

#### DHB Office Braemar Campus

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23 April 2021



#### Response to a request for official information

Dear

Thank you for your request for official information received 9 April 2021 by Nelson Marlborough Health (NMH)<sup>1</sup>, where you seek a summary of practical guidelines to deliver health and disability services that are responsive to Maori rights and cultural practices, needs and interests.

<u>NMH response</u>: Please see the enclosed copy of our *He Oranga Maori* Best Practice Guidelines to be read in conjunction with *He Oranga Maori* Best Practice Policy.

This response has been provided under the Official Information Act 1982. You have the right to seek an investigation by the Ombudsman of this decision. Information about how to make a complaint is available at <a href="www.ombudsman.parliament.nz">www.ombudsman.parliament.nz</a> or free phone 0800 802 602. If you have any questions about this decision please feel free to email our OIA Coordinator OIArequest@nmdhb.govt.nz

I trust that this information meets your requirements. NMH, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released. If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider.

Yours sincerely

Lexie O'Shea
Chief Executive

Encl: He Oranga Maori Best Practice Guidelines, He Oranga Maori Best Practice Policy

<sup>&</sup>lt;sup>1</sup> Nelson Marlborough District Health Board



# HE ORANGA MAORI Best Practice Guidelines

A summary of practical guidelines to deliver health and disability services that are responsive to Māori rights and cultural practices, needs and interests. To be read in conjunction with He Oranga Māori Best Practice policy.

Introduction

Whānau rooms and designated areas

Taonga (valuables)

Karakia

Whānau support

Information and support

Body parts, tissue and substances

Food, linen and personal hygeine

Dying and death

### Introduction

This flip chart summarises the Nelson Marlborough District Health Board's (NMDHB's) Te Oranga Māori Best Practice Policy, which outlines key traditional principles and describes ways to incorporate Māori values and beliefs into the delivery of health and disability services.

The aim is to uphold the wairua (spiritual), hinengaro (psychological), and tinana (physical) well-being of tangata mauiui (patients or service users) and their whānau (families).

Te Oranga Māori Best Practice is focused on Māori, as the practices within it reflect Māori value concepts. However, it should also be made available and delivered to all. Te Oranga Māori Best Practice includes best practice standards of care for everyone, regardless of ethnicity.

These guidelines apply to all NMDHB facilities and staff (including contractors), and all contracted providers of health and disability services.

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### Whānau rooms and designated areas

Some areas will be governed by Māori protocol. If so, tikanga Māori should be observed by all staff and other people using the facility. For example:

- Areas or rooms used for whānau group conferences.
- Areas or rooms used for mihi whakatau (welcome ceremonies).
- Areas or rooms where a Māori death has taken place.
- Whare karakia (chapels) or viewing rooms occupied by the tūpāpaku (deceased).

#### Staff action:

Respect any areas set aside permanently or on occasion.

# Whānau rooms and designated areas

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### Taonga (valuables)

Taonga are extremely important to Māori and have much more significance than just sentimental value.

#### Staff action:

Be aware and respectful of taonga, and where possible discuss any need to handle taonga with the patient and whānau.

#### Support this by:

- Where possible, securely taping the taonga to the body of the patient rather than removing it.
- If risk is involved, obtaining the patient's consent before removing the taonga.
- Giving the patient or whanau the option of removing it themselves.
- Giving whānau the option of caring for any taonga.
- Informing the patient and whānau of the risk of storing taonga and how it will be stored.

# Taonga (valuables)

### Karakia

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### Karakia (blessings, incantation, prayer)

For many Māori, karakia are essential in protecting and maintaining their spiritual, mental, emotional and physical health – particularly in a health care setting.

#### Staff action:

Verbally offer patients and whanau the choice of having karakia at all stages of the care process, including heightened situations (e.g. psychotic incidents, before going to theatre) and pending death.

#### Support this by:

- Allowing time for karakia.
- Not interrupting karakia unless the physical care of the patient is compromised.
- In extreme circumstances where karakia cannot occur, explaining why in a sensitive manner and discussing possible alternatives.
- Providing access to appropriate water and containers for the purpose of spiritual cleansing.
- Ensuring patients wishing to have karakia have access to chaplains, tohunga and kaumatua of their choosing.

