

Title	Work with older mental health and addiction service users around physical and social issues associated with ageing		
Level	4	Credits	8

Purpose	<p>People credited with this unit standard are able to: describe the impact on older mental health and addiction service users of physical changes and potential physical disorders associated with ageing; encourage the mobility, independence, and rehabilitation of older mental health and addiction service users; assist older mental health and addiction service users to recognise similarities and differences between their needs and wishes and those of their preferred support networks; and recognise the indicators, effects, and impact of abuse and/or neglect on older mental health and addiction service users.</p>
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Classification	Health, Disability, and Aged Support > Mental Health and Addiction Support
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Available grade	Achieved
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Guidance Information

- Legislation relevant to this unit standard includes:
 - Alcoholism and Drug Addiction Act 1966;
 - Criminal Justice Act 1985;
 - Criminal Procedure (Mentally Impaired Persons) Act 2003;
 - Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996;
 - Health Practitioners Competence Assurance Act 2003;
 - Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003;
 - Mental Health (Compulsory Assessment and Treatment) Act 1992;
 - Misuse of Drugs Act 1975;
 - Privacy Act 1993;
 - Protection of Personal and Property Rights Act 1988.
- New Zealand Standards relevant to this unit standard include:
 - NZS 8134.0:2008 *Health and disability services Standards – Health and disability services (general) Standard*;
 - NZS 8134.1:2008 *Health and disability services Standards – Health and disability services (core) Standards*;
 - NZS 8134.2:2008 *Health and disability services Standards – Health and disability services (restraint minimisation and safe practice) Standards*;
 - NZS 8134.3:2008 *Health and disability services Standards – Health and disability services (infection prevention and control) Standards*.
 New Zealand Standards are available from <http://www.standards.co.nz>.

3 References

- Age Concern. (March 2011). *Elder abuse and neglect*. Retrieved 18 May, 2011, from <https://ageconcern.org.nz/>.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders – DSM-IV-TR* (4th ed., Text revision). Washington DC; available at <https://www.psychiatry.org/>.
- Ellis, P., & Collings, S. (Eds.). (1997). *Public Health Report Number 3: Mental health in New Zealand from a public health perspective*. Wellington: Public Health Group, Ministry of Health, available at <http://www.moh.govt.nz>.
- Ministry of Health. (1998). *Guidelines for clinical risk assessment and management in mental health services*. Wellington: Ministry of Health in partnership with the Health Funding Authority; available at <http://www.moh.govt.nz>.
- Ministry of Health. (2002). *Health of older people strategy: Health sector action to 2010 to support positive ageing*. Wellington; available at <http://www.moh.govt.nz>.
- Ministry of Health. (2006). *Health of older people information strategic plan: Directions to 2010 and beyond*. Wellington; available at <http://www.moh.govt.nz>.
- Ministry of Health. (2008). *Let's get real: Real Skills for people working in mental health and addiction*. Wellington; available at <http://www.moh.govt.nz>.
- Te Pou o Te Whakaaro Nui, Le Va, Pasifika within Te Pou. (2009). *Real Skills Plus Seitapu – Working with Pacific Peoples*. Auckland; available at <http://www.tepou.co.nz>.

4 Support should aim to maintain, improve, or restore a consumer's independence and/or interdependence; utilise the consumer's existing strengths; and, where possible, utilise the resources of the local community.

5 This unit standard cannot be assessed against in a simulated environment. For assessment, candidates must demonstrate competence in the workplace through paid or unpaid employment, or in placements in a service provider workplace negotiated by an education provider.

6 Support provided for older mental health and addiction service users may include natural supports.

7 Candidates' practice must reflect appropriate values, processes, and protocols in relation to working with Māori and Pacific peoples and/or people from other cultures, in a range of settings and environments.

8 Definitions

Abuse includes any neglectful, violent, or controlling act or behaviour that may be economic, emotional, physical, social, verbal, spiritual, and/or sexual in nature, and which may occur within or outside of a family/whānau context. It also includes role abuse, which means the abuse of power by an individual or agency that has a professional, service, or status-based role in relation to another person or persons. *Effects and impact of abuse and/or neglect* are distinguished from each other in terms of their causal relationship or a chain of events. For example, an effect of financial abuse may be to make the older person insolvent, while that effect (insolvency) could lead to a range of impacts such as poverty, sense of betrayal, loss of confidence, and homelessness.

