

# SFHRenDD17

## Conduct last offices for the deceased donor after surgery



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### Overview

This standard enables the deceased donor's family to have their relative returned to them as little affected as possible by the act of donation. It should be led as much as possible by the family's wishes, including having the last offices carried out by a religious representative rather than local staff in partnership with a donor transplant coordinator. Respect for the patient and the family is paramount.

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 identify any religious/spiritual expectations or requirements of the donor's family
- P2 demonstrate to the donor's family that the potential donor will be treated with respect and dignity, giving examples of how this will be done
- P3 where the family request that a religious representative conduct the last offices, enable this to happen consistent with the requirements of any post-mortem examination
- P4 identify and obtain the keepsakes that the donor's family's wishes to have (e.g. locks of hair, handprints, photographs)
- P5 offer the donor's family the opportunity to see their loved one after donation
- P6 enable the donor's family or a religious representative to assist with last offices after donation
- P7 dress the deceased in the clothing and in a manner that the family requests
- P8 place personal items with or on the deceased donor (e.g. jewellery, a favourite toy)
- P9 carry out last offices consistent with good practice, religious requirements and the family's wishes (e.g. washing the body, laying out the body, closing their eyes)
- P10 remove invasive equipment unless post-mortem examination requires these are left in place (e.g. catheters, tracheal tubes)
- P11 allow the family time with the deceased donor after last offices and be on hand to provide emotional support and information
- P12 provide explanation of what has happened and why for newly arrived family members who request it or whose behaviour indicates that such explanation would be worthwhile

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### Knowledge and understanding

*You need to know and understand:*

- K1 anatomy and physiology of the human body
- K2 procedures for last offices according to local practice (e.g. laying out the body, washing the body, closing eyes)
- K3 variations in practice required for religious groups not requiring a religious representative to undertake them
- K4 psychological care skills/loss counselling
- K5 the legal frameworks used to protect organ donors, their families and the recipients
- K6 legal, ethical and consent issues for organ and tissue donation for transplantation and research
- K7 issues of maintenance of patient confidentiality in the critical care and donation contexts
- K8 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)
- K9 how to break bad news
- K10 how to explain brain stem death
- K11 UKT family care protocol
- K12 psychology of altruistic action
- K13 beliefs about death and dying
- K14 sources of on-going support to families of organ donors at the time of donation
- K15 availability of bereavement services both locally and nationally
- K16 roles of other members of the multidisciplinary team
- K17 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K18 the importance of establishing rapport and how to do so
- K19 the importance of encouraging individuals to ask questions and how to do so
- K20 the religious beliefs of different cultures
- K21 the effects of different cultures and religions on care management and the effect on family dynamics
- K22 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: HWB5 Provision of care to meet health and wellbeing needs

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**Developed by** Skills for Health

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**Version number** 1

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**Date approved** June 2010

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**Indicative review date** June 2012

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**Validity** Current

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**Status** Original

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**Originating organisation** Skills for Health

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**Original URN** RenDD17

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**Relevant occupations** Health, Public Services and Care; Healthcare and Related Personal Services

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**Suite** Renal

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**Key words** kidney, kidneys, donation, diabetes, donor, renal, transplant