### Karakia

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### Whānau support

Whānau is of fundamental importance to Māori. The concept of whānau extends beyond the nuclear or biological family. Whānau support can be crucial to the patient's or service user's well-being.

#### Staff action:

The patient or service user and whānau should be actively encouraged, supported and included in all aspects of care and decision-making.

#### Support this by:

- Sharing a copy of the care plan with the patient or service user and whānau.
- Asking the patient or service user and whānau if they wish to nominate a person to speak on behalf of the whānau.
- Acknowledging and involving the person nominated.
- Including appropriate Māori staff (e.g. Pukenga Hauora) in the care and decision-making process, if the patient or service user and whānau agree.
- Finding a private room and allocating adequate time when consulting with whānau throughout the care process, and checking with whānau about suitable meeting times and other needs.
- Being flexible about visiting times and visitor numbers.
- Being supportive of whanau visiting when the patient's death is imminent.

# Whānau support

Information and support

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### Information and support

The aim is to provide health care in an environment that is culturally sensitive to those using it. This is done out of respect for different cultural perspectives and needs, and also to support the total health of the patient.

#### Staff action:

Make sure the patient or service user and whānau understand what is happening and what resources and support are available, including Pukenga Hauora, speakers of te reo Māori, advocates and chaplains.

#### Support this by:

- Clearly introducing yourself and your role/service.
- Ensuring names are pronounced correctly and asking when unsure.
- Ensuring that all information is given clearly and is understood by the patient and whānau.
- Understanding that for Māori the concept of 'next of kin' may be broadly interpreted.
- Notifying appropriate Māori staff (e.g. Pukenga Hauora) of the patient or service user as soon as possible.
- Offering an interpreter where appropriate.
- Ensuring the patient or service user and whanau are aware of available accommodation services, preferably prior to admission.
- Keeping a current list of available resources (e.g. advocacy services, whānau rooms, Māori chaplain, Māori providers and other support services) and informing the patient or service user and whānau about them.
- Ensuring the patient or service user and whānau have access to all available Māori service information.

# Information and support

Body parts, tissue and substances

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# Body parts, tissue and substances (removal, retention, return or disposal)

Regardless of how minor the body part, tissue or substance (e.g. nail clippings, hair, blood) is perceived to be, the He Oranga Māori Best Practice -- Removal of Body Parts section of NMDHB will be followed. This includes whenua (placenta) and genetic material.

All discussions will be non-judgemental and follow an informed process as described in NMDHB He Oranga Māori Best Practice policy.

#### Staff action:

Ensure the patient and whānau receive a full and clear explanation about the procedure and options for removal, retention, return or disposal as early as possible.

### Support this by:

- Offering further support from appropriate staff (e.g. Pukenga Hauora).
- Returning the body part, tissue or substance in a way that is consistent with tikanga and in consultation with appropriate staff.
- Recording and carrying out the wishes of the patient and whānau if the original purpose of retention changes.
- Following existing protocols to return unconsented body parts, tissue and substances.
- Giving a full explanation of how and where disposal or burial will be carried out if return or retention is not requested.
- Documenting all discussions and decisions in the clinical notes.
- Ensuring all body parts, tissue and substances are correctly labelled.

### **Organ and Tissue Donation**

Refer to the He Oranga Māori Best Practice – Organ and Tissue Donation section of He Oranga Maori Best Practice policy.

Body parts, tissue and substances

Food, linen and personal hygeine

Dying and death

### Food, linen and personal hygeine

Tapu and noa are key concepts that underpin many practices. For example, it is important to keep things that are tapu (restricted) separate from things that are noa (unrestricted). In many cases, these concepts align with good health and safety practice.

#### Staff action:

Become familiar with the basic principles of tapu and noa, and practical ways of respecting these concepts.

#### Support this by:

- Not passing food over a person's head.
- Not using pillowcases for any other purpose and supporting whānau if they bring their own linen.
- Using colour coded linen correctly. (e.g. white pillowcases for the head and blue pillowcases for other parts of the body).
- Using different flannels for washing the head and body.
- Following a strict order when washing, starting from the neck, then
  moving to the genital and then anal areas.
- Keeping separate from food anything that comes into contact with the body or body fluids, for example:
  - Don't place combs and brushes on a surface where food is placed.
  - Don't sit on tables or workbenches, particularly on surfaces used for food or medication.
  - Don't use microwaves used for heating food to heat anything that has come into contact with the body.
  - Clearly identify fridges and freezers used for food or medication and don't use them for any other purpose.
  - Don't use drinking water containers for any other purpose.
  - Only use tea towels for drying dishes and wash them separately from all other soiled linen.
  - Don't have bedpans/urinals and food present at the same time.
  - Only place bedpans/urinals on the correct equipment (not where food trays are placed) and always store them in their own designated area.

