

WHAT ARE AGE-SPECIFIC COMPETENCIES?

They are skills you use to give care that meets each patient's unique needs.

Every patient is an individual. Each has his or her own:

- likes and dislikes
- feelings, thoughts and beliefs
- limitations and abilities
- life experiences

But everyone grows and develops in a similar way. Experts generally believe that people:

- grow and develop in stages that are related to their age
- share certain qualities at each stage

Understanding these stages of life is the key to age-specific competencies.

AGE-SPECIFIC COMPETENCIES BENEFIT YOU, YOUR PATIENTS AND YOUR FACILITY.

They help to:

Ensure quality care. With age-specific competencies, each patient:

- gets the individual care he or she needs and deserves
- becomes a partner in his or her own health care

Improve job performance and satisfaction:

- Putting age-specific competencies into practice can be a challenge, but the rewards are great – improved patient care, relationships and teamwork.

Meet JACHO standards :

- Age-specific competencies are a key area of focus for the JCAHO (Joint Commission on Accreditation of Healthcare Organizations) survey. They are essential to gaining and retaining accreditation.

Age-specific competencies enable you to care for the individual at every stage of life.

HOW MUCH DO YOU KNOW ABOUT GROWTH AND DEVELOPMENT?

Take this self assessment quiz to find out. You do not need to print the quiz.

	TRUE	FALSE
1. Infants and toddlers (birth-3 years) cannot communicate their needs or feelings.		
2. Young children (4-6) lack active imaginations.		
3. Older children (7-12) need to feel competent and useful		
4. Adolescents (13-17) can only understand information and examples that are concrete.		
5. Young adults (18-39) have nutritional needs for continued growth.		
6. Middle adults (40-64) use their life experiences to learn new information.		
7. Young older adults (65-74) can enjoy traveling and spending time with family and friends.		
8. Middle older adults (75-84) experience sensory changes that usually can be compensated for with adaptive equipment.		
9. Older adults ages (85+) can remain cognitively alert and independent with proper support and ongoing gerontological health care.		

HOW DID YOU DO?

- | | | | | |
|----------|----------|---------|----------|----------|
| 1. False | 2. False | 3. True | 4. False | 5. False |
| 6. True | 7. True | 8. True | 9. True | |

In the pages that follow, you will learn some basic facts about human growth and development. Use this information as a starting point to develop the age-specific competencies you need for your job.

As you read, keep in mind that everyone develops at his or her own rate. The age groupings, or stages, in this booklet are just one of many ways to divide human growth and development. They are intended only as a general guideline.

After reading, be sure to:

- avoid stereotyping a patient based on his or her age
- treat each patient as an individual

Remember, no matter what the patient's age, he or she is unique. A key part of your job is learning to recognize each patient's own needs and abilities

INFANTS AND TODDLERS

(Birth to 3 Years) are curious

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – grows at a rapid rate, especially brain size ■ mental – learns through senses, exploring, playing; communicates by crying, babbling, then “baby talk,” simple sentences ■ social/emotional – seeks to build trust in others; dependent; beginning to develop a sense of self 	<ul style="list-style-type: none"> ■ communication – provide security, physical closeness, promote healthy parent-child bonds ■ clinical – keep immunizations/checkups on schedule; provide proper nutrition, sleep, skin care, oral health, routine screenings ■ safety – ensure a safe environment for exploring, playing, sleeping

Examples of age-specific care for infants and toddlers:

- involve child and parent(s) in care during feeding, diapering, bathing
- provide safe toys and opportunities for play
- encourage child to communicate – smile, talk softly to him or her, etc.
- help parent(s) learn about proper child care

YOUNG CHILDREN

(ages 4 to 6 years) are active

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – grows at a slower rate; improving motor skills; dresses self; toilet-trained ■ mental – begins to use symbols; improving memory; vivid imagination, fears; likes stories ■ social/emotional – identifies with parent(s); becomes more independent; sensitive to others' feelings 	<ul style="list-style-type: none"> ■ communication – gives praise, rewards, clear rules ■ clinical – keep immunizations/checkups on schedule; promote healthy habits (good nutrition, personal hygiene, etc.) ■ safety – promote safety habits (use of bike helmets, safety belts, etc.)

