



Keeping it real
Kia pono te tika

More skills for working with older people in mental health and addiction services

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Web: www.tepou.co.nz

Email: info@tepou.co.nz

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Background

Why are these skills important and who are they for?

This resource describes the skills required by those working with older people in mental health and addiction settings. It outlines the skills and knowledge needed to support older people and whānau accessing these services to have positive experiences and outcomes.

A workforce responsive to older people's needs is essential given the rapidly growing and more ethnically diverse aging population. The importance of responding to older people's needs is highlighted in *Kia Manawanui Aotearoa: Long-term pathway to mental wellbeing*¹ and *Oranga Hinengaro – System and Service Framework*.²

The indicators have been developed for specialist older people mental health and addiction services; and adult mental health and addiction services (Te Whatu Ora, non-government organisation [NGO], or cultural) that support older people.

Mental health challenges and addiction are common among older people and are often under recognised. Older people experiencing these challenges deserve support to live fulfilling and enriching lives, filled with hope.

More Skills for Working with Older People in Mental Health and Addiction Services (More Skills for Working with Older People) has been developed to align with, rather than replace, professional competency frameworks. The skills are applicable to a range of roles, including clinical (such as nurses, psychiatrists, allied health); the support workforce; and cultural, lived experience and broader roles.

Relationship to Keeping it Real | Kia Pono te Tika

More Skills for Working with Older People builds on Keeping it Real | Kia Pono te Tika (previously *Let's get real*).

Keeping it Real | Kia Pono te Tika describes the values, attitudes, knowledge, and skills required for working effectively with all people and whānau experiencing addiction and/or mental health challenges. It outlines the essential and enhanced level skills required across all health settings for working with tāngata whai ora.

More Skills for Working with Older People is specifically tailored to workforces supporting older people accessing mental health and/or addiction services. It includes indicators at the enhanced level for working with older people. While some indicators are focused on supporting older people with dementia, this is not a dementia focused framework.

It is expected those using *More Skills for Working with Older People* will also use and demonstrate proficiency at the essential and enhanced levels of Keeping it Real I Kia Pono te Tika, as well as the values and attitudes it describes.

Development

More Skills for Working with Older People has been developed with, and informed by, extensive sector and stakeholder engagement. This includes technical, cultural and lived experience perspectives; a literature review; and expert advisory input and review from a range of people and roles working with older people.

More Skills for Working with Older People

As listed below, this resource is based on the seven Real Skills outlined in Keeping it Real I Kia Pono te Tika.

1. Working alongside tāngata whai ora
2. Working alongside tāngata whenua
3. Working alongside whānau
4. Working within communities
5. Challenging discrimination
6. Applying law, policy, and standards
7. Maintaining learning and kaimahi wellbeing.

The following sections outline the indicators for each Real Skill relevant to working with older people. The descriptions of each Real Skill and the expected outcomes reflect those in Keeping it Real I Kia Pono te Tika.

Working alongside alongside tāngata whai ora

Everyone working in health engages meaningfully with tāngata whai ora and focuses on their strengths, to support self-determination and equitable wellbeing outcomes.

Expected outcome

Tāngata whai ora have their mana protected, enhanced and experience respect. They are informed of their options, receive support to make decisions, and achieve their wellbeing goals.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Aotearoa context	Recognises older people with experiences of addiction or mental health challenges are a distinct group with unique needs.
Engagement	<p>Creates a comfortable environment where older people feel at ease to share information and experiences.</p> <p>Demonstrates respect for older people by fostering honesty and hope.</p> <p>Takes additional time with older people to understand and validate their strengths, needs, experiences, and history.</p> <p>Explores concerns that may affect older people's engagement. For example, self-stigma, ageism, loss of independence, connection with dependant whānau, connection to their home, or access to services.</p> <p>Recognises older people's worldviews are shaped by their diverse life experiences over time, which can influence their engagement.</p> <p>Discusses topics sensitively, free from judgment, and recognises some topics may be considered intrusive or disrespectful in some cultural contexts. For example, substance use, sex, and sexuality.</p> <p>Clearly communicates challenging or difficult information while conveying realistic hope for the person.</p>

Accessibility

Recognises possible physical barriers to accessing support for older people. For example, transport, disability, and limited mobility.

Acknowledges potential communication barriers to accessing support and provides appropriate resources. For example, access to interpreters, augmentative and alternative communication (AAC) tools, easy read and visual aids for older people with language differences, cognitive challenges, hearing impairments or other disabilities.

Supports the creation and maintenance of safe, accessible, and age-appropriate environments in older people's mental health and addiction services. For example, ensures spaces are designed to reduce stress and confusion, and accommodate mobility and sensory needs.

Where appropriate, collaborates with specialist, community, or social services to assist older people to overcome barriers to accessing support.

Stages of aging

Recognises the significant impact transitions and losses can have on an older person's wellbeing. For example, changes in social or whānau roles, place of residence, loss of independence or social connections.

Discovers what wellbeing means to older people as they transition through different stages of aging.

Recognises the level of support needed by older people can differ over time and for each person.

Recognises that supporting older people includes whānau (when appropriate) as they adapt to significant life transitions.

Spirituality, wairuatanga, and religion

Acknowledges the significance of spirituality, wairuatanga, and religion for some older people, and attentively listens to their beliefs and needs.

Engages sensitively when discussing spirituality, wairuatanga, and religion with older people, and recognises some older people may have had negative or traumatic experiences when engaging with religious organisations.

Involves appropriate support as needed for spirituality, wairuatanga, and religion. For example, cultural support and services, kaumātua, or religious and spiritual leaders.

