

## SFHRenLD8

# Evaluate the motivation and the psychosocial readiness of the prospective living donor



### Overview

This standard is about assessing the psychosocial suitability of the would-be donor with implications for the prospective donor and their family as well as for the donation process itself. The standard takes into account that donors are a special case: people who are well, volunteering to undergo a surgical procedure and other risks.

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 communicate to the prospective donor that discussions are about their decision and planning the donation programme
- P2 enable the prospective donor to explore openly the occasion, reasons and feelings around their offer to donate
- P3 evaluate the credibility of the prospective donor's decision making so far and evaluate the pressures and rewards associated with it
- P4 evaluate the prospective donor's motivation and emotions
- P5 identify any factors that indicate that the decision to donate is not the prospective donor's own informed decision (e.g. free from inducement, coercion or threat)
- P6 help the prospective donor to understand their own feelings and recognise them as commonly experienced
- P7 offer specialist psychological assessment or support if it is needed
- P8 assess whether the donor has the motivation, is fully informed and free from pressure, to go through with the donation

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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 psychological care skills (e.g. counselling)
- K4 valid consent for assessment and continuing in the transplant programme
- K5 how to create a safe environment to allow a donor to withdraw from the programme, revoking consent
- K6 what renal patients can expect with and without transplantation
- K7 the assessment process and its requirements of donors and members of the multidisciplinary team
- K8 implications of test results for the donor and their family (e.g. people may not be related in the way they thought they were, medical conditions revealed)
- K9 current evidence of the effects of the donation programme on potential donors and how to minimise adverse reactions
- K10 resources available to the assessment process and how to access them (e.g. laboratory services, psychological assessment, specialist counselling)
- K11 how to present to audiences of donors, recipients and families to explain and to promote live donation
- K12 how to facilitate discussions among potential and past donors, recipients and families
- K13 legal requirements for transplantation (e.g. Human Organ Transplants Act 1989, The Human Organ Transplants [Unrelated Persons] Regulations, 1989)
- K14 best practice guidelines (e.g. British Transplantation Society)
- K15 boundaries that must be observed by members of the team in keeping the interests of donor and recipient separate
- K16 current evidence and evidence-based practice for the whole donation process
- K17 commissioning tests (e.g. histocompatibility, cross matching, blood group, screening for antibodies)
- K18 interpreting results (e.g. histocompatibility, cross matching, blood group, screening for antibodies)
- K19 how to interpret a donor's physical and psychological health, using your own and others' observation, discussion and technical assessment methods
- K20 family relationships and ways of exploring them through observation, individual and group interviews and discussions
- K21 investigation and interpretation of donor motivation, its sustainability and

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- risks associated with different types of motivation
- K22 types of coercion and reward applied to donors and how they may be revealed
- K23 how to assess the potential donor's motivation (e.g. free from inducement, coercion or threat)
- K24 how to act on behalf of the donor to convey difficult messages (e.g. withdrawing from donation, a revealed medical condition)
- K25 procedures, protocols and guidelines for the organisation and for links with receiving or referring units
- K26 statistics for renal transplantation locally
- K27 patient and living donor information, education and support opportunities
- K28 working understanding of roles of other members of the multidisciplinary team
- K29 methods of communicating sensitive information to individuals
- K30 how information obtained from individuals should be recorded and stored
- K31 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K32 the importance of establishing rapport and how to do so
- K33 how to ask questions, listen carefully and summarise back
- K34 the importance of encouraging individuals to ask questions and how to do so
- K35 the religious beliefs of different cultures
- K36 the effects of different cultures and religions on care management and effects on family dynamics
- K37 the principle of confidentiality and what information may be given to whom
- K38 the importance of involving individuals in discussions, and how to do so
- K39 how to negotiate effectively with individuals, families and other professionals
- K40 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: HWB6 Assessment and treatment planning

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<b>Developed by</b>	Skills for Health
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<b>Relevant occupations</b>	Health, Public Services and Care; Health Professionals; Healthcare and Related Personal Services
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<b>Suite</b>	Renal
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<b>Key words</b>	kidney, kidneys, donation, diabetes, donor, renal, transplant
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