Individualized Aging
Since the aging process is manifested uniquely by each individual, assessing function and expectations of care is essential.

The term “normal aging” may lead to the belief that there is a typical way for older adults to age, both behaviorally and physiologically. Older adults living in a wide variety of settings represent a broad spectrum of strengths, resources, needs, wishes, and expectations.

Functional status assessment utilizing standardized tools, such as the How to Try This® Series and communication techniques to recognize, respond to, and respect older adults’ and caregivers’ expectations regarding outcomes of care, create a way to frame aging differently and to foster relationship-centered care.

End-of-life care includes comfort management, honest communication, coordination of care, and profound respect for the preferences of older adults or caregivers to affirm the uniqueness of each person’s life.

Complexity of Care
The care of older adults requires specialized knowledge in the art and science of both nursing and geriatrics to manage the interplay of factors that influence quality of care.

Older adults represent nurses’ most complex clients. But this has not always been evident in how we teach or in the experiences faculty create for students. Clinical experiences need to recognize, respect, and respond to numerous interconnected factors that affect care and the multiple variables that impact the quality of care for older adults.

Management of multiple co-existing acute and chronic conditions may generate tension between immediate and long term needs. Older adults’ immediate and long-term needs converge in complex ways as older adults experience changes, both temporary and permanent, in environment and levels of independence and functioning. Nurses’ use judgment to observe, interpret, respond, and reflect, based on their knowledge and the older adults’ or caregivers’ expectations.

Unfolding cases, simulations, and teaching strategies using ACE.S Essential Knowledge Domains and Nursing Actions facilitate the ability of nurses to care for older adults and their caregivers in a way that is competent, individualized, and humanistic.
Vulnerability During Transitions

Older adulthood is dynamic, encompassing transitions from one form, state, activity, or place to another. Transitions have the potential to create upheaval and disequilibrium for older adults and their families.

Coordinating care during significant life transitions for older adults is fundamental to providing competent, individualized, and humanistic care for older adults and their caregivers. Care must be more than a series of discrete services; rather, continuity of care must be provided when older adults moves among care settings.

Nurses are advocates for older adults and caregivers learning to manage disease and promote health. The professional identity of the nurse is clearly evidenced in nurses’ role as advocates. As advocates for older adults and caregivers, nurses have the ability to improve the quality of care provided and to incorporate older adults’ and caregivers’ expectations for management of disease and promotion of health.

A diligent focus on maintaining function, control, dignity, and integrity is necessary to promote health, nutrition, function, safety, social interactions and quality of life. Nurses help individuals and caretakers to make choices about living and dying in efforts to reclaim or develop new pathways toward human flourishing.