

STANDARDS OF CARE FOR ADOLESCENTS - IN HOSPITAL AND IN AMBULATORY SETTINGS

Optimal care of the adolescent requires that both the facilities where the care is being provided, and the staff providing care, are sensitive to the particular developmental needs of adolescents.

The adolescent years are dynamic times of growth and development, characterized by:

- Major physical changes and development of sexuality.
- Psychological development throughout the periods of early, middle, and late adolescence. This involves peer relationships, body image, autonomy/interdependence, family relationships, spirituality, values, and cognitive changes.

The issues of privacy, confidentiality, communication, and informed consent are crucial to this stage, and the care provided must reflect this.

CARE IN HOSPITAL

Adequate hospital care of the adolescent patient requires that the environment in which they are placed provide certain basic needs, and that the staff who take care of them understand these needs. **These basic requirements are summarized as follows:**

1 Privacy

The adolescent patient requires appropriate privacy - not only for day to day self care and physical care - but also for interview sessions, physical examinations, and medical procedures. An adolescent can choose to have a family member, peer, or chaperon with them during any physical assessment or interview.

2 Confidentiality

While this is a basic requirement of all interprofessional interactions, the adolescent's emerging self identity makes attention to confidentiality of information, both among family members and between fellow patients, essential. Adolescents, in most cases, consent to their own health care. For optimal care of the adolescent, medical information (diagnosis, nature of medications and investigations, etc) should be given both to the adolescent and the parents/guardians. However, the adolescent needs to know that private and personal information will not be given to the family without his/her knowledge and consent.

Breach of confidentiality is justified where there exists a clear, specific intent to cause harm to self or others, or in an instance of reportable abuse (physical, sexual, or emotional). The adolescent should be told of the impending breach of confidentiality and the reason for it.

3 Peers

Wherever possible, care of the adolescent patient should be provided in a setting shared with similar age (12-16) patients. The institution should be sensitive to the deleterious effects of inappropriate age groupings, and provide for separation of care if a suitable age group is not available. Interaction with similar age peers is an important aspect of adolescent socialization and mutual support. The hospital setting must facilitate this.

4 Educational Needs

- **Health:** Adolescent patients need to be fully informed, in an age appropriate manner, of the nature of the problem affecting them, and helped to understand and come to terms with the present and future details of their conditions. These expectations must be provided with appropriate sensitivity to their timing and content.
- **Scholoastic:** The adolescent years include important educational goals. Qualified teachers in an appropriate school setting should be available. The school program should offer subjects at the level at which the patient was working prior to hospitalization, and should offer vocational/career planning and computer training.

- **Informational:** Patients and their families need to know their rights and responsibilities in regard to the illness and their care in the hospital. The guidelines and expectations of the ward must be fully explained to them. A clear *written policy* on informed consent and the Infants Act should be available to adolescents and their families, and staff should have a thorough understanding of the implications of these policies.
- **Health Promotion:** Adolescents need access to accurate and current information and education on relevant health issues (nutrition, normal growth and development, sexually transmitted diseases, contraception, relationships, drugs, smoking, and other substance use/abuse). This information should be made available in the health care setting.

5 Physical Needs

There must be appropriately sized equipment for the examination of the adolescent patients, as well as adequate facilities for privacy. For their personal comfort and ease, adolescents also need access to mirrors, age appropriate décor, provisions to add their own decorations and belongings, and access to kitchen facilities. Adolescent patients should be encouraged, and be able, to wear their own street clothes.

6 Recreational Needs

Where the patient's condition permits, age appropriate physical recreational activities should be available and be encouraged. Suitable reading materials (magazine and books), games, arts, T.V., video, computers, and audio equipment should be available. If there is a dedicated adolescent area or unit, a suitable teen lounge should also be provided. Alcohol, tobacco, and recreational drugs are not permitted on the unit.

7 Families

Parents and family have a vital role in the care of their adolescent, and they should have unlimited visiting hours (except in special cases where visiting privileges may be curtailed or limited). They need to be introduced to the staff, orientated to the unit, and made aware of the policies and guidelines of the ward. Families need clear and comprehensive information on their adolescent's illness, and the care and treatment recommended. Siblings and the significant others in the adolescent's life (friends/boyfriend/girlfriend) should be included in the plan of treatment where appropriate. The crucial role of the family in the adolescent's life must be recognized. Attention must be given to the influence of their expectations, cultural, and spiritual beliefs, and response to the illness and its treatment.

The unit must promote the family's continuing relationship with the patient and appropriate inclusion in the adolescent's health care, while encouraging support of the adolescent's need for confidentiality and independent decision making. Attendance at parent support and peer support groups should be encouraged, if available.

The staff's interactions with the adolescent's family should be straight forward, consistent, and based on a reasonable assessment of the patient's best interests. These interactions should promote an alliance between the health care team and the family.

8 Staff Needs

The staff responsible for the adolescent patients in hospital or in ambulatory settings must be aware of the needs of the adolescent, and respect and respond appropriately to their developmental needs and behaviours.

9 Patient Protection

In the hospital, the adolescent patient must be protected from any exploitation or abuse. Careful consideration must be given to the number and appropriateness of people and staff having access to the patient and to the patient's history. Patients should be given the opportunity to be accompanied by a relative, friend, or chaperon for a physical examination, assessment, or interview. There should be prior mutual preparation for patients and for any new persons that they have contact with.