Sex and sexuality

Recognises the significance and changing nature of intimacy, sex, and sexuality for many older people.

Recognises barriers to intimacy that older people may experience. For example, in settings where they are separated from their partners or due to impairments.

Adopts a respectful, sensitive, and trauma-informed approach when discussing older people's sexual health or sexuality.

Understands sexuality can be fluid and older people may choose to express this in diverse ways, including those identifying in rainbow communities.

End of life

Understands end-of-life processes and acknowledges the varying needs of older people and whānau during this time.

Discusses end-of-life with the upmost respect, sensitivity and compassion, and engages with appropriate cultural, religious, and community support if needed.

	<p>Explores specific end-of-life concerns for older people. For example, whether their wishes for a preferred burial place will be respected by whānau and others, and the rights of partners from people in rainbow communities.</p> <p>Technology</p> <p>Recognises the value technology can have in enhancing older people's wellbeing. For example, enabling connection with whānau, support networks, or tools such as smart watches to support independence.</p> <p>Supports development of older people's data literacy and recognises potential risks, such as digital harm and scams.</p> <p>Uses or recommends technologies that support older people's wellbeing. For example, telehealth services, apps, and medication reminders.</p> <p>Recognises barriers for some older people in using technologies and applies alternative strategies to mitigate impacts on access to health services.</p>
Diversity	<p>Works effectively with older people from diverse cultural, social and community backgrounds.</p> <p>Asks respectful questions rather than making assumptions. For example, based on gender identity, culture, age, disability, sexual orientation, and spirituality.</p> <p>Responds to older people with respect, validation, and recognises previous experiences of ageism, racism, homophobia, biphobia, transphobia etc.</p> <p>Understands barriers diverse groups might experience in accessing or engaging with support. Such as concerns about continued access to gender-affirming care or historical distrust of addiction and mental health services.</p> <p>Recognises the impact of generational social norms on older people, including social and legal changes they have experienced through their lives.</p>

	Recognises older people may have a diverse range of emotions and worldviews about becoming older and some may not identify as an older person.
Kotahitanga including supported decision-making	<p>Recognises and respects older people as experts in their own life and includes them in all decisions, whether they are present or not.</p> <p>Supports older people to be active participants in decision making. For example, adapting information and processes to their current cognitive capacity.</p> <p>Recognises decision-making norms vary across cultures and is guided by older people and whānau (where appropriate) in determining decision-making approaches, roles and responsibilities, and engaging cultural support as needed.</p> <p>Involves identified whānau, Enduring Power of Attorney, or other trusted people where appropriate to support decision making.</p> <p>Ensures information is available in appropriate formats to make informed choices. For example, facilitating access to relevant communication aids and devices to support decision making.</p> <p>Ensures older people and whānau understand the purpose and process of informed consent, including rights, options, and potential risks or benefits.</p> <p>Balances maintaining a person's safety, with positive risk taking, autonomy, and independence, and recognises some systems or whānau, may prioritise risk elimination over the person's autonomy.</p>
Assessment, planning, support	<p>Assessment</p> <p>When applicable to the role, implements evidence-based screening and holistic assessment, using age and culturally appropriate tools, and involving whānau as required.</p>

Acknowledges assessments can be challenging for older people and whānau, and ensures assessment processes are clear, understood and respectful.

Takes time to conduct assessments with older people. For example, allowing time for revisits or gathering additional information later when the older person feels more settled.

Ensures older people are routinely screened for changes in physical health. For example, cognitive health, substance use, sexual health, pain and sensory impairments like hearing loss.

Considers all forms of abuse towards older people (elder abuse) in screening and assessment. This includes physical, emotional, sexual, financial, neglect, and psychological abuse.

Ensures assessment outcomes are delivered in a timely, sensitive, and culturally appropriate manner.

Understands suicide risks may present differently for older people, particularly in the context of declining health and wellbeing challenges.

Responds in a culturally aware way in supporting tāngata whai ora who are feeling unsafe or at risk of suicide at different age stages.

Complexity and overshadowing

Recognises that a complex range of challenges can impact on older people's wellbeing. For example, grief, loneliness, physical health and discrimination.

Recognises that physical health factors can mimic or worsen mental health concerns and cognitive functioning for older people. For example, urinary tract infections, nutrition, sleep issues, dehydration, chronic pain, and medications.

Recognises some mental health challenges can manifest as physical symptoms, such as anxiety or depression.

