What are Age-Specific Competencies?

Skills which enable you to care for the patient, resident, or client at that individual's stage of life.

"Age-specific competencies" means the ability to communicate with each patient, resident or client in a way that is appropriate to his or her particular age, capabilities or disabilities, temporary impairments, emotions, stresses, culture, and individual station. While we do not communicate with everybody in the same way, everybody receives the same respectful treatment.

How Will This Help Me?

Enable you to care for each person at every stage of life.

Each patient/resident/client will get individual care, and can be a partner in his/her own care.

Your work satisfaction will be improved as you improve patient care relationships and teamwork.

Meets JCAHO standards!

Age-specific competency is required by the JCAHO for all employees and volunteers who provide direct patient care.

What are these Skills?

Communication

Safety & Security

Health

Recognition of Common Illnesses

Infants and Toddlers

Approximate ages 0-3 years

Are curious!

Healthy Growth and Development:

- * physical rapid growth rate, especially the brain.
- * mental senses, explores, plays, communicates by crying, facial expressions, babbling, then baby talk and simple sentences.
- * social/emotional is trusting, dependent, beginning to develop a sense of self

Communication: parents provide security and physical closeness, parent/child bonding; love and security are vital needs.

Safety: needs safe environment for exploring, playing, and sleeping.

Health: immunizations, proper nutrition, sleep, skin care, oral health, routine screenings.

Examples of age-specific care for infants and toddlers:

- * involve child and parent in care
- * cuddle and hug child
- * provide safe toys and opportunity for play
- * encourage child to communicate smile, talk softly, laugh
- * help parents learn about proper care

Young Children

Approximate ages 4-6 years

Boy, are they active!

Healthy Growth and Development:

- * physical grows at a slower rate, motor skills improve, dresses self, is toilet drained.
- * mental symbols become important, memory improves, and imagination is active.
- * social/emotional identifies with parent(s), is more independent, sensitive to others' feelings; note: safeguard against drowning associated with becoming independent at this age; exhibits fears; likes stories; may be aloof with strangers.

Communication: parents and staff working with child, praise and give rewards, state rules as necessary, play with child; child loves to learn via games. In hospital setting, staff may give toy stethoscope, and reassure child that procedures are not punishment.

Safety: teach safety habits (bike/skate helmets, seat belts, swimming pools, and team sports)

Health: continue immunizations, checkups, teach healthy nutritional habits and good personal hygiene, including the importance of hand washing.

Illnesses: at this age the child's immune system is still immature. Subject to the onset of juvenile diabetes, colds, earaches, head lice, mumps, and ringworm

Examples of age-specific care for young children:

- * involve parent(s) and child in care let child make some choices, like food or juice choices; let child feel he or she is helping.
- * use play techniques toys, games, fun, etc., to teach child and to reduce fear.
- * encourage child to ask questions, play with others if appropriate in the setting, and talk about feelings
- * help parents teach child safety rules

Older Children

Approximate ages 7-12 years

the doers!

Healthy Growth and Development:

- * physical grows slowly until that spurt at puberty
- * mental active, eager learner, understands cause and effect, can read, write and do math
- * social/emotional focuses on school activities and "fitting in," while also developing a greater sense of self, negotiates for greater independence; needs to learn to cope with peer pressure

Communication: encourage them, and give them the opportunity to feel competent and useful; build their self-esteem - ask them to help and praise them for helping; give them tasks they can do successfully (if they can't mow the whole yard, give them half the yard to mow for now); they need a measure of privacy

Safety: continue to promote safety habits (school safety, etc.): encourage them to resolve conflicts peacefully instead of hitting; etc.

Health: continue to keep up immunizations and checkups; continue to teach healthy nutritional habits, and good personal hygiene, including the importance of hand washing; provide information on smoking, drugs, alcohol, and sexuality.

Illnesses: mumps and measles are common for this age group. If they're not vaccinated, they can still get these diseases; also sore throats, head lice, ringworm, etc.

