 - 6.2.2 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 PBMT Program.
 - 6.2.3 Identifying 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.
 - 6.2.4 Ensuring 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.
 - 6.2.5 Monitoring 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.

7 REVISION HISTORY

Revision No.	Author	Description of Change(s)	
06	S. McCollum	Section 1 retitled to be an "introduction" section to	
		align with corresponding ABMT document	
		Section 2 updated to reflect Division Chief	
		Terminology and relationship to FACT Program	
		Medical Director	
		Section 3 "Collection Facilities Medical Director"	
		role was added to coordinate with corresponding	
		ABMT document.	
		Section 4: updated to reflect collaboration with	
		nurse manager role.	

Signature Manifest

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Leadership

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Medical Director

Name/Signature	Title	Date	Meaning/Reason
Joanne Kurtzberg (KURTZ001)		10 Jan 2024, 04:40:31 PM	Approved

Quality

Name/Signature	Title	Date	Meaning/Reason
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