	<p>Recognises cognitive impairments and intellectual disability, can mask, mimic or overshadow mental health concerns and substance use in older people. For example, dementia can mimic mental health challenges with symptoms such as anxiety and depression.</p> <p>Understands the concept of social frailty and its impact on mental and physical health.</p> <p>Cognitive capacity</p> <p>Understands the range and impact of cognitive impairments, which can change or reverse over time.</p> <p>Understands the concept of mental capacity and implications for older people's autonomy and decision making.</p> <p>Understands that psychological factors can worsen or mimic cognitive impairment. For example, loneliness, and post-traumatic stress disorder (PTSD) can look like dementia.</p> <p>Recognises problematic substance use can cause cognitive impairments.</p> <p>When applicable to role and indicated, uses appropriate tools to carry out basic screening for cognitive impairment, and seeks support to interpret results, and refers for comprehensive assessment when needed.</p> <p>Integrated support</p> <p>Works in an integrated way within multidisciplinary teams to support older people with multiple or complex needs.</p> <p>Demonstrates an in-depth understanding of the wider health, disability, social, and community sectors, and how older people's mental health and addiction services fit within these.</p> <p>Collaborates across health, disability, social, and community sectors to ensure continuity of care and holistic support for older people.</p>
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	<p>Supports older people and whānau to understand and navigate the wider health, disability, and community sectors and systems where appropriate.</p> <p>As appropriate to role, provides consultancy to aged care facilities about the treatment and wellbeing of older people.</p> <p>Recognises when to refer older people for specialist assessment, specialist services, or specialist environments.</p> <p>Facilitates smooth transitions to different settings and minimises distress and trauma. For example, from losing one's home or independence.</p> <p>Operates effectively in various environments, including care facilities and hospital environments, and recognises the unique challenges settings pose for both older people and the workforce.</p> <p>Formulation and planning</p> <p>Recognises older people have developed many useful coping strategies over their lives and incorporates these into wellbeing plans, treatment, and support.</p> <p>Recognises the experiences and needs of older people who have faced mental health challenges and addiction earlier in life may differ from those who encounter these for the first time in older age.</p> <p>Recognises older people who develop a disability later in life may adapt differently to people with lifelong disabilities.</p> <p>Recognises when extra support may be needed to cope with natural life events and facilitates access to appropriate support. For example, from grief or loss.</p> <p>Uses holistic models of wellbeing (like Te Whare Tapa Whā) and understands how factors, such as social and community connectedness and physical activity, help prevent conditions like dementia and improve wellbeing.</p>
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	<p>Works collaboratively with older people and whānau to identify and access meaningful activities that support their wellbeing.</p> <p>Understands factors influencing brain health, such as untreated hearing loss and substance use.</p> <p>When applicable to role, adapts and applies a range of best practice therapeutic approaches to support older people. For example, Cognitive Behavioural Therapy (CBT) and Acceptance and Commitment Therapy (ACT).</p> <p>Understands age should not be the sole determinant of access to older person's mental health services, as other factors impact the appropriateness of these services. For example, young onset conditions, cognitive function, and personal preferences.</p> <p>Recognises many older people may choose to be supported by adult, rather than older adult services, and advocates for access to services people are most comfortable in.</p> <p>Medication and physical health</p> <p>Understands the importance of screening and monitoring physical health in older people, referring to specialist support when needed.</p> <p>Understands the purpose and risks of medications commonly prescribed to older people. For example, their typical side effects, potential for addiction, interactions with other medications or substances, and potential impacts on physical and cognitive functioning.</p> <p>If role appropriate, ensures older people and whānau understand all relevant information related to prescribed medication to help make informed choices. For example, risks, cost, right to decline medication.</p> <p>Understands older people may use a range of alternative, traditional, or non-pharmaceutical approaches to manage pain or overall health.</p> <p>Ensures older people have access to regular medication reviews.</p>
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If within role scope, effectively measures and assesses physical pain in older people, referring for further specialist assessment as needed.

Substance use

Understands risks for older people in relation to substance use and the effects of aging on substance metabolism. For example, falls, self-neglect, elder abuse, lower mental and cognitive wellbeing, and impaired driving.

Understands alcohol-related dementia can present in younger people.

Understands the range of best practices to address addiction among older people, including gambling and behavioural addictions.

When indicated and applicable to role, screens for addiction using appropriate tools, seeking cultural or other support as required.

Responds effectively and sensitively to addiction in older people and provides relevant information. For example, interactions between alcohol use and medications.

Works in partnership with older people and whānau (when appropriate), to create harm reduction plans and facilitate access to appropriate support.

Safety considerations

Understands specific safety considerations for older people. For example, cognitive decline, prescribed substance misuse, poor medication management and review, social isolation, elder abuse, and the impact of falls.

Collaborates with older people and whānau (where appropriate) to recognise, assess, and mitigate safety concerns. If role appropriate, uses relevant tools to support their safety.

<p>Trauma-informed approach</p>	<p>Recognises older people may have additional needs and challenges when addiction and/or mental health challenges have significantly affected their lives. Such as experiencing homelessness or institutional care.</p> <p>Understands the cumulative effects of experiences and incorporates this understanding into health planning and support. For example, experiences of institutionalisation, abuse in care, strained whānau relationships, and trauma over time.</p> <p>Grief</p> <p>Understands the diverse types of grief and trauma older people may experience, including historical or intergenerational trauma.</p> <p>Understands grief can stem from multiple cumulative losses and may have compounding effects. For example, from loss of loved ones, independence, jobs, mobility, housing, lifestyle, hobbies, or pets.</p> <p>Works sensitively with older people and whānau (where appropriate) to explore their experiences of grief and trauma, avoiding re-traumatisation, and acknowledging the impact on wellbeing.</p> <p>Understands specific bereavement and trauma support options and integrates this understanding into wellbeing planning.</p> <p>Elder abuse</p> <p>Understands abuse of older people can take various forms, including intimidation, neglect, and abuse. For example, institutional, emotional or psychological, financial, physical, and sexual abuse.</p> <p>Recognises older people may find it difficult to disclose abuse when perpetrated by someone in a close relationship with them and/or they rely on for support. For example, whānau or people providing services.</p> <p>Recognises signs of abuse, such as unexplained injuries, behaviour changes, withdrawal, or poor hygiene.</p> <p>Understands service processes for reporting abuse.</p>
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	<p>Sensitively supports older people and whānau to seek appropriate professional support when needed.</p> <p>Least restrictive practices</p> <p>Avoids labelling older people or their behaviour as difficult, instead seeking to understand what needs are being expressed.</p> <p>Uses best practice de-escalation techniques and least restrictive practices to safely support older people, seeking support where needed.</p>
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Working alongside tāngata whenua

Everyone working in health contributes to tino rangatiratanga, ōritetanga (equity), hauora, and whānau ora for tāngata whai ora and whānau Māori.

