POPULATION

SPECIFIC
INTRODUCTION TO POPULATION SPECIFIC CONSIDERATIONS

RATIONALE/OBJECTIVE:
Population specific considerations are an important part of patient care. This manual will help you understand one’s physical, psychosocial, cognitive and safety needs at every stage of life. It will also assist with learning specific interventions within each stage to help provide optimal patient care.

The delivery of safe and appropriate care to patients of all ages and is a priority for all health care organizations. Education, training, and competencies will be implemented and documented per University Hospital policy. All staff members are obligated to apply their population-specific knowledge and skills for the well-being of all patients, families, and visitors.

WHO SHOULD COMPLETE THIS SELF-STUDY?
All employees who provide direct care to patients or who are non-clinical that have regular patient contact must take this self-study. For example, Non-clinical employees in Environmental Services or Physical Plant who work in patient care areas need to complete this self-study. In addition, Clinical employees such as Nurses, Physical Therapists and other care providers need to complete the self-study.

CONTENT OF THE SELF-STUDY:
This manual is divided into two sections: Clinical and Non-Clinical. There is a separate exam for each section. Both sections of the manual discuss the spectrum of age groups:

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<td>Old, Old adult</td>
<td>≥ 85 years</td>
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The Clinical section of this manual provides more detailed information regarding age specific considerations for those employees with a clinical focus.

The Non-Clinical section of the manual provides a more general overview of age specific considerations for employees who interact with but are not directly responsible for hands-on care of patients.

HOW TO COMPLETE THIS SELF-STUDY:
Read the material in the appropriate section (Clinical or Non-Clinical) of the self-study, complete the appropriate test (Clinical or Non-Clinical) and return the manual, test, and answer sheet to Organizational Training and Development in Room #417 of Jacobsen Hall.

ANY QUESTIONS?
Please call Organizational Training and Development @ #464-5463.
**SECTION I: CLINICAL EMPLOYEES**

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**SECTION II: NON-CLINICAL EMPLOYEES**

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<td>Old, Old Adult</td>
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</table>
Neonate (1 week - 4 weeks)

Fears/ Stressors:

- Fears: none at this time
- Major stressor: physical immaturity
- Other stressors: lights, noises, handling

Tips for Interactions:

- Speak softly
- Touch gently
- Encourage parents to stay close

Physical:

- Cannot support weight of head
- Skull not fully formed and easily injured

Knowledge/ Cognitive/ Intellectual:

- Learns through sensory stimulation

Safety:

- Unable to recognize dangers and should not be left alone
- Position on back or side; avoid use of pillows or thick/tight clothing
- Support head and neck when moving/carrying
- Wash hands and avoid exposing to infection
- Keep small objects out of reach
- Suspected child abuse, neglect, or unsafe situation must be reported

General Age Specific Care:

- Encourage parents to stay close, promote bonding and participation in care
- Limit the number of caregivers.
- Swaddling increases feeling of security and comfort.
Infant (4 weeks - 1 year)

Fears/ Stressors:

- Fears: separation from primary caregiver, unfamiliar situations, strangers
- Stressors: loud noises, bright lights, sudden environmental changes
- Adult anxiety may be transmitted to infant

Tips for Interactions:

- Speak softly
- Touch gently
- Encourage parents to stay close

Physical:

- Poor temperature control and sensitive to fluid loss
- Immature immune system and easily becomes ill
- By middle of year: Can raise head, roll over, and bring hand to mouth
- By end of year: Reflexes diminish and intentional actions begin
- Can crawl, stand, and even walk alone or with help

Knowledge/ Cognitive/ Intellectual:

- Learns through sensory stimulation and imitation
- Limited ability to communicate needs or problems
- Recognizes primary caregiver from others
- Towards the end of the year: mimics sounds and able to put 2 words together verbally
- Manipulates objects in the environment

Safety:

- Unable to recognize dangers and should not be left alone
- Position on back or side; avoid use of pillows and thick/tight clothing
- Keep medications up and away
- Keep small objects out of reach
- Keep side rails up
- Suspected child abuse, neglect, or unsafe situation must be reported

