

SFHRenDD19

Offer psychological and emotional support to the family of the donor



Overview

Many members of the team exercise this standard continually throughout the donation process. It is a response to the extraordinary situation in which the family find themselves, in which they may feel overwhelmed by events and constrained in the ways in which they can express their emotions. The practitioner's role is to help the family and to do so in ways that are consistent with obtaining and maintaining agreement to organ donation. Family members who arrive part way through the donation process or even at the end should receive particular attention.

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 be available throughout the donation process to provide information and support to the family
- P2 explain the current stage of the donation process and why things are happening (e.g. referral to Coroner/Procurator Fiscal, microbiological testing, calling in the retrieval team, examining the body, after organ retrieval)
- P3 take account of the family's stage in the grieving process
- P4 provide information and explanation of any aspect of patient care and donation for newly arrived family members
- P5 allow the family the opportunity to continue earlier conversations with you
- P6 respond to possible objections to donation in a way that is consistent with maintaining the family's agreement (e.g. maintaining focus on the wishes of the patient)
- P7 continue to supply the family with facts about donation in response to questions
- P8 introduce the family to other members of the team they have not met or who they wish to see again and update those team members on the family's response
- P9 encourage the family to talk through and work out their own solutions wherever possible (e.g. what to do with personal belongings, funeral arrangements)
- P10 find out what information the family would subsequently like to receive (e.g. information about the people who receive their relative's organs and tissues and how they may eventually develop lines of communication with the recipients)
- P11 offer referrals for additional emotional support (e.g. counselling and support groups, specialist bereavement service)
- P12 thank them for agreeing to the donation and provide follow-up contact details
- P13 offer to contact the family via telephone within 24 hours post donation to advise them of the outcome, and do so if agreed

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Knowledge and understanding

You need to know and understand:

- K1 anatomy and physiology of the human body
- K2 psychological care skills/loss counselling
- K3 how organs are obtained (e.g. living donation, deceased heart beating and non heart beating donation)
- K4 how organs are selected and matched (living and deceased donors)
- K5 risks and benefits of transplantation (e.g. enhanced life prospects and lifestyle, side effects of immunosuppression, rejection, psychological issues)
- K6 objections to transplantation and how to probe underlying thinking and how to counter it
- K7 guidance on The Microbiological Safety of Organ and Tissues for Transplantation (NHS Executive 2000)
- K8 the role of the coroner or procurator fiscal in consenting for organ donation
- K9 the legal frameworks used to protect organ donors, their families and the recipients
- K10 legal, ethical and consent issues for organ and tissue donation for transplantation and research
- K11 issues of maintenance of patient confidentiality in the critical care and donation contexts
- K12 evidence of beliefs about donation and 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)
- K13 criteria for heart beating and non heart beating donation
- K14 criteria for potential organ donors/criteria for organ donation and contraindications to donation
- K15 the referral process and sequence of events for referring potential donors
- K16 use of and interpretation of invasive monitoring systems to assess suitability of potential organ donor
- K17 how to carry out an examination of a potential organ donor
- K18 how to take a medical history of the potential organ donor
- K19 anatomy and physiology of brain stem death
- K20 guidelines for performing brain stem death tests (e.g. UK Code of Practice, Department of Health 1998)
- K21 recommendations of the ICS Working Group on Organ Donation regarding observation for apnoea
- K22 preconditions to testing for brain stem death
- K23 reversible causes of coma
- K24 clinical tests for brain stem death (inc. absence of brainstem reflexes confirmed by absence of papillary response to light, corneal reflex,

- vestibuloocular reflex, motor response to supraorbital pressure, gag reflex, cough reflex, respiratory movement when the patient is disconnected from the ventilator - consistent with the UK Code of Practice for the diagnosis of brain stem death and the recommendations of the ICS Working Group on Organ Donation)
- K25 legal definitions of death
 - K26 procedures for certification of death
 - K27 procedures for determination of death by cardio respiratory arrest
 - K28 clinical management of an intensive care patient
 - K29 clinical management of a potential heart beating donor
 - K30 clinical management of a potential non heart beating donor
 - K31 how to support an organ donor (e.g. cardiovascular support, endocrine support, respiratory support, renal support, haematological support, temperature support)
 - K32 intensive care and anaesthesia
 - K33 guidelines for withdrawal of treatment
 - K34 local protocols and guidelines for the administration of drugs and fluids in dying patients
 - K35 how to break bad news
 - K36 how to explain brain stem death
 - K37 UKT family care protocol
 - K38 psychology of altruistic action
 - K39 beliefs about death and dying
 - K40 evidence on techniques of requesting donation and dealing with objections (e.g. Gortmaker, Verble and Worth)
 - K41 sources of on-going support to families of organ donors at the time of donation
 - K42 availability of bereavement services both locally and nationally the donation pathway
 - K43 roles of other members of the multidisciplinary team (e.g. retrieval team, critical care staff, local donor liaison nurses)
 - K44 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
 - K45 the importance of establishing rapport and how to do so
 - K46 how to ask questions, listen carefully and summarise back
 - K47 the importance of encouraging individuals to ask questions and how to do so
 - K48 the religious beliefs of different cultures
 - K49 the effects of different cultures and religions on care management and the effect on family dynamics
 - K50 the importance of involving individuals in discussions, and how to do so
 - K51 the principles of evidence-based practice, and how to apply them
 - K52 how to explain difficult subjects in an emotional context

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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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