Expected outcome

Tāngata whai ora and whānau Māori experience respect and are supported to access options informed by te ao Māori to achieve hauora goals.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Te reo and tikanga Māori	<p>Wherever possible, facilitates access to support and information in te reo Māori if this is the older person's preferred way of communicating.</p> <p>Upholds the mana and life experiences of each pakeke (adult) or kaumātua (elder) that accesses support, emphasising their strengths and value to whānau and communities.</p> <p>Understands what holistic wellbeing and support means for pakeke and kaumātua, including the importance of whānau, mokopuna, and community connections.</p> <p>Acknowledges core components of wellbeing for pakeke and kaumātua, such as rangatiratanga, having a sense of purpose, autonomy and cultural identity (such as practicing tikanga); helping others; and wairua (spiritual wellbeing).</p> <p>Demonstrates understanding of te ao Māori, tapu and noa, and continually builds on this knowledge.</p> <p>Respects the beliefs, values, conceptualisations, and perspectives around aging for pakeke and kaumātua, including whakapapa and mate wareware (dementia).</p> <p>Recognises and understands the responsibilities associated with the later stages of life.</p>
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	<p>Understands when and who to consult with for advice and support for older Māori. For example whānau, kaumātua, hapū, and iwi.</p> <p>Promotes cultural safety for pakeke and kaumātua accessing services.</p> <p>Identifies and addresses unconscious cultural and identity related bias to ensure inclusive and culturally safe support of pakeke and kaumātua. For example, learns about te ao Māori understandings of sexuality and gender.</p>
Whakawhanaunga	<p>Recognises and understands specific barriers pakeke and kaumātua may face in accessing support. For example, cultural disconnection, mistrust of services, geographical isolation, or lack of culturally appropriate care.</p> <p>Recognises later life may be a time when pakeke and kaumātua who have lost connection with iwi, hapū, and whenua may seek reconnection with their whakapapa.</p> <p>Recognises the value of social connection for pakeke and kaumātua.</p> <p>Facilitates opportunities for reconnection with iwi, hapū, and tūrangawaewae.</p> <p>Facilitates opportunities for pakeke and kaumātua to connect with others in ways that uplift their wairua and wellbeing. For example, community celebrations, events and hui.</p> <p>In accordance with their preferences, advocates for and helps connect whānau Māori to Māori-specific support services.</p> <p>Supports pakeke and kaumātua who want to be cared for in the community by whānau.</p>
Manaaki	<p>Greets pakeke and kaumātua warmly and offers hospitality. For example saying “Kia ora whaea” and offering water or tea at each interaction.</p> <p>Understands the value of a welcoming physical environment for pakeke and kaumātua. Such as having wai available for cleansing, as tangible representations of wairua, at the entrance of a service.</p>

	<p>Recognises the mana of words and thoughts, and that engaging kaumātua with positivity, respect, and aroha can uplift wairua and have a meaningful impact on wellbeing.</p> <p>Understands that supporting whānau or others in the community can promote pakeke and kaumātua wellbeing.</p>
Wairua	<p>Recognises the significance of wairuatanga (spirituality) to many Māori.</p> <p>Facilitates discussions to explore and understand the older person's expressions of wairuatanga, involving kaumātua or other cultural advisors when appropriate.</p> <p>Understands the significance of nourishing wairuatanga for Māori living with mate wareware.</p> <p>Identifies effective ways to support and nurture wairuatanga.</p>
Tuakiri tangata	<p>Understands that to ensure cultural safety and comfort, some kaumātua may wish to be supported by kaimahi Māori, and facilitates access where possible.</p> <p>Supports kaumātua and whānau to access Māori-led and Māori-safe services that strengthen cultural and whānau connections, in line with their preferences.</p> <p>Understands specific referral pathways available for older Māori. For example, primary care, addiction services, Māori mental health services, Whānau Ora, Iwi and hapū services, and whānau peer support.</p>
Hauora Māori	<p>Understands and values holistic, meaningful, and culturally safe practices, such as rongoā Māori.</p> <p>Applies Te Whare Tapa Whā routinely and competently when exploring kaumātua wellbeing, including taha hinengaro, taha tinana, taha whānau, and taha wairua.</p>

Working alongside whānau

Everyone working in health supports whānau wellbeing and ensures that whānau, including children, have access to information, education, and support options.

Expected outcome

Whānau receive support to achieve their health and wellbeing goals, as determined by them.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Whānau engagement	<p>Recognises the importance of whānau to the older person, and the older person's role within whānau.</p> <p>Recognises diverse forms of whānau (including neighbours, friends, or pets) and is guided by the older person.</p> <p>Recognises potential complexities within whānau relationships that may influence support, such as rainbow older people with non-accepting whānau.</p> <p>Understands that, beyond the older person themselves, whānau often have deep knowledge of the older person's preferences, values, needs, and support they may require.</p> <p>Supports older people to re-establish or strengthen whānau connections where appropriate.</p>
Self-determination and kotahitanga	<p>Values chosen whānau as experts in the older person's care, ensuring they are listened to and treated with respect.</p> <p>When appropriate, and with the older person's consent, ensures whānau are included in discussions, consulted for advice, and actively involved in wellbeing and advanced care planning.</p> <p>Ensures whānau have the information they need to effectively support their whānau member. For example, information about cognitive decline and dementia, caregiver burnout, elder abuse, the brain-body connection, grief, substance use, and medication management.</p>