General Age Specific Care:

- Encourage parents to stay close; promote bonding and participation in care
- Limit the number of caregivers in contact with infant
- Maintain comfortable environment (soft light, warm, noise control)
- Give familiar objects for comfort
**Toddler (1 year - 3 years)**

### Fears/ Stressors:

- Fears: separation from or loss of parents/caregivers
- Stressors: loss of control, restriction of movement
- Hospital environment/strangers/procedures may cause fear

### Tips for Interaction:

- Keep all interactions very simple
- You may need to repeat things several times
- If the child’s actions are inappropriate, show disappointment only about what the child is doing instead of making a general statement. For instance, the behavior is bad, not the child.

### Physical:

- Gains 4 – 6 pounds per year and eats 3 meals a day
- Has 4 – 16 teeth and may continue teething
- Able to walk, run and climb – initially with an awkward, wide stance
- Able to stack blocks, scribble and enjoy age appropriate toys
- Needs 10 – 12 hours of sleep a day plus a daytime nap

### Knowledge/ Cognitive/ Intellectual:

- Responds to verbal stimuli and can follow simple commands
- Can differentiate familiar people from others
- Learns through exploration, discovery, and imitation
- Has short attention span
- Understanding of time is ‘now’ and distance is ‘what can be seen’

### Safety:

- Must be monitored closely
- Chemicals and medications should be kept out of reach
- Choking on objects is a threat
- Keep side rails up
- Suspected child abuse, neglect, or unsafe situation must be reported

### General Age Specific Care:

- Encourage parental presence and participation with care
- Prepare child for procedures; use distraction techniques and Child Life Services
- Offer choices when ones exist
- When hospitalized, may have difficulty sleeping or nightmares
- Speak at eye level with the child and maintain eye contact
Pre-School (3 years - 5 years)

Fears/ Stressors:

- Fears: the unknown, the dark, being left alone and injury
- Stressors: separation from or loss of parents/caregivers
- Stress and illness may cause regression and separation anxiety

Tips for Interactions:

- Keep all explanations very simple
- You may need to repeat things several times
- If the child’s actions are inappropriate, show disappointment only about what the child is doing instead of making a general statement. For instance, the behavior is bad, not the child.

Physical:

- Should gain 4 – 5 pounds per year and grow 2 – 3 inches
- Has full set of 20 teeth and eats three meals a day
- Fine motor skills and coordination increase (i.e. draws and copies a circle)
- Gross motor skills improve (i.e. can jump in place, walk on tip toes, and stand on one foot and hop)
- Able to feed and dress self

Knowledge/ Cognitive/ Intellectual:

- Speech more understandable
- Speaks in 4 – 6 word sentences and knows about 1000 words
- Understands numbers and can count
- The ‘why’ stage: wants to know the cause and purpose of everything
- Habits and routines are important to them; short attention span
- Begins to tell right from wrong

Safety:

- Needs constant supervision
- Keep small objects out of the way
- Accidents and injuries remain a threat due to curiosity and exploration
- Suspected child abuse, neglect, or unsafe situation must be reported

General Patient Care:

- Encourage parental presence and participation with care as much as possible while in hospital setting
- Prepare child for procedures within 5 minutes of procedure; use distraction techniques and/or Child Life services; praise and rewards after procedures
- Offer choices when ones exist
- When hospitalized, may have difficulty sleeping or nightmares
School Age (5 years - 12 years)

Fears/ Stressors:

- Fears: loss of control, pain or injury to the body, disappointing their caregivers, death
- Stressors: separation from caregivers and friends, pain

Tips for Interaction:

- Offer choices, but only ones that can be granted
- Help the child feel useful and valued by including them in discussions and giving them responsibilities whenever possible

Physical:

- Females gain about 20 – 25 pounds and grow 6 inches
- Males gain 15 – 20 pounds and grow 5 inches
- Baby teeth are replaced with permanent teeth
- Neuromuscular skills, balance, and muscle strength improve; may be clumsy as a result of growth spurts
- Despite wide variations, early signs of puberty may appear