Mental health and addiction issues include mood disorders, anxiety disorders, psychotic disorders including the psychoses associated with old age, personality disorders, eating disorders, adjustment disorders, dementia, delirium, sleep

disorders, somatoform, co-existing problems including mental illness co-existing with a physical disorder.

Natural supports refers to any assistance, relationships, or interactions provided to older mental health and addiction service users by family/whānau, friends, peers, co-workers, or community volunteers. In a specifically Māori context, natural supports may include but are not limited to: kaumātua, kuia, tohunga, whānau, iwi, and hapū.

Neglect is a passive form of abuse, and refers to any deliberate or inadvertent lack of attention or due care, including laxness or evasion of professional responsibilities, from one person to another. Neglect may be physical, e.g. refusing or delaying to seek medical attention, and/ or emotional, e.g. ignoring a person's expressed wishes or concerns.

Older mental health and addiction service user in the context of this unit standard refers to a person aged 65 and over who is accessing services in a mental health or addiction setting. Service users may also be known as consumers, clients, patients, tūrora, or tangata whai ora in particular contexts and settings.

Organisation's policies and procedures are the policies and procedures of the employing organisation of the candidate and include ethical codes, standards, and other organisational requirements.

Preferred support networks refers to assistive services such as natural supports, activity programmes, clubs and/or societies, agencies and organisations, churches, financial advice/support, hapū, iwi, marae, property rights and welfare guardians, respite facilities.

9 Range

Potential physical disorders associated with ageing include but are not limited to – cardio-vascular disease, diabetes, medication sensitivity and side effects of long-term use of psychotropic medication, muscular/skeletal degeneration, pain, Parkinson's disease.

Outcomes and performance criteria

Outcome 1

Describe the impact on older mental health and addiction service users of physical changes and potential physical disorders associated with ageing.

Performance criteria

- 1.1 Physical changes associated with ageing are described in terms of their impact on three older mental health and addiction service users.
- 1.2 Physical changes associated with ageing are described in terms of their relationship to mental health and addiction issues in accordance with the references.

Range	evidence is required for three different physical changes associated with ageing.
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- 1.3 Potential physical disorders associated with ageing are described in terms of their impact on older mental health and addiction service users in accordance with the references.

Range evidence is required for three different potential physical disorders associated with ageing.

1.4 Potential physical disorders associated with ageing are described in terms of their relationship to mental health and addiction issues in accordance with the references.

Range evidence is required for three different potential physical disorders associated with ageing.

Outcome 2

Encourage the mobility, independence, and rehabilitation of older mental health and addiction service users.

Range evidence is required for three older mental health and addiction service users, each with different physical changes or potential physical disorders associated with ageing.

Performance criteria

2.1 Work with older mental health and addiction service users is carried out in way that encourages their mobility, independence, and rehabilitation.

Outcome 3

Assist older mental health and addiction service users to recognise similarities and differences between their needs and wishes and those of their preferred support networks.

Performance criteria

3.1 Work with older mental health and addiction service users is carried out in a way that assists them to recognise similarities and differences between their needs and wishes and those of their preferred support networks.

Range evidence is required for a minimum of two similarities and two differences.

Outcome 4

Recognise the indicators, effects, and impact of abuse and/or neglect on older mental health and addiction service users.

Performance criteria

4.1 Indicators and effects of abuse and/or neglect of older mental health and addiction service users are recognised in accordance with the references and the organisation's policies and procedures.

4.2 The impact of abuse and/or neglect on older mental health and addiction service users is described in accordance with the references.

This unit standard is expiring. Assessment against the standard must take place by the last date for assessment set out below.

Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	21 July 2011	31 December 2022
Revision	2	17 May 2012	31 December 2022
Review	3	27 February 2020	31 December 2022

Consent and Moderation Requirements (CMR) reference

0024

This CMR can be accessed at <http://www.nzqa.govt.nz/framework/search/index.do>.