Examples of age-specific care for older children:

- * allow the child to make some care decisions ("In which arm do you want the vaccination?)
- * help build self-esteem ask the child to help you do a task, and recognize his/her achievements
- * guide child in making healthy, safe lifestyle choices (choosing apple juice over a carbonated beverage)
- * if appropriate to the situation, help parents talk with child about peer pressure, sexuality, alcohol, tobacco, other drugs (make appropriate referrals to social workers in the case of management department)

Adolescents

Approximate ages 13-20 years

Transitional phase

Healthy Growth and Development:

- * physical grows in spurts; matures physically; is able to reproduce
- * mental can think abstractly; goes beyond simple solutions, considers many options; able to make independent decisions; can consider consequences; chooses own values; is idealistic; thinks about the future
- * social/emotional develops own identity; builds close relationships; tries to balance desire to be part of peer group with family interests; is concerned about appearances; challenges authority. At this age, may also set career goals and choose lifestyle; likes to feel in control of self (in hospital setting will want to know what test they're going to do next, and what is involved); may need to learn to do dishes again (after about age 12, they forget how)

Communication: key concepts are their need for privacy, respect and acceptance, and the need to learn teamwork

Safety: discourage risk-taking; promote safety habits (safe driving, violence prevention, the hazards of gangs, etc.)

Health: continue regular checkups and update immunizations; promote sexual responsibility; advise against substance abuse

Illnesses: viruses (sties in their eyes, etc.), acne, athlete's foot, mononucleosis, hepatitis

Examples of age-specific care for adolescents:

- * treat more as adult than child; respect their opinions; avoid authoritarian approaches (don't order them around; they will probably rebel)
- * show respect and patience be considerate of how being in the hospital, or the procedures, etc., are affecting them (may be affecting their appearance); their friendships and their friends' opinions are very important to them
- * provide guidance in making positively healthy choices in the hospital setting (set example for when they go home); correct misinformation
- * encourage communication between doctor & adolescent, and if appropriate, between parent & adolescent
- encourage them to ask question regarding any fears they may have
- * involve them in decision-making (even letting them choose their nurse they'll cooperate better with someone they "click" with)

Young Adults

Approximate ages 21-39 years

Building Connections

Healthy Growth and Development:

- * physical reaches physical and sexual maturity; nutritional needs are for maintenance not growth
- * mental acquires new skills and information, uses these to solve problems
- * social/emotional seeks closeness with others; sets career goals and chooses lifestyle (if hasn't already done so by now); chooses community and starts own family; this can be a stressful age: is the person meeting his/her goals? illness adds to stress staff in hospital setting should be aware of this

Communication: needs support and honesty, needs respect for personal values; Type A's need telephones and activity (they can die from inactivity); they need respect for their choices.

Safety: provide information for hazards at home and work; information regarding back safety (avoiding injuries); hurricane/disaster preparedness

Health: encourage regular checkups, update immunizations (tetanus, hepatitis, flu, pneumonia); promote healthy lifestyle (proper nutrition, exercise, weight, etc.); inform about health risks (heart disease, diabetes, cancer, etc.)

Illnesses: heart disease, lung disease, diabetes, cancer, thyroid disease, gastrointestinal disease, increases blood pressure, signs of stress (diarrhea, ulcers), backaches, prostatitis for males, etc.

Examples of age-specific care for young adults:

- * support in making health care decisions
- * encourage healthy and safe habits at home and at work
- * encourages choices for stress reduction
- * acknowledge/respect commitments to family, career, community
- * acknowledge/address worries about the future

Middle Adults

Approximate Ages 40-64 years

Seeks personal growth

Healthy Growth and Development:

- * physical begins to age; may develop/manifest chronic health problems (heart disease, lung disease, etc.); hormonal changes (menopause for women)
- * mental remains mentally active, builds on what he/she already knows; uses life experience to continue to learn create, solve problems
- * social/emotional hopes to contribute to future generations; stays productive; balances dreams with reality; plans for retirements; may care for children and parents (sandwich generation); needs to feel life is meaningful (does not like to feel "stuck")

Communication: keeps a hopeful attitude; concentrates on strengths, not limitations

Safety: address age-related changes (e.g., change in senses, slowing reflexes); increase following time in traffic to allow for slower reflex response; abuse and neglect to show up

Health: encourage regular checkups and immunizations; encourage preventive care; address age related changes (taste buds change, vision changes); address risk factors for heart disease, etc; continue to emphasize need for exercise, good nutritional habits; diet and exercise to control adult onset diabetes; stress related lifestyle can impact health in major ways (divorce, loss of job, etc.)