Food, linen and personal hygeine

Dying and death

### Pending and following death

Whānau should be notified immediately, and supported and involved at all times, where the death of a patient is expected or has occurred.

#### Staff action:

Be guided by the whanau on the cultural and spiritual practices appropriate for them at this time.

#### Support this by:

- Including whānau and involving them at all times.
- Making every attempt to ensure a single room is available.
- Notifying appropriate support staff (e.g. Pukenga Hauora, chaplain).
- Not taking food or drink into the room, unless whānau themselves take it in for their own purposes.
- Allowing time for whānau to grieve and exercise their beliefs before moving the deceased and before any post-mortem.
- Making every attempt to ensure a speedy release of the deceased.

### Tūpāpaku (deceased)

Respect the wishes of the whanau as to how the deceased is moved.

#### Staff action:

Be guided by the whānau on the cultural and spiritual practices appropriate for them at this time.

### Support this by:

- Allowing whanau to accompany the deceased at all times.
- Handling the deceased in a sensitive and respectful manner.
- Transporting the deceased discreetly, feet-first along the predetermined 'pathway', using the designated lifts.
- Avoiding public areas, toilets, food and waste areas.
- Ensuring the room and any equipment is blessed before being physically cleaned and reused.

Dying and death

### Glossary

hapū I sub-tribe of a large tribe. 2 pregnancy.

hinengaro psychological.

iwi I a nation of people with shared identity and genealogy.

2 tribe.

kai food.

Pukenga Hauora Māori liaison worker.

karakia, inoi blessings, incantation, prayer.

kaupapa policy, protocols.

mana I prestige. 2 authority. 3 influence

marae place of Māori practice, often comprising a meeting house, marae atea (sacred area in front of meeting

house), dining room and ablution facilities.

mihi whakatau formal Māori practice of welcoming outside the marae.

noa I free from tapu. 2 unrestricted.

pōwhiri formal Māori practice of welcoming onto marae.

rongoa Māori methods of healing including mirimiri (massage),

te reo (language), karakia and herbal remedies.

taonga treasure, valuables, heirlooms.

tapu I sacred. 2 restricted.

tikanga I issues of principle, integrity of intent. 2 values and

respect. 3 processes.

tinana physical body.

tohunga expert, skilled person.

tūpāpaku deceased person.

tangata mauiui person seeking or requiring assistance from a health

professional, including consumers, clients and patients.
spiritual element, wairua is an integral part of tapu that

wairua spiritual element. wairua is an integral part of tapu that

is inextricably linked to well-being.

whānau

I family, extended family group. 2 birth.

whenua I placenta. 2 afterbirth. 3 land.



#### HE ORANGA MAORI BEST PRACTICE

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#### **Purpose**

The purpose of this policy is to provide a framework for services within Nelson Marlborough Health (NMH) that are responsive to Maori practice, rights, needs and interests, and to ensure the wairua (spiritual), hinengaro (psychological) and tinana (physical) wellbeing of tangata mauiui (person unwell) and their whanau (family and extended family group). The intent of this document in relation to the situation described.

#### Scope

All NMH employees (including contracted staff) are responsible for ensuring this policy is implemented. Who must follow the instructions contained in this document.

#### **Guiding Principles**

As soon as tangata mauiui (Maori consumers/ clients/ patients) and their whanau are involved with a healthcare service they are deemed to be in a state of noa (being beyond one's own physical and/or spiritual power), that is, disempowered. Acknowledging a person's practices and rights and respecting their beliefs restores the tapu (well being/ empowerment) of tangata mauiui and their whanau (e.g. permission is always asked for and an explanation given prior to any intervention).

Informed consent and compliance with *tikanga* will be carried out in a respectful manner during the care of *tangata mauiui*, thereby avoiding *mahihe* (offence). If offence is given another action is then required to correct the *mahihe* to bring about *muruhe* (restoration and healing).