Examples of age-specific care for young children:

- involve parent(s) and child in care – and let child make some food choices
- use toys, games, etc., to teach child, reduce fear
- encourage child to ask questions, play with others, talk about feelings
- help parent(s) teach child safety rules

OLDER CHILDREN

(ages 7 to 12 years) are “doers”

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – grows slowly until a “spurt” at puberty ■ mental – active, eager learner; understands cause and effect; can read, write and do math ■ social/emotional – develops greater sense of self; focuses on school activities, “fitting in” with peers; negotiates for greater independence 	<ul style="list-style-type: none"> ■ communication – help child to feel competent, useful ■ clinical – keep immunizations/checkups on schedule; give information on alcohol, tobacco, other drugs, sexuality ■ safety – promote safety habits (playground safety, resolving conflicts peacefully, etc.)

Examples of age-specific care for older children:

- allow child to make some care decisions (“In which arm do you want the vaccination?”)
- build self-esteem – ask child to help you do a task, recognize his or her achievements, etc.
- guide child in making lifestyle choices that are healthy and safe
- help parent(s) talk with child about peer pressure, sexuality, alcohol, tobacco, other drugs

ADOLESCENTS

(ages 13 to 17 years) are in transition

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – grows in spurts; matures physically; able to reproduce ■ mental – becomes an abstract thinker (goes beyond simple solutions, can consider many options, etc.); choose own values ■ social/emotional – develops own identity; builds close relationships; tries to balance peer group with family interests; concerned about appearances; challenges authority 	<ul style="list-style-type: none"> ■ communication – provide acceptance, privacy; build teamwork, respect ■ clinical – encourage regular checkups; promote sexual responsibility; advise against substance abuse; update immunizations ■ safety – discourage risk taking (promote safe driving, violence prevention, etc.).

Examples of age-specific care for adolescents:

- treat more as an adult than a child – avoid authoritarian approaches
- show respect – be considerate of how procedures, treatments, etc., may affect appearances, relationships
- guide teen in making positive lifestyle choices – for example, correct misinformation from teen's peers
- encourage open communication between parent(s), teen, peers

YOUNG ADULTS

(ages 18 to 39 years) build connections

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – reaches physical and sexual maturity; nutritional needs are for maintenance, not growth ■ mental – acquires new skills, information; uses these to solve problems ■ social/emotional – seeks closeness with others; sets career goals; chooses lifestyle, community; may start own family 	<ul style="list-style-type: none"> ■ communication – be supportive and honest; respect personal values ■ clinical – encourage regular checkups; promote healthy lifestyle (proper nutrition, exercise, weight control, etc); inform about health risks (heart disease, cancer, etc.); update immunizations ■ safety – provide information on hazards at home, work

Examples of age-specific care for young adults:

- support the person in making health-care decisions
- encourage healthy and safe habits at work and home
- recognize commitments to family, career, community (time, money, etc.).

MIDDLE ADULT

(ages 40 to 64 years) seek personal growth

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – begins to age; experiences menopause (women); may develop chronic health problems ■ mental – uses life experiences to learn, create, solve problems ■ social/emotional – hopes to contribute to future generations; stays productive, avoids feeling “stuck” in life; balances dreams with reality; plans retirement; may care for children and parents 	<ul style="list-style-type: none"> ■ communication – keep a hopeful attitude; focus on strengths, not limitations ■ clinical – encourage regular checkups and preventative exams; address age-related changes; monitor health risks; update immunizations, smoking cessation ■ safety – address age-related changes (effects on senses, reflexes, etc.)

Examples of age-specific care for middle adults:

- address worries about future – encourage talking about feelings, plans, etc.
- recognize the person’s physical, mental and social abilities, and contributions
- help with plans for a healthy, active retirement

YOUNG OLDER ADULT

(ages 65 to 74 years) enjoy new opportunities

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – ages gradually; natural decline in some physical abilities and sensory deficits ■ mental – continues to be an active learner, thinker; slower response time but able to respond ■ social/emotional – takes on new roles (grandparent, widow/er, etc); balances independence, dependence; reviews life 	<ul style="list-style-type: none"> ■ communication – give respect; prevent isolation; encourage acceptance of aging ■ clinical – monitor health closely; promote physical, mental, social activity; screen for depression, apathy; update immunizations, smoking cessation ■ safety – promote home safety, fall prevention, driver safety

Examples of age-specific care for young older adults:

- encourage the person to talk about feelings of achievements, loss, grief
- recognize need to discuss medication regime with patient, family, physician, and pharmacist to prevent polypharmacy and to support changes in medications
- provide support for coping with any impairments – avoid making assumptions about loss of abilities
- encourage social activity with peers, as a volunteer, with family, etc.