	<p>Recognises the impact of aging on whānau dynamics, particularly the challenges faced by a partner (who may also be older) and/or adult children who take on caregiving roles.</p> <p>Recognises signs of overwhelm and burnout within whānau and their need for support to ensure best outcomes for older people.</p> <p>Aligns support plans with the needs and capacity of whānau members.</p> <p>Provides or connects whānau with appropriate services to ensure their wellbeing when supporting whānau members. For example, cultural, faith based, and community services.</p>
Supporting parents and their children	<p>Recognises older people may have dependent whānau members such as partners, adult children, grandchildren or pets.</p> <p>Understands that supporting older people may require facilitating support for dependent whānau.</p>
Trauma-informed approach	<p>Recognises specific grief, such as grief related to dementia, degenerative conditions and suicide.</p> <p>Understands that everyone grieves in their own way, in their own time, and the potential for complex grief experienced by whānau. This includes grief experienced before and after the death of an older person, and changes in family roles and dynamics.</p> <p>Supports whānau in accessing appropriate grief support and resources.</p> <p>Acknowledges the limited availability of grief support for whānau of older people, and advocates for the development of appropriate grief support and resources.</p>

Working within communities

Everyone working in health recognises that tāngata whai ora and whānau are part of communities.

Expected outcome

Tāngata whai ora and whānau have meaningful connections to communities of their choice, to support and enhance their wellbeing.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Community concepts	<p>Values and acknowledges the significant contributions older people have made to their communities.</p> <p>Understands the impact issues such as isolation, loneliness, loss of independence, and boredom have on older people's wellbeing.</p> <p>Understands being alone and loneliness are different concepts, and the need to explore these with people rather than assume.</p> <p>Understands factors that contribute to older people's feelings of loneliness, isolation, and disconnection from their community. For example, language barriers, hearing, vision and mobility loss.</p>
Community connection	<p>Recognises the value of community connection for older people and supports strengthening connections, especially for those living alone.</p> <p>Understands community resources and supports available for older people like community groups, communities of belonging, cultural and ethnic organisations. For example, Age Concern, Ministry for Ethnic Communities, libraries, and community hubs.</p> <p>Facilitates opportunities for older people and whānau to access local community-based and age relevant resources and services. For example, where they can both give and receive support from their communities.</p>

	<p>Supports older people and whānau in understanding and navigating various support services, funding pathways, and processes where appropriate. For example, Needs Assessment and Service Coordination (NASC) services.</p> <p>Peer support</p> <p>Understands the value and importance of formal and informal peer support networks for older people.</p> <p>Supports older people to access formal or informal peer support where appropriate and available.</p>
Promotion and prevention	<p>As appropriate to role, develops and shares accessible materials and resources informing older people and whānau of available mental health and addiction services.</p> <p>Contributes to development of strategies that promote the importance and accessibility of mental health and addiction services for older people.</p> <p>As appropriate to role, raises community awareness of specific addiction and/or mental health challenges faced by older people.</p> <p>As appropriate to role, provides education on the unique mental health and/or addiction needs of older people, including where possible the perspectives of older people. For example, providing education for healthcare professionals, whānau, support people, and community organisations.</p> <p>Shares evidence-based practices and success stories of effective approaches in mental health and addiction services for older people.</p> <p>Understands late-life suicide prevention and postvention principles.</p>

Challenging discrimination

Everyone working in health actively challenges discrimination and promotes a valued place and օritetanga for tāngata whai ora and whānau.

Expected outcome

People working in health are strong advocates for the elimination of discrimination relating to addiction, mental health challenges, racism, and all other forms of discrimination.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Human rights	<p>Advocates for older people by actively confronting stigma and ageism, and fostering respect, inclusion, and equitable access to services.</p> <p>Raises awareness of and challenges ageism and discrimination through knowledge sharing and targeted health promotion initiatives.</p> <p>Supports older people to effectively communicate their needs and preferences when accessing services to support self-advocacy.</p> <p>Supports older people and whānau in navigating complaints processes related to health services. This includes making complaints under the Code of Health and Disability Services Consumers' Rights.</p> <p>Understands the wider range of frameworks that support older people's wellbeing. For example, Enabling Good Lives (EGL) framework that supports disabled people.</p>
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Addiction and mental health-related discrimination	<p>Recognises how ageism, ableism, and broader discrimination create barriers for older people accessing services.</p> <p>Recognises how discrimination over an older person's life span can impact mental health.</p> <p>Advocates for services to be designed to meet people's needs and circumstances, irrespective of age, ensuring access and support across service boundaries.</p> <p>Promotes and models positive cultural norms within the workplace by respecting diverse identities and life experiences. For example, addressing disrespectful jokes, slurs, and discriminatory behaviour.</p>
Self-stigma and associative stigma	<p>Recognises specific diagnoses (like dementia and mental health challenges) can be associated with unique forms of self-stigma and associative stigma, and the impact on older people's wellbeing and engagement.</p> <p>Supports older people to challenge and manage the impacts of self-stigma, sharing evidence-based tools and strategies.</p>
Inequity and intersectionality	<p>Recognises older people's diverse identities reflect their worldviews and life experiences of advantage and disadvantage, such as their ethnicity, age, gender, sexuality, faith, or disability status.</p> <p>Understands that identities intersect, and where they do, can amplify a person's advantage or disadvantage. For example, experiences of both ageism and sexism.</p> <p>Understands people's identity can change over time with different life experiences and societal changes. For example, moving into care homes, and feeling safe later life to identify within rainbow communities.</p>
Language	<p>Actively models a positive, empowering, and hopeful view of aging.</p> <p>Challenges use of derogatory and patronising terms and beliefs around older people.</p>

Applying law, policy, and standards

Everyone working in health implements legislation, regulations, standards, codes, and policies relevant to their role in a way that actively protects the rights of and supports tāngata whai ora and whānau.