He Oranga Recommended Best Practice is primarily focused on Maori as they reflect Maori values and concepts. However, they can also be made available and delivered to consumers of health services regardless of ethnicity as they include best practice standards of care.

Central to the policy is the expectation that all users of health services are treated with dignity and respect. In turn, users of health services are expected to behave respectfully. In exercising the principles of the policy it is anticipated that the awareness and confidence of the health workforce will be raised and in doing so staff will demonstrate consideration of wider cultural needs and expectations.

He Oranga Recommended Best Practice offers choice to the community about how health care is delivered. The document outlines processes that are integral to best practice for all staff to follow and will assist in the delivery of quality health services within NMH.

**Note:** These guidelines may not necessarily be adhered to during an extra-ordinary occurrence such as a pandemic influenza. Explanation of abbreviations, specialised terms, etc, used in the document.

#### **Definitions**

Refer to Glossary

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#### **Procedure**

#### Karakia (blessings/incantation/prayer)

- At all times tangata mauiui and whanau will be verbally offered (from early in the care process) the choice
  of having karakia. In particular this needs to be offered before and after surgery.
- Staff will make arrangements for the chaplain to attend if required. This will be offered to all tangata maujui and whanau.
- Staff will support the need for karakia at all times during tangata mauiui care.
- Staff will offer and support karakia in a variety of heightened situations e.g. psychotic incidents. This may involve discussion with whanau and/or appropriate Maori staff.
- Time will be allowed for karakia.
- Karakia will not be interrupted unless the physical care of tangata mauiui is compromised.
- If karakia cannot occur due to extreme circumstances, staff will explain the reasons in a sensitive manner and discuss alternative options.
- Access to appropriate water and containers will be made available for the purpose of spiritual cleansing.

#### Whanau Support (family & extended family)

- Tangata mauiui and whanau will be actively encouraged, included and supported by staff to be involved in all aspects of care and decision-making. This includes care plans, discharge planning and multi-disciplinary team meetings. A copy of the care plan may be shared with the tangata mauiui and whanau.
- Staff will ask whanau and/or tangata mauiui if they wish to nominate a person to speak on behalf of the whanau.
- Staff will acknowledge and actively involve the nominated person.
- In agreement with tangata mauiui and whanau, staff will include the appropriate Maori staff (e.g. Te Waka Hauora) in the care and decision- making process.
- A private room and adequate time (where practical) will be allocated for whanau consultation and decision-making throughout the care of tangata maului.
- Staff will consult with whanau regarding suitable meeting times and needs.
- Flexibility will be given to visiting times and visitor numbers where possible.

#### Whanau Visits

- The option for whanau members to stay overnight with the tangata mauiui is considered part of the care and support given, appropriate to the circumstances.
- Staff will be supportive of whanau visiting when death is expected and/or imminent.

Where appropriate, staff will support whanau to bring food and share meals with the tangata mauiui. Particular food may be requested by the tangata mauiui. It is important that staff support whanau in this and especially when death is expected and/or imminent.



#### Information and Support

- During all initial encounters, staff will introduce themselves and explain their role and service to the tangata mauiui and whanau.
- When obtaining registration details, staff will accept that the Maori concept of "next of kin" may be broadly interpreted.
- Where appropriate, staff will ensure that tangata mauiui are offered an interpreter.
- Staff will ensure that the tangata mauiui and whanau are aware of accommodation options, preferably prior to admission and make referrals when requested.
- Staff will notify the appropriate Maori staff (i.e. Te Waka Hauora) of tangata mauiui in their care as soon as possible, e.g. on admission.
- Staff will inform the tangata mauiui and whanau of internal and external resources:
  - Internal: Te Waka Hauora, whanau rooms and dedicated spaces to support whanau wellbeing.
  - External: Maori providers, primary providers, support services and relevant agencies outside of the health sector.
- Services will maintain a current list of contacts to assist tangata mauiui and their whanau e.g. Maori chaplains.

#### **Specific Needs**

Food has a particularly significant role in Maori society. It is meaningful as food is considered "noa" and may interfere with a Maori person's ability to accept and receive care. Similarly taonga (valuables/heirlooms) - particularly pounamu or bone - hold a special place, often characterised as connecting the person to a spiritual support system that is highly prized by some Maori.