MIDDLE OLDER ADULT

(ages 75 to 84 years) focus on grand parenting and other changing roles

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – functional decline, sensory changes ■ mental – continues to be an active learner, thinker; memory skills may start to change ■ social/emotional – takes on new roles (grandparent, widow/er, etc); balances independence, dependence; reviews life 	<ul style="list-style-type: none"> ■ communication – give respect; prevent isolation; encourage adaptation to aging ■ clinical – monitor health closely; promote physical, mental, social activity; assess for and treat depression; apathy; promote wellness and disease prevention, immunizations, screen for dementia ■ safety – promote home safety, fall prevention, driving safety skills, smoking cessation

Examples of age-specific care for young older adults:

- encourage the person to reminisce and perform a life review
- recognize need to discuss medication regime with patient, family, physician, and pharmacist to prevent polypharmacy and to suggest changes in medications
- provide support for coping with any physical or functional impairments, encourage use of sensory devices – avoid making assumptions about loss of abilities
- encourage social activity with peers, as a volunteer, with family, etc.

OLDER ADULT

(ages 85 and older) move towards acceptance of life and changes it brings

HEALTHY GROWTH & DEVELOPMENT	KEY HEALTH CARE ISSUES
<ul style="list-style-type: none"> ■ physical – physical and functional abilities; increased risk for chronic illness and complex acute medical conditions ■ mental – continues to learn; memory skills and/or speed of learning may decline; confusion often leads to delirium and signals illness or a medication problem ■ social/emotional – accepts end-of-life and personal losses; lives as independently as possible 	<ul style="list-style-type: none"> ■ communication – encourage the person to express feelings, thoughts, avoid despair; use humor, stay positive ■ clinical – monitor health closely; promote self-care; ensure proper nutrition, activity level, rest; reduce stress; update immunizations, screen for depression and dementia and provide treatment, address aspects of polypharmacy, recognize signs and symptoms of delirium ■ safety – prevent injury; ensure safe living environment, encourage driving safety assessment, if needed

Examples of age-specific care for older adults ages 85 and older:

- encourage independence – provide physical, mental, social activities, maximize patient's independence by allowing choices, encourage use of sensory devices
- support end-of-life decisions – provide information, resources, etc.
- assist the person in self-care – promote medication safety; provide safety grips needed, reinforce proper use of adaptive equipment, ramps, make referrals, as needed, maximize patient's mobility, etc.

RECOGNIZE ROADBLOCKS TO COMMUNICATION**Assess every patient you deal with for possible:****■ Physical impairments**

- ⇒ Does the patient have a speech, hearing, or sight disability?
- ⇒ Is his or her confusion due to illness or physical disability?

■ Learning difficulties

- ⇒ At what approximate grade level can the patient understand instructions?
- ⇒ Has he or she been tested for a learning disability?

■ Cultural differences

- ⇒ What is the patient's cultural background?
- ⇒ Could certain gestures (for example, direct eye contact or touching) offend him or her?

■ Emotional stresses

- ⇒ Could the patient's depression, anxiety or fear be a sign of physical or mental illness?
- ⇒ Is he or she worried about how health-care decisions may affect abilities, family, school, job, etc.?

■ Language barriers

- ⇒ What is the patient's primary language?
- ⇒ Could he or she benefit from a translator's services?

Remember to give the person your full attention – listen and observe.

Following is a short quiz to be completed now. Please print a hard copy, mark your responses to the statements, and give to your supervisor to place in your department file.

NAME _____ DEPT. _____ DATE _____

TEST YOUR KNOWLEDGE OF AGE-SPECIFIC COMPETENCIES

	TRUE	FALSE
1. It's important to provide a safe learning environment for infants and toddlers.		
2. Young children should never be given choices.		
3. Older children are concerned with school, fitting in, and being useful.		
4. It's important to involve the teenager as a partner in his or her care.		
5. Addressing concerns about family, money or job issues is not a factor when caring for young adults.		
6. Middle adults need to feel productive and avoid feeling "stuck" in life.		
7. Middle older adults should be encouraged to talk about their feelings of accomplishments and loss.		
8. For adults ages 85 and older, confusion is a definite sign of permanent loss of mental abilities.		
9. You should not let a patient's emotional state or cultural background affect how you communicate with him or her.		
10. "Age-Specific Competencies" means treating every patient the same.		

How Did You Do?

1. T 2. F 3. T 4. T 5. F 6. T 7. T 8. F 9. F 10. F