Provide follow-up support for living donors who do not donate



Overview

This standard is about following up potential donors who are no longer being prepared for donation, perhaps because investigations have yielded adverse findings. The desired outcome is understanding and acceptance of the situation for the potential donor.

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 have all available records and results relating to the donor to hand, and establish why the donation did not go ahead
- P2 make contact with the individual and offer them the opportunity to discuss how they feel (e.g. physically and psychologically)
- P3 meet face to face
- P4 help the individual express their feelings and concerns in an unhurried manner (e.g. using sensitive questioning)
- P5 listen carefully and help the donor to accept their views and feelings
- P6 give contact details of a named follow-up practitioner (e.g. donor liaison sister, renal clinical psychologist)
- P7 offer the potential donor the option of a referral for a second opinion (e.g. living donor co-ordinator) if they are dissatisfied with the reasons for the donation not going ahead
- P8 maintain good communication with the donor's GP and indicate whether further investigation or management is needed for a specific medical problem identified during the work-up process

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Knowledge and understanding

You need to know and understand:

- K1 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K2 the importance of establishing rapport and how to do so
- K3 how to ask questions, listen carefully and summarise back
- K4 the importance of encouraging individuals to ask questions and how to do so
- K5 the religious beliefs of different cultures
- K6 the effects of different cultures and religions on care management and effects on family dynamics
- K7 the principle of confidentiality and what information may be given to whom
- K8 the importance of involving individuals in discussions, and how to do so
- K9 how to negotiate effectively with individuals, families and other professionals
- K10 the principles of evidence-based practice, and how to apply them
- K11 anatomy and physiology of the human body
- K12 anatomy and physiology of the renal system
- K13 psychological care skills
- K14 national guidelines for donors (e.g. UKT, NICE)
- K15 counselling 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: HWB7 Interventions and treatments

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