Expected outcome

Rights, autonomy, and self-determination of tāngata whai ora and whānau are promoted and upheld.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Te Tiriti o Waitangi	Informs and educates others about health policy, legislation, and standards of practice that honour Te Tiriti o Waitangi principles, te reo Māori, te ao Māori, and Māori models of practice.
Legislation, regulations, standards, codes, and policies	<p>Understands legislation, regulations, standards, codes and policies relevant to older people, particularly capacity, supported decision making, and assisted dying. This includes Mental Health Act, Substance Addiction (Compulsory Assessment and Treatment) Act 2017, Code of Health and Disability Services Consumers' Rights, Enduring Power of Attorney (EPA), the Protection of Personal and Property Rights Act (PPPR), and End-of-Life Choice Act.</p> <p>As appropriate to role, understands how and when to apply legislation, regulations, standards, codes and policies relevant to older people.</p> <p>Recognises, with support if necessary, when to involve whānau members and/or other parties in decision-making.</p> <p>Understands when older people are affected by long-term cognitive impairment, it is essential to clearly understand EPA and seek support as needed. This includes understanding an EPA's purpose, activation process, and older people's rights.</p> <p>Educates older people and whānau about EPA roles and responsibilities, including when it becomes active and how it functions.</p>

Rights	<p>Supports people to exercise their rights.</p> <p>Supports tāngata whai ora and whānau to use complaints processes relevant to health services.</p>
Ethics	<p>Supports others to demonstrate ethical decision-making.</p>
Record-keeping and use of technology	<p>Understands the significance of accurate and comprehensive record-keeping in relation to PPPR orders and EPA.</p> <p>Ensures storage and management of legal documentation such as EPAs and PPPRs comply with organisational policies.</p> <p>Uses person-centred and preferred terms in record keeping, such as preferred names and pronouns.</p>
Quality	<p>Advocates for, and participates in, research aimed at understanding the prevalence and impact of mental health and/or addiction challenges among older people.</p> <p>Uses outcome measures to collect data about older people's needs, understand changes due to treatment, and adjusts plans where appropriate.</p>

Maintaining learning and kaimahi wellbeing

Everyone working in health participates in ongoing learning, reflecting on their work and seeks ways to develop themselves, their teams, and services.

Expected outcome

People working in health are reflective and enabled to work effectively alongside tāngata whai ora and whānau.

It is expected those using *More Skills* will also use and demonstrate proficiency at the essential and enhanced levels of [Keeping it Real I](#) [Kia Pono te Tika](#).

Professional development	<p>Engages actively in reflective practices including cultural supervision and debriefing to support older people from diverse cultures and identities, collaborating with dedicated cultural and community support as necessary.</p> <p>Takes proactive steps to minimise the effects of personal biases, prejudices, values, and attitudes related to age and aging to ensure thorough and unbiased support. For example, exploring own experiences of ageing and grief.</p> <p>Maintains best practices in working with older people by keeping up-to-date with training and professional development.</p> <p>As appropriate, supports the reflective practices of colleagues working with older people, through mentoring, coaching or supervision.</p> <p>Promotes the benefits of engaging with and working with older people.</p> <p>Collaborates and networks with other professionals to support own professional development.</p>
Wellbeing	<p>Identifies reflective practice opportunities while working with older people to enhance ability to provide effective support and maintain own wellbeing. For example, mentoring, coaching, supervision and other relevant support</p> <p>Understands the impact of transference issues in interactions with older people and uses reflective practices to explore this, like supervision.</p>

	<p>Seeks relevant support while working with an older person who is dying or who has died to ensure own wellbeing.</p> <p>Recognises signs and symptoms of vicarious trauma, within themselves and colleagues, and takes steps to reduce the impact.</p>
Communication	<p>Understands and manages complex and multifaceted communication processes.</p> <p>Works effectively with diverse communication needs and styles.</p>
Teamwork	<p>Connects and networks with a broad range of professionals and services, such as geriatricians, primary care providers and aged residential care.</p> <p>Collaborates effectively within multidisciplinary teams, appreciating the value of cooperation and supportive networks.</p> <p>Works within scope of competence, acknowledging role abilities and limitations when supporting older people, and knows when to refer to another worker or service.</p> <p>Understands psychogeriatric care available within their region, referral criteria, and refers as needed.</p>

Glossary

The following descriptions have been taken from a variety of sources and are not meant to be definitive. As language evolves, terms can quickly become outdated.