Illnesses: signs are more evident - heart disease, gastrointestinal disease, cancer (skin cancer, etc.), arthritis

Examples of age-specific care for middle adults:

- * if appropriate and with respect for privacy, may encourage talking about concerns, plans, finances
- * acknowledge physical, mental, social abilities and plans
- * guide in planning for healthy, active retirement

Older Adults

Approximate ages 65-79 years

New opportunities

Healthy Growth and Development:

- * physical continues to age gradually (aging is more noticeable); natural decline in some senses and physical abilities (but older adults do not always decline in all physical and mental abilities)
- * mental continues to be an active learner and thinker; memory skills may start to decline
- * social/emotional takes on new roles (may volunteer); balances independence with need to be dependent in some ways; life review (friends begin to die, make new friends, and many other life issues)

Communication: respect; avoid isolation; encourage acceptance of aging and limitations; driving equals independence; address sense of loss after retirement

Safety: promote home safety (especially to avoid falls)

Health: monitor health more closely; promote physical, mental, social activity; guard against depression, apathy (suicide rate rises in this age group; sometimes suicide pacts among married couples); update immunizations (flu, pneumonia)

Illnesses and Ailments: joint get stiffer; skin changes and gets thinner; they bleed more easily and heal more slowly; Alzheimer's disease shows up more frequently; osteoporosis, arthritis; for men BPH (benign prostatic hypertrophy) - lots of hospital admissions may start around this age

Examples of age-specific care for older adults:

- * if appropriate and with respect for privacy, encourage talking about feelings, fears, loss, grief, life
- * inform about home safety (ramps, bathtub grips), and medication safety
- * provide support for any impairments refer to social workers
- * encourage socialization with peers as a volunteer, etc.
- * support end-of-life decisions, provide information
- * provide nutritional support, information and counseling
- * encourage as much independence as possible, provide opportunities for physical, mental, social activities
- * assist in self care

Elderly and Older Frail Adults

Approximately 80 years or older

Acceptance

Healthy Growth and Development:

- * physical physical abilities decline; increased risk for chronic illness; major health problems; skin may become very fragile and subject to breakdown (handle with care, using palms of hands rather than fingertips); body's ability to regulate heat decreases
- * mental continues to learn; memory skills and/or speed of learning may decline; confusion often signals illness or a problem with medications; confusion is not necessarily a sign of permanent loss of mental abilities
- * social/emotional lives as independently as possible; accepts end of life (and related issues) and personal losses

Communications: encourage expression of thoughts and feelings; avoid despair; use humor and stay positive

Safety: ensure safe living environment; eliminate hazards; prevent falls and injuries

Health: promote self-care and independence; monitor health more closely; emphasize proper diet, activities and rest; decrease stress update immunizations

Illnesses and Ailments: more illnesses and ailments, and more pronounced existing illnesses and ailments; increased or decreased blood pressure; circulation problems, feeling cold

Examples of age-specific care for elderly and older frail adults:

- * encourage talking about feelings, fears, loss, grief, life review, end-of-life decision, provide resources
- * help to stay positive, avoid despair
- * continue to encourage appropriate independence physical, mental, social activities (classes and programs for older adults to keep the brain stimulated)
- * promote safety in the home (safety grips, ramps, etc.); medication safety (remembering to take medications and watching for adverse reactions)
- * help take steps to reduce stress
- * physical care change position slowly, frequently, to avoid skin breakdown
- * ensure warmth
- * ensure safety in the hospital setting to avoid falls and injuries

Roadblocks to Communication

The following affects how you communicate with people. We do not communicate with everybody in the same way, but remember that everybody has the right to be treated with respect.

Assess every patient, resident or client for possible:

physical impairments (e.g., speech impairment following a stroke)

learning abilities/disabilities

cultural differences (e.g., eye contact is taboo/offensive in some cultures; there are food differences; in certain cultures, the husband/father is accepted as the "boss" in the family; place in society/social importance may determine who is the decision maker)

emotional/situational stresses (anxieties and fears of the individual)

language barriers (AT&T translator service available over the phone; there are reading materials available in other languages)

Remember: Give the person your full attention listen and observe