Student Regulatory Training

Age Specific Competency
Learning Objectives

Upon completion of this training, you will be able to:

- Provide each person the best possible care by demonstrating the skills needed to work with people at different ages and levels of development.

- Describe typical characteristics of patients at different age groups.
Age specific competencies involve understanding the development and health needs of the various groups with whom you work. The developmental lifecycle can be broken down into the following stages:

- Infants
- Toddlers
- Pre-school Age
- School Age
- Adolescents
- Young Adults
- Middle Adult
- Older Adult
- Elderly
During this stage, infants are entirely dependent on others for their care and basic needs. When their needs are met, they develop trust. Inconsistent care can lead to crying and unrest. Crying is the infants' way of communicating that something is wrong.

Physical growth, muscle building and development are rapid during the first year. The goal in providing care to an infant is to maintain **TRUST**. Providing love and nourishment is the key to maintaining **TRUST**. Some ways to provide care to the infant include:

- Not leaving the infant unattended
- Cuddling an upset infant
- Offering age appropriate toys
- Holding and rocking the infant after an invasive procedure
Toddlers: 1 to 3 Years

At this stage, toddlers can walk, talk, feed themselves, and are learning about their world. Parents help their children make decisions. If toddlers are shamed, it tends to lower their confidence. It is important to give positive feedback to toddlers for them to gain self control and strengthen their move to independence.

The goal in providing care to toddlers is to maintain AUTONOMY. To help them accomplish this it is important to first assess the patients’ level of independence. Examples of independence include: toilet training, feeding themselves, dressing themselves, etc.
Toddlers: 1 to 3 Years

Some of the age specific care that is appropriate for toddlers includes:

- Involving the parents and/or guardians in the toddlers’ care
- Explaining procedures to toddlers in simple terms
- Allowing time for toddlers to ask questions
- Letting toddlers touch the equipment
- Demonstrating the procedure on a doll or stuffed animal
- Incorporating home rituals (bedtime stories, favorite toy/blanket)
Young Child: Pre-School, 3 to 5 Years

At this stage, children are beginning to develop a conscience. They are aware of other’s feelings. They know right from wrong and tend to be very creative. They enjoy using their bodies. They may have imaginary friends.

Young children are beginning to develop a sense of privacy. They may ask lots of questions and enjoy conversations. They like stories and make believe. They have some fears, especially being separated from their parents. When providing care to a child of pre-school age, the goal is to PREVENT EXAGGERATED IDEAS.

Interventions

To prevent exaggeration of ideas, explain the procedure just before it is performed - using a doll for demonstration can help. Pre-school age children might feel like it is their fault for being sick; address the guilt of being in the hospital and assure them it is not their fault for being sick. Reassure young children that the procedure is not a punishment. Incorporate daily rituals, like reading a book. Encourage the parents to stay with their children and to bring a security object (blanket or doll). Try to foster initiative, not guilt.
Older Child: School Age, 6 to 11 Years

At this stage, physical growth continues at a slower pace until a spurt occurs at puberty. Older children can do a lot of activities, like sports and crafts. They can accept rules and responsibilities. Completing tasks helps them build self-esteem. Older children like doing things with friends and they want more privacy. They enjoy playing games. They have a better sense of time.

The goal in providing age specific care to older children is to help them maintain INDUSTRY (performance to produce good results). The type of care that is appropriate for school age children includes:

- Asking about friends, interests, accomplishments, concerns
- Explaining procedures and equipment in advance
- Being honest about what will and will not hurt
- Respecting privacy
- Giving children the opportunity to help and do things on their own
- Involving children in their own care
- Praising cooperative behavior
- Keeping them busy ... keeping a journal ... creating a schedule
Adolescent:  
12 to 17 Years

During adolescence, children are developing a sense of identity that is marked by puberty. Sexual features begin to develop. Adolescents can be self conscious of their body changes. They may feel awkward.

Fashion and looks are becoming more of an interest. Adolescents begin to separate from their parents and develop a sense of loyalty to others. Privacy is very important at this stage. The goal in providing care to adolescents is to foster and support their IDENTITY.

To provide appropriate care for adolescents, assess their feelings, attitude, and activities.
Adolescent:
12 to 17 Years

Some of the age specific care includes:

- Avoid giving advice - instead provide encouragement
- Explain in detail what will happen
- Be an active listener
- Provide privacy for procedures and teaching
- Encourage involvement in care and decisions
- Encourage contact with friends and family
- Teach about healthy habits, avoiding pregnancy, and STDs
Young adults reach sexual maturity and their adult height and weight during this stage. They may be increasingly comfortable with their body image. They develop a personal identity and self-reliance. They may experience sexual intimacy, choose partners, and raise families. They may establish their careers. Young adults reflect on changes in their bodies, their lives, and they look at problems from a more mature point of view.

Young adults develop values and use them to make life decisions. Education, work, economic status, and commitment to partners are important to young adults. They become committed to life (socially, occupationally, and sexually) and make important life decisions.

The goal in providing care to young adults is to address COMMITMENTS.
Young Adult: 18 to 45 Years

**Interventions**

In providing care to young adults, it is important to assess their level of stress related to their adult roles. Encourage them to talk about their feelings and concerns, especially how an illness/injury might affect plans, family, and finances.

Encourage young adults to take part in support groups, if appropriate. Involve patients and close family members in decision making and education.

Young adults often ignore symptoms in an attempt to get back to normalcy; this will slow the healing process. Encourage them to gradually increase activity. Discuss nutrition, pain control, physical limitations, and length of hospital stay.
Middle adults begin to experience physical changes, such as decreased endurance; women will experience menopause. Illnesses or injuries can interfere with life plans. Chronic illnesses may develop; this can become stressful if expectations are not realistic. When providing age specific care to middle age adults, the goal is to evaluate EXPECTATIONS.

It is important to first assess the families of middle adult patients, as well as work and leisure concerns. Based on their concerns, the following care should be provided:

- Encouraging delegation
- Helping patients to prioritize work in relation to their health
- Listening to patients' ideas; they often have good suggestions
- Encouraging as much self care as possible
- Starting to explain about advance medical directives
Older Adult: 60 to 79 Years

During this stage, older adults have often achieved a sense of INTEGRITY. They begin to evaluate the choices that they made during their lives, as well as their family relations and economic status. If they find satisfaction with their choices, then they often have a sense of distinction and honor for a life well-lived. If not, they may see missed opportunities and end life with a sense of hopelessness. The goal in providing care to elderly adults is to assess INTEGRITY.

Providing care to older adults begins with assessing how hopeful these patients are and how positive they are about their past. Also, evaluate family support and be a good listener.

Ask open-ended questions about their families. Discuss concerns for maintenance, including personal, financial and spiritual elements. Older adults may have a reduced attention span and may need more time to learn. Use large print, lots of light, and give the information in short segments. Assist with end of life planning.
Elderly adults look at life introspectively. They review the choices that they made during their lives, as well as their family relations and economic status. They may see their health failing and may be unsafe in an environment where they are alone or without assistance. They often accept that death is a part of their lives. They see death of family members and friends. The goal is INTROSPECTIVE and POSITIVE life review.

Caring for elderly includes:
- Keeping a safe environment
- Providing adequate nutrition and fluids
- Discussing concerns for health maintenance including personal, financial, and spiritual elements
- Using large print, enough light, and giving information in short segments
- Assisting with end of life planning
Always keep in mind:

- Growth and development follow general patterns but individuals develop in their own way, their own time
- Everyone will not share the same values, beliefs, and practices
- Patients may appear similar to you but still may be very different
- Avoid stereotyping patients