Resources used in understanding te reo Māori include [*Te Reo Hāpai: The Language of Enrichment*](#)³ and [*Te Aka Māori Dictionary*](#).⁴

Ableism	A word for unfairly favouring non-disabled people and prioritising the needs of non-disabled people over disabled people. ⁵
Acceptance and Commitment Therapy (ACT)	A psychological therapy that teaches mindfulness and acceptance skills for responding to uncontrollable experiences. It has been found useful for people with mild to moderate depression. ⁶
Ageism	Refers to stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) towards others or oneself based on age. ⁷
Aroha	Love, compassion, empathy, sympathy, kindness. ⁸
Associative stigma	Stigma experienced by whānau and others associated with a person experiencing addiction and/or mental health challenges. ⁸
Augmentative and alternative communication (AAC)	Refers to all the ways someone communicates besides talking. People of all ages can use AAC if they have trouble with speech or language skills. Augmentative means to add to someone's speech. Alternative means to be used instead of speech. ⁹
Biphobia	Discrimination against bisexual people or bisexuality. This may include negative stereotyping or denying the existence of bisexual people. Biphobia can be perpetuated by people who identify either within or outside of rainbow communities. ¹⁰

Cognitive Behavioural Therapy (CBT)	A form of psychological treatment demonstrated to be effective for a range of mental health challenges. ¹¹
Cognitive capacity	A legal term referring to a person's ability to understand the information necessary for decision making and understand likely outcomes of decisions. This includes having the ability to: understand and retain relevant information, use or weigh relevant information as part of a specific decision-making process, and communicate a decision. ¹²
Cognitive impairment	Reduced functioning or difficulties in one or more cognitive domains that is noticeable and measurable. Cognitive impairment is considered amongst what is 'typical' for a person's context, including whānau, culture, social group(s), and age. ¹²
Community	Groups that people identify and associate with; the many places in which people live. ⁸
Culture	The shared attitudes, beliefs, values, experiences, and/or practice of groups. ⁸
Cultural safety	An approach that acknowledges, respects, and values the cultural identities and experiences of tāngata whai ora while addressing power imbalances in relationships. The approach is focused on how care is received by tāngata whai ora, ensuring their dignity and rights are upheld. ⁸
Cultural supervision	Supervision that affirms one's own culture, cultural accountability, and development. Cultural supervision can be part of professional supervision, but it is also considered a type of supervision in its own right. ¹³
De-escalation techniques	A set of complex interactive processes in which a highly aroused person is redirected from an unsafe course of action towards a supported and calmer emotional state. ¹⁴
Dementia	An umbrella term used to describe the impaired ability to think that is different from a usual consequence of ageing. It results in both cognitive and functional limitations. Dementia affects memory, orientation, comprehension and calculation. It compromises a person's judgement as well as their ability to understand written and verbal language and to communicate. These limitations eventually result in a lack of mental capacity. ¹⁵

Elder abuse	A single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. ¹⁶
Enabling Good Lives	Foundation and framework to guide positive change for disabled people, families, communities and governance structures. ¹⁷
Enduring Power of Attorney (EPA)	The law, specifically the Protection of Personal and Property Rights Act 1988 (PPPR Act), allows for a person to plan ahead by make an enduring power of attorney – or “EPA” – where you give someone you trust the power to make decisions for you if you become unable to make them yourself. ¹⁸
Evidence-based practice	Integration of: <ul style="list-style-type: none"> • best research evidence on practice effectiveness • practice expertise, judgement, and experience to understand an individual’s unique needs in relation to available options • the whānau or person’s choice, preferences, and values.⁸
Gender-affirming care and practices	Any practice that affirms and/or supports an individual's gender. This can include transition-related healthcare, as well as therapy that supports people through the transition process. ⁸
Hapū	Kinship group, clan, grouping of various whānau generally based on a shared ancestor. ⁸
Hauora	Health, vigour, including hauora tinana (physical health), hauora hinengaro (mental and emotional health), whānau (social wellbeing), and wairua (spiritual health). ⁸
Homophobia	Discrimination against gay or lesbian people, and people of other diverse sexualities. ¹⁰
Intergenerational trauma	The effects of traumatic experiences endured during childhood and adulthood being transmitted to subsequent generations. ¹⁹
Interpreter	A person whose role is to provide a translation between two (or more) speakers, either orally or via sign language. ⁸

Intersectionality	An analysis of oppression, discrimination, and privilege which states that oppressions based on different social categories (such as sexual orientation, gender, ethnicity, disability, education, age, and class) are interlinked in ways that are unique, and therefore cannot be addressed separately from one another. ⁸
Iwi	Extended kinship group, nation, people, grouping of various hapū generally based on a shared ancestor. ⁸
Kaimahi	Worker, staff, employee. ⁴
Kaumātua	General term for an elder of mana within the community, whānau, or marae. ⁸
Kotahitanga	Unity, togetherness, or solidarity, emphasising the importance of collective action, shared purpose, and collaboration among individuals, groups, or communities to achieve a common goal. ⁸
Least restrictive practices	Practices that enhance autonomy and respect people's rights, individual worth, dignity, and privacy. ¹⁴
Mana	Often defined as prestige, authority, control, power, influence, status, spiritual power, charisma or status and standing; mana may be accorded a person or group through ancestral descent, and through possession of certain gifts or achievements, and can be enhanced through the collective opinion of others. ⁸
Manaaki	To support, take care of, extend hospitality, protect, show generosity, care for. ⁴
Mate wareware	Te reo Māori for dementia. ⁴
Mokopuna	Grandchildren, grandchild - child or grandchild of a son, daughter, nephew, niece, etc. ⁴
Multidisciplinary teams	Involves a range of health professionals, from one or more organisations, working together to deliver comprehensive support to people. ²¹
Needs Assessment and Service Coordination (NASC)	Needs Assessment Service Coordination (NASC) agencies operate the needs assessment and service coordination process on behalf of Health New Zealand. ²²