Knowledge/ Cognitive/ Intellectual:

- Thinking becomes more logical and can understand cause and effect
- Can tell time and plan ahead
- Increasing understanding of death and its finality
- May not want to ask questions or admit that they don’t understand
- Rules are important to them

Safety:

- Takes risks and dares
- Peer pressure may influence child to act with poor judgment
- Keep medications out of reach as independent behavior may cause ingestion or overdose
- Suspected abuse, neglect, or unsafe situation must be reported

General Age Specific Care:

- Encourage parental presence and participation with care as much as possible
- Prepare child for procedures ahead of time.
- Allow participation in discussions/decision making and expression of feelings and fears.
- Provide privacy
- Define and reinforce behavior limits; offer choices when ones exist
- Continue schooling
Adolescent (13 years - 18 years)

Fears/ Stressors:

- Fears: loss of control, appearance, being different, lack of acceptance
- Stressors: changing appearance, separation from friends
- Physical changes associated with illness and injury are upsetting

Tips for Interactions:

- Recognize their concerns about how they look to others
- Encourage them to talk about their concerns
- Share information with them and encourage involvement when making decisions
- Ask for the meanings of slang or other words you do not understand
- Adolescents need more privacy than younger children

Physical:

- Adult weight is achieved
- Rapid changes in terms of height and sexual characteristics
- Body hair and facial blemishes develop
- Vital signs similar to an adult

Knowledge/ Cognitive/ Intellectual:

- Doesn’t like to ask questions which may appear to make them look ‘stupid’
- Has full intellectual abilities of adult
- Can form own opinions
- Self-esteem should be increasing
- Development of occupational (job-related) identity

Safety:

- Risk of accidents (particularly automobile) increases from self and peers
- Suicide rates and depression is at a high level among adolescents
- May experiment with drugs, cigarettes, alcohol, and sexual activity
- Suspected abuse, neglect, or unsafe situation must be reported

General Age Specific Care:

- Involve adolescent in care with participation in decision making; needs control over events involving them; choice whether parent is present
- Define and set limits firmly when necessary; offer choices when ones exist
- Respect privacy and opinions; interview directly; may need to separate from parent
- Continue schooling
Young Adult (19 years - 44 years)

**Fears/ Stressors:**

- **Fears:** the unknown, loss of control, loss of values that are important to the family, death
- **Stressors:** the unknown, loss of control

**Tips for Interactions:**

- Avoid using slang or medical terms
- Listen carefully to what they are saying
- Encourage questions
- Give recognition and praise for their strengths

**Physical:**

- All areas of physical and motor development are complete
- Brain cell development is at its highest
- Women see most significant changes during pregnancy and lactation

**Knowledge/ Cognitive/ Intellectual:**

- Forms their own opinions and makes their own decisions
- Able to understand complex information
- Chooses vocation (job/career) and receives appropriate education

**Safety:**

- Major cause of death is related to accidents, suicide, and homicide
- Sexually Transmitted Diseases (STDs) are a risk due to experimentation with various lifestyles
- Promote recreational and personal safety habits
- Suspected abuse, neglect, or unsafe situations must be reported

**General Age Specific Care:**

- Should receive at least one thorough health assessment yearly (screen for STDs, hypertension, and cholesterol levels); smoking cessation counseling/program if applicable
- Treat with respect; encourage decision-making and self-care
- Don’t be judgmental; support decisions you may not make
- Involve the individual with plan of care and decision making.
- Explore the impact of hospitalization or illness on work, job, family and other commitments.
- Encourage visits from significant others
- Never use terms of endearment (honey, sweetie, darlin’)

HR/Organizational Training & Development (OTD)
Population Specific; Revision 2016, 5/2018
Tracker Code: POPSPECIFIC
Middle Adult (45 years - 65 years)

Fears/ Stressors:
- Fears: the unknown, loss of control, loss of values that are important to the family, death
- Stressors: the unknown, loss of control

