
Overview

For many patients living donation would be the best form of renal replacement. This standard expresses a firm, clear but non-aggressive way of encouraging and guiding patients in an early search for a donor.

Users of this standard will need to ensure that practice reflects up to date information and policies.

SFHRenAT3

Help the patient investigate possible living donors

Performance criteria

You must be able to:

- P1 encourage the patient to think and talk about finding possible donors early on in their career once the need and timing for renal replacement is clear and in time to pre-empt dialysis if possible
- P2 review the possibility of living donors with patients established on dialysis and on the Transplant Register at regular intervals (e.g. every six months)
- P3 ask the patient to suggest possible donors and how they think those people might respond (related and unrelated donors)
- P4 discuss with the patient and the team the best approach that the patient can make in each case
- P5 judge which possible donors the patient will readily be able to ask and help them plan the best approach (e.g. how to raise the topic, use of support material, patient/donor groups)
- P6 be flexible in gauging the discussion, knowing when to approach the subject and when to back off
- P7 identify alternative strategies for a patient who is unable to approach one or more possible donors (e.g. involving another family member)
- P8 review the benefits and risks of a living donor transplant to the patient to build their confidence and provide them with supporting information (eg may not be on never-ending waiting list)
- P9 explain the practicalities of living donation (e.g. checking the blood group of an overseas donor, what happens to the patient and the donor regarding work, finance, travel, post-transplant)
- P10 encourage the patient to discuss living donation with their family as one of the treatment options, regardless of whether they see a family member as a possible donor
- P11 provide the patient with the opportunity for discussion on a continuing basis
- P12 provide the patient with written information about living donation, as well as verbal and written contact details
- P13 caution patients against payment, coercion or using informal or commercial alternatives (e.g. because of legal constraints, risks to health)

SFHRenAT3

Help the patient investigate possible living donors

Knowledge and understanding

You need to know and understand:

- K1 anatomy and physiology of the human body
- K2 anatomy and physiology of the renal system
- K3 the immune system
- K4 psychological care skills/loss counselling
- K5 what patients can expect with and without transplantation
- K6 clinical, physiological and psychological characteristics of the patient pathway before and after transplantation – what happens, when, why and how (e.g. how a transplant operation is performed)
- K7 how organs are obtained (e.g. living donation, deceased heart beating and non heart beating donation)
- K8 how organs are selected and matched (living and deceased donors)
- K9 risks and benefits of transplantation (e.g. enhanced life prospects and lifestyle, side effects of immunosuppression, rejection, psychological issues)
- K10 benefits and risks of living donation for donor and recipient
- K11 procedures and criteria associated with the National Transplant Register
- K12 the psychological pressures that transplanted patients encounter (including in relation to living donors)
- K13 effectiveness of different communication and request strategies
- K14 objections to living donor transplantation and how to probe underlying thinking and how to counter it
- K15 the psychological pressures that living donors encounter
- K16 legal requirements for transplantation (e.g. Human Organ Transplants Act 1989, The Human Organ Transplants [Unrelated Persons] Regulations, 1989)
- K17 best practice guidelines (e.g. British Transplantation Society)
- K18 evidence of beliefs about transplantation among informed and uninformed religious and cultural groups (e.g. typical mistaken beliefs that a religion opposes transplantation, religious pronouncements such as Muslim fatwa in favour of transplantation)
- K19 statistics for renal transplantation locally (living related, unrelated and deceased donation)
- K20 patient and living donor information, education and support opportunities
- K21 roles of other members of the multidisciplinary team
- K22 organisational procedures and protocols relating to transplantation for referring and transplant centres
- K23 organisational procedures for prospective living donors
- K24 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K25 the importance of establishing rapport and how to do so
- K26 how to ask questions, listen carefully and summarise back

SFHRenAT3

Help the patient investigate possible living donors

- K27 the importance of encouraging individuals to ask questions and how to do so
- K28 the religious beliefs of different cultures
- K29 the effects of different cultures and religions on care management and effects on family dynamics
- K30 the principle of confidentiality and what information may be given to whom
- K31 the importance of involving individuals in discussions, and how to do so
- K32 how to negotiate effectively with individuals, families and other professionals
- K33 the principles of evidence-based practice, and how to apply them
- K34 coaching skills

SFHRenAT3

Help the patient investigate possible living donors

Additional Information

External links

This standard has indicative links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: Core 1 Communication

SFHRenAT3

Help the patient investigate possible living donors

Developed by	Skills for Health
---------------------	-------------------

Version number	1
-----------------------	---

Date approved	June 2010
----------------------	-----------

Indicative review date	June 2012
-------------------------------	-----------

Validity	Current
-----------------	---------

Status	Original
---------------	----------

Originating organisation	Skills for Health
---------------------------------	-------------------

Original URN	RenAT3
---------------------	--------

Relevant occupations	Health, Public Services and Care; Healthcare and Related Personal Services
-----------------------------	--

Suite	Renal
--------------	-------

Key words	kidney, kidneys, donation, diabetes, donor
------------------	--