

AONE GUIDING PRINCIPLES

FOR THE ELDER-FRIENDLY HOSPITAL/FACILITY

For the Patient

Each patient is a unique individual and should be evaluated as such.

The care of the older adult takes into account many variables that contribute to a robust plan of care. These include:

- An assessment process that evaluates chronological and biological age.
- Risk assessments that are biological/developmental/physiologically based.
- Recognition of what is going on outside of the acute care setting, such as where the patient lives and their relationship with their family.
- The creation of an “elder journey plan” to help individuals navigate the health care system.
- A perspective of the patient’s baseline of where they are at admission and where they want to be at discharge.

Measures are taken to accommodate the patient and family’s special needs.

- The vision/mission statement of the facility states the commitment to addressing the special needs of older patients and families.
- The “rights of the elderly” are assured with an Elder Patient Bill of Rights.
- There is a broader definition of family that can embrace the diversity of family composition of the older adult.
- Older adults are reflected in the marketing and promotional materials used by the facility.

For the Staff

Nurses demonstrate clinical competence in geriatric nursing.

- The NICHE (Nurses Improving the Care of Health-System Elders) clinical competence standards are used for all staff caring for the older patient.
- Certification in Geriatric Nursing is encouraged and supported.

Nurses provide therapeutic response, patience and presence when caring for geriatric patients.

Nurses and staff who provide direct care identify and address the patient’s individual needs and preferences. Staff creates a positive experience for the patient and family.

- Nurses are knowledgeable regarding the resources necessary to provide the geriatric patient with their individual care needs.
- Evidence-based protocols and assessments are used by every discipline that provides care.
- Patient care is evaluated in relationship to the patient, family and nurses’ satisfaction.
- Geriatric experts are available in other disciplines and departments.

Nurses coordinate care across the continuum and “manage the journey” of the patient and family.

- There is a defined process for the nurse caring for a patient and family that assures that the patient’s journey through the health care experience is managed and coordinated.
- The nurse takes responsibility and accountability for the patient and family’s experience by managing the partnership and serving as advocate and broker for the hand-offs to other disciplines/departments/facilities.

Excellent communication, tailored to meet the needs of the geriatric patient, results in a “climate of confidence” for the patient and the nurse.

- Communication competence is measured by the NICHE communication skill lists.
- Older adults and families participate in directing the care and both feel secure and safe.
- Educational materials are usable/friendly/responsive to the needs of the older patient.

The organization provides appropriate resources and systems that support best practice in geriatric nursing care.

NICHE identifies the following resources and system characteristics:

- Evidence-based tools
- Continuing education and certification
- Workforce training in the care of the older patient
- Volunteer programs
- Quality of life programs (i.e., therapeutic activities and social support systems)
- Measurement tools and processes that capture appropriate metrics
- Interdisciplinary processes for planning
- Involving all stakeholders in institutional decision-making regarding the care of older adults

For the Environment

The physical environment supports the needs of the geriatric patient and family and the staff who care for them.

- The physical facility design supports age-related changes in patients and staff.
- Equipment and supplies support evidence-based care, efficiency, and ergonomic safety.
- The physical environment supports family-centered care, and patient comfort/function.

An elder-friendly environment, as defined by the patient and family, also enhances the practice environment for staff.

The elder-friendly environment is embraced hospital-wide.

- There is clear accountability for the care of older adults reflected in the organizational mission and organizational chart.
- There is an assessment and reflection of the concept within the organizational culture.
- Elder Advisory Councils exist to provide input into operational decisions.
- There is education of all within the hospital setting: staff, patients, family, administrators, and board of trustees, regarding the special needs of the older patient.
- “Navigators” are used to assist patients and families in managing the non-care processes, such as insurance and benefits.

Created by AONE, acting as an ANA/SNAPG association in the Nurse Competence in Aging Program.

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