

## SFHRenAT5

### Prepare with the patient how immunosuppression will be tailored



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#### Overview

This standard covers the way in which immunosuppression is tailored to a patient is determined to a considerable extent by protocol, the patient's involvement in the planning is important in order for the practitioner to be able to judge the constraints imposed by the patient's circumstances and behaviour and for the patient to build understanding and motivation.

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

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#### Performance criteria

*You must be able to:*

- P1 provide the patient with the opportunity to discuss immunosuppression and their feelings about it in the lead up to a living donor transplant and at regular intervals (eg once every six months or yearly) for a patient on the list
- P2 identify the patient's understanding and beliefs about immunosuppression and provide information to remedy misunderstandings and myths
- P3 explain why they need this medication, how it works and how the drug is monitored (e.g. that the choice of drugs and dosing is largely protocol-based, worked out on a kg/mg ratio for NHB donors, while for others, the patient will need calcineurin inhibitor, steroid, Tacrolimus, when discharged)
- P4 explain how long the patient needs to take it for and the need for them to follow the prescribed regime without the constant intervention of the unit
- P5 identify whether the patient is in a group known to be at risk of non-adherence with medication regimes and what this implies for the individual (e.g. adolescent, having learning difficulty)
- P6 encourage the patient to describe difficulties they have taking medication (e.g. large tablets, taking medication at set times) and identify approaches that will help them (e.g. open, non-blaming strategies for countering based on enhanced understanding)
- P7 explain what happens if the patient doesn't take the medication (e.g. rejection, graft failure)
- P8 explain how tailing-off works (e.g. reducing immunosuppression for maximum benefits) and why it is important to adhere to it
- P9 describe what the patient might expect on the regime of immunosuppression therapy (diarrhoea with MMF and prednisolone, more prone to infections, Cushingoid appearance, mood swings) and for how long
- P10 discuss with the patient the options for managing the effects of the therapy
- P11 explore practicalities of obtaining medication locally and conveniently long term (e.g. payment methods for prescriptions, whether their PCT or practice will prescribe)
- P12 liaise with the Primary Care Team in order to help identify 'risk' behaviours or tendencies and usefully support the multidisciplinary team

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### 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 principles of healthy living
- K6 what patients can expect with and without transplantation
- K7 the nature and risks and benefits of forms of renal replacement therapy for patients in different medical circumstances (dialysis, various, and transplantation)
- K8 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)
- K9 how organs are obtained (e.g. living donation, deceased heart beating and non heart beating donation)
- K10 how organs are selected and matched (living and deceased donors)
- K11 risks and benefits of transplantation (e.g. enhanced life prospects and lifestyle, side effects of immunosuppression, rejection, psychological issues)
- K12 objections to transplantation and how to probe underlying thinking and how to counter it
- K13 how lifestyle affects health specifically in relation to transplanted patients
- K14 procedures and criteria associated with the National Transplant Register
- K15 the pressures that transplanted patients may come up against
- K16 understanding of the rejection process
- K17 current accepted best practice for medication of transplanted patients (e.g. NICE guidelines)
- K18 types and methods of taking different medications
- K19 the effects, side effects and potential interactions of different medications
- K20 the effects, side effects and potential interactions of immunosuppressive therapy on other health conditions, and the effect of other health conditions on immunosuppressive therapy
- K21 immunosuppression therapy
- K22 reasons why transplanted patients fail to take medicine as prescribed and how to anticipate these
- K23 methods of administering and self-administering various kinds of medication
- K24 policies on prescribing
- K25 patient group directives
- K26 patient and living donor information, education and support opportunities
- K27 roles of other members of the multidisciplinary team
- K28 procedures and protocols relating to transplantation for referring and

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- transplant centres
- K29 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K30 the importance of establishing rapport and how to do so
- K31 how to ask questions, listen carefully and summarise back
- K32 the importance of encouraging individuals to ask questions and how to do so
- K33 the religious beliefs of different cultures
- K34 the effects of different cultures and religions on care management and effects on family dynamics
- K35 the principle of confidentiality and what information may be given to whom
- K36 the importance of involving individuals in discussions, and how to do so
- K37 how to negotiate effectively with individuals, families and other professionals
- K38 the principles of evidence-based practice, and how to apply them
- K39 coaching skills

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### Additional Information

#### External links

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

Dimension: HWB4 Enablement to address health and wellbeing needs

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