Older people	People aged 65 and over but recognises the diversity of this age group – people age differently and have different aspirations and needs. ²³
Ōritetanga	Equity. ⁸
Outcome	Result or consequence; ‘outcome-focused’ activities apply skills, knowledge and abilities, systems and processes to achieve effective results. ⁸
Pakeke	Te reo Māori term for adult. ⁴
Post-traumatic stress disorder (PTSD)	May develop when someone lives through or witnesses an event in which they believe there is a threat to life or physical integrity and safety and experiences fear, terror, or helplessness. ²⁴
Problematic substance use	Patterns of substance use that negatively impact people’s lives, including those that do not meet diagnostic criteria for substance use disorders. Aligning with a more strengths-based and recovery-oriented approach, problematic substance use is a preferred term when talking about people’s experiences and experienced harm. ¹²
Professional development	The process of increasing capability in relation to work; can apply to kaimahi, students, and volunteers. ⁸
Psychogeriatric care	Support in which the primary clinical purpose or treatment goal is improvement in the functional status, behaviour and/or quality of life for an older person with significant psychiatric or behavioural disturbance. ²⁷
Rongoā Māori	Natural remedy, traditional treatment, Māori medicine. ⁴
Self-neglect	Inability or unwillingness of vulnerable adults to meet their basic needs themselves, thereby compromising their wellbeing. ²⁸
Self-stigma	Internalised feelings of shame, low self-esteem and self-efficacy; a stigmatised person internalises negative societal beliefs and feelings and the social devaluation attached to their stigmatised status. ⁸

Sexism	Beliefs around the fundamental nature of women and men and the roles they should play in society. Sexist assumptions about women and men, which manifest themselves as gender stereotypes, can rank one gender as superior to another. Such hierarchical thinking can be conscious, or unconscious, manifesting itself as unconscious bias. ²⁹
Social frailty	Defined as a continuum of being at risk of losing, or having lost, resources that are important for fulfilling one or more basic social needs during the life span. ³⁰
Supported decision-making	An approach that uses resources (such as nominated support person, peer support, personal advocate) to empower and enable people to make their own decisions based on their will and preferences. The approach recognises and responds to the values, beliefs, cultures, and languages of tāngata whai ora and whānau. For example, it includes collective decision-making approaches (such as decision-making with whānau) informed by tikanga Māori and grounded in te ao Māori. ³¹
Takatāpui	An ancient Māori term to embrace culture, spirituality, and connection to whakapapa. It has many meanings for iwi and hapū, traditionally meaning “intimate partner of the same sex.” In contemporary times, Takatāpui has been reclaimed to denote all those with diverse sex characteristics, gender identities and expressions and sexualities as well as tangata whenua identity. ³²
Takatāpui and Rainbow communities	Takatāpui and rainbow communities include people with innate sex characteristics that do not fit normative medical or social ideas for male or female bodies; people who have a gender identity or expression that does not match the sex they were assigned at birth, including people who do not fit typical binary gender norms; and/or people who are not heterosexual. ³³
Tāngata whai ora	People accessing services seeking wellbeing. ⁸
Tāngata whenua	Indigenous, local people. ⁴
Tapu and noa	Tapu - sacred, prohibited, restricted, set apart, forbidden, under atua protection. ⁴

	Noa - to be free from the extensions of tapu, ordinary, unrestricted, void. ⁴
Te ao Māori	The Māori world, including te reo, tikanga, marae (community focal points), wāhi tapu (sites of sacred significance) and access to whānau, hapū, and iwi. ⁸
Te reo Māori	Māori language. ⁸
Te Tiriti o Waitangi	The founding treaty document of Aotearoa New Zealand that states rights and responsibilities agreed between the Crown and Māori. ⁸
Te Whare Tapa Whā	Māori health model based on the concepts of whānau (family), tinana (physical), hinengaro (mental) and wairua (spiritual) health. ³⁴
Tikanga Māori	Correct Māori procedure, custom, practice, protocol. ⁸
Tino rangatiratanga	Sovereignty, self-determination, autonomy, self-government. ⁴
Transference	Psychological term for projecting your feelings, based on past experiences, onto someone else in the present. ³⁵
Transphobia	Fear or dislike of a person, or a group of people, because they are non-binary or transgender (or are perceived to be so). ³⁶
Trauma-informed approach	<p>A term used to describe a programme, organisation or system that:</p> <ul style="list-style-type: none"> • realises the widespread impact of trauma and understands potential paths for recovery and wellbeing • recognises the signs and symptoms of trauma in tāngata whai ora, whānau, kaimahi, and others • responds by fully integrating knowledge about trauma into policies, procedures and practices • seeks to actively resist re-traumatisation.⁸
Tuakiri tangata	Persona, personality, identity. ⁸
Tūrangawaewae	Domicile, standing, place where one has the right to stand - place where one has rights of residence and belonging through kinship and whakapapa. ⁴

Vicarious trauma	The cumulative impact of prolonged exposure to the trauma of other people, resulting in negative shifts in an individual's personal beliefs, worldview, attitude, and sense of safety. ⁸
Wai	Water, liquid, juice. ⁴
Wairua	Spirit, soul - spirit of a person which exists beyond death. ⁴
Wairuatanga	Spirituality. ⁴
Wellbeing	All dimensions of health: tinana (physical), hinengaro (mental and emotional), whānau (social), and wairua (spiritual). ⁸
Whakapapa	Genealogy, lineage, descent, blood ties. ⁸
Whakawhanaunga	Forging relationships, getting to know one another, exploring mutual whakapapa connections. ⁴
Whānau	An inclusive term for family and wider family structures and anyone who a person considers to be close to them and important in their life. ⁸
Whānau Māori	Whānau as it pertains to Māori family and identity. ⁸
Whānau ora	The achievement of maximum health and wellbeing among whānau Māori. ⁸
Whenua	Land. ⁴

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