Tips for Interactions:
- Avoid using slang or medical terms
- Listen carefully to what they are saying
- Encourage questions
- Give recognition and praise for their strengths

Physical:
- Slowing of physiological (body) functions
- Increased risk of broken bones
- Increased risk of heart attack or stroke
- Hormone production decreases/reproductive system diminishes
- Decreased vision

Knowledge/ Cognitive/ Intellectual:
- Forms their own opinions and makes their own decisions
- Life experiences provide learning
- Reflects upon and reassesses life
- Understands the reality of death

Safety:
- Increased risk for heart attack or stroke
- Increased risk of broken bones
- Suspected domestic violence, abuse, or unsafe situation must be reported

General Age Specific Care:
- Respect their decisions; allow as much control over their care as possible
- Never use terms of endearment (honey, sweetie, darlin’)
- Allow verbalization of fears and concerns
- Need regular physicals and health care screenings
- Involving the significant other with plan of care
- Provide privacy
- Provide for mobility and functional needs
Older Adult (65 - 85 years)

Fears/ Stressors:

- Fears: The unknown, loss of control, loss of values that are important to the family, death
- Stress: The unknown, loss of control

Tips for Interactions:

- Avoid using slang or medical terms
- Listen carefully to what they are saying
- Encourage questions
- Give recognition and praise for their strengths

Physical:

- Decreased ability to fight infection
- Decreased hearing, vision, taste, smell, touch and balance
- Bones brittle and joints stiff
- Decreased muscle strength
- Overall diminished functioning

Knowledge/ Cognitive/ Intellectual:

- Forgetful
- Short-term memory diminished
- Needs time to process information and link events
- Intellectual (thinking) ability tends to decline depending on use

Safety:

- Increased risk of injury due to physical and intellectual impairments
- May not be able to recognize dangers
- Increased risk of falls
- Unfamiliar rooms may confuse patients and/or cause falls; arrange furniture the way you found it and make sure there is enough lighting
- Strangers in a patient’s room may cause confusion and agitation
- Suspected elder abuse, neglect, or unsafe situations must be reported

General Age Specific Care:

- Preserve dignity and autonomy as much as possible
- Involve family with plan of care
- Encourage reminiscence and validating concerns.
- May require re-orientation to environment, time, and day
- Injury prevention precautions (fall prevention, skin integrity maintenance)
- May require increased use of assistive devices (canes, walkers, wheelchairs)
- Never use terms of endearment (honey, sweetie, darlin’)
- Provide adequate lighting and ensure adequate warmth due to \( < \) heat regulation
The Old-Old Adult > (85 or more years)  
– Fastest growing segment of the population

Fears/ Stressors:
- Loss or death of spouse, adult children, and friends
- Declining mental and physical health; social isolation
- Diminished self-relevance of values important to family
- Loss of independence or increased dependency on others

Tips for Interaction:
- May require longer time to learn; have communication aids (hearing aid, eyeglasses)
- Face patient and speak slowly and distinctly; do not shout
- Include other/family members in education and decision making
- Allow verbalization of fears and concerns

Physical:
- Dry skin
- Decreased hearing, vision, taste, smell, touch and balance
- Decreased muscle strength
- Loss of teeth
- Decreased ability to fight infections
- Sleep pattern irregularity

Knowledge/ Cognitive/ Intellectual:
- Performs tasks more slowly because of loss of hearing, vision and touch.
- Short term memory losses
- Needs time to process information
- Intellectual (thinking) ability tends to decline depending on use

Safety:
- Increased injury risks due to physical and cognitive impairments;
- May be unable to recognize dangers; increased risk for falls
- Unfamiliar rooms may cause confusion and/or agitation and falls
- Suspected elder abuse, neglect, or unsafe situations must be reported

General Age Specific Care:
- Preserve dignity and autonomy as much as possible
- Involve family with plan of care
- Encourage reminiscence and validating concerns.
- May require re-orientation to environment, time, and day
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