

SFHRenLD5

Help the potential living donor and recipient to plan the transplantation



Overview

This standard is about enabling the potential recipient and donor to identify and resolve the practical matters that need to be managed in order for the transplantation surgery to be performed at a mutually convenient time consistent with the recipient's state of health.

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 explore the arrangements that both parties will need to make in their current lives in order for the transplantation to take place (e.g. arranging time off work, compensation for lost earnings, amount of sick pay that employers will pay, saving money to finance the time off, transport to transplant centre, arranging family care)
- P2 help the donor and recipient identify their preferred timing for transplantation to suit their work, family and social commitments (e.g. Christmas or summer holidays, planning to fit in with work commitments)
- P3 help the donor and recipient understand and take into account the capacity and logistics of the unit which can limit the flexibility of timing of the transplantation
- P4 provide opportunities for donors and recipients to find out the information they need for planning of the timing of transplantation and the personal organisation they will need to do (e.g. offer to introduce the donor and recipient to other donors and recipients)
- P5 agree a target date for the transplantation surgery
- P6 schedule the assessment of the medical suitability of the recipient as well as the donor so that they are ready together
- P7 discuss with donor and recipient together the surgery to be performed (e.g. site of operations, whether laparoscopic or open cut) and who will perform it
- P8 help the donor and recipient to understand the experience that they recipient can expect as in-patients (e.g. the time of surgery, location of the wards that they will be in, distance between them, how they can communicate, length of stay)
- P9 encourage discussion on any worries or concerns that the donor or recipient may have and know who is more suitable to deal with these concerns (e.g. ambivalence about going ahead with the transplantation from either party)
- P10 explain the possible contingencies of the recipient that may impact on the planned timing (e.g. pre-emptive and failing dialysis increase the recipient's case and decrease the flexibility that can be allowed the donor)
- P11 create a full care pathway for the donor and recipient when they are discharged or transferred from the transplant unit (e.g. when, where and how their care will be continued)
- P12 give the patient verbal and written information on who to contact if they have any concerns

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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 how to interpret test results (e.g. blood group, screening for antibodies)
- K4 legal requirements for transplantation (e.g. Human Organ Transplants Act 1989, The Human Organ Transplants [Unrelated Persons] Regulations, 1989)
- K5 best practice guidelines (e.g. British Transplantation Society)
- K6 current evidence and evidence-based practice for the whole donation process
- K7 how to interpret the donor's and recipient's physical and psychological health, using your own and others' observations, discussion and technical assessment methods
- K8 renal disease and end stage renal failure
- K9 surgical procedures of nephrectomy
- K10 surgical procedure of renal transplantation
- K11 anaesthetic procedures
- K12 pre-operative care
- K13 post operative care, within the first 24 hours and beyond
- K14 family relationships and ways of exploring them through observation, discussion and interviews
- K15 current evidence of the effects of the donation programme on donors and how to minimise adverse reactions
- K16 drugs and medication for transplanted patients
- K17 the practices and expectations of the surgical ward and transplant team
- K18 handover procedures including legal requirements
- K19 other agencies and how to access them (e.g. social services)
- K20 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K21 the importance of establishing rapport and how to do so
- K22 how to ask open-ended questions, listen carefully and summarise back
- K23 the importance of encouraging individuals to ask questions and how to do so
- K24 the religious beliefs of different cultures
- K25 the effects of culture and religious beliefs on individual communication styles
- K26 the different features services must have to meet people's gender, culture, language or other needs
- K27 the effects of different cultures and religions on care management and effects on family dynamics
- K28 the importance of treating individuals fairly and how to do so
- K29 the principle of confidentiality and what information may be given to

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whom

- K30 how information obtained from individuals should be recorded and stored
- K31 the importance of involving individuals in discussions, and how to do so
- K32 how to create a safe environment to allow a donor to withdraw from the programme, revoking consent
- K33 how to negotiate effectively with individuals, families and other professionals
- K34 the principles of evidence-based practice, and how to apply them

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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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