#### Food

- Food will never be passed over the head as the head is considered valuable and anything that could cause harm to the head is considered a breach.
- Anything that comes into contact with the body or body fluids must be kept separate from food or
  anything that comes into contact with food, and vice versa. For example, combs or brushes should not be
  placed on surfaces where food is placed; a teatowel should not be carried over the shoulder.
- Receptacles used for drinking water will be solely used for this purpose.
- Staff will not sit on tables or workbenches and particularly on surfaces used for food or medication.

#### Taonga/Valuables

- Only remove taonga (valuables/heirlooms) if leaving them on places tangata mauiui at risk; wherever possible taonga will be taped to their person.
- Consent will be obtained from the tangata mauiui or whanau before removing taonga.
- Tangata mauiui and whanau will have the option of removing taonga.



- Whanau will have the option of caring for taonga.
- If whanau are not caring for the taonga, it will be kept in the identified valuables safe, where provided.
- Tangata maujui and whanau will be informed of the risk of storing taonga.

#### Linen

- Different coloured pillowcases will be used to differentiate pillows for the head and those used for other parts of the body.
- Pillowcases will not be used for any other purpose.
- Staff will support whanau if they bring their own pillowcases.
- Where possible different coloured **pillows** will be used to differentiate pillows for the head and those used for other parts of the body white specifically for the head and blue for other areas.
- Different flannels will be used for washing the head and body white for the face / head and blue for other areas. Washing will follow a strict order, starting from the neck to genital then anal area.

#### **Bedpans / Urinals**

- Bedpans/urinals and food should not be near each other at the same time.
- Excreta and food will always be kept separate. Excreta will not be placed on surfaces where food is placed
   e.g. bedpans/urinals will not be placed on surfaces used for food trays.
- Bedpans/urinals will not be placed on bedside lockers.
- Always place bedpans/urinals on the equipment used for this purpose.
- Always store bedpans/urinals in the designated area.

#### **Facilities**

#### Whanau / Family Room

Whanau/Family Rooms are designated rooms located on or near to the ward. All Whanau/Family Rooms (Wairau) and Whanau Quiet Rooms (Nelson) are governed by tikanga principles and protocols. These rooms support the needs of whanau/family of tangata mauiui on the ward. Whanau/Family Rooms are available to all tangata mauiui, staff, and whanau/families, regardless of ethnicity.

#### Staff will ensure the following principles have priority in Whanau/Family Rooms:

- Tupapaku and whanau caring for the Tupapaku must be awarded first priority.
- Whanau caring for tangata mauiui throughout the process of dying.
- Further requirements: Use of Whanau/Family Rooms will be guided by the following:
- Everyday use of the Whanau/Family Rooms will be determined by consultation between ward staff and appropriate Maori staff e.g. Te Te Waka Hauora.
- Staff with whanau will agree on the use of the space for other meeting purposes.



#### Maori-specific areas

These are other areas observing tikanga Maori, including both current and future areas permanently governed by Maori protocols e.g. Maori accommodation services, marae.

For Maori-specific areas staff will ensure the following:

- Tikanga (principles) govern
- · Maori protocols are followed.

#### General areas

These are areas used on occasion for a Maori-specific purpose. This includes rooms that are not permanently governed by Maori tikanga and protocols except on specific occasions.

#### On these occasions staff will ensure the following:

- Tikanga (principles) govern and Maori protocols are followed, e.g. mihimihi
- All areas used in the care of Tupapaku, e.g. Whanau/Family Rooms, will follow the *He Oranga Maori Best Practice* outlining the procedures for Tupapaku (deceased person).

#### **Principles**

- The Treaty of Waitangi principles of partnership, participation and protection will be actively addressed
  and undertaken in good faith. This will occur from the outset of the project, i.e. from the negotiating and
  formulation of the research to the final outcome.
- Researchers must address how the research will benefit Maori, including how information will be shared with Maori.
- Before research is initiated, consent will be required from iwi groups, particularly if the research may
  potentially breach tikanga or involve sensitive issues. This is over and above individual consent.
- Some issues will also require consent from iwi and/or hapū especially where ownership belongs to collective stakeholders.
- Informed consent (written and verbal) must be sought from Maori participants and/or whanau involved in the research. This includes requests for body parts/tissue and/or substances (including genetic material) to be collected for research purposes.
- Return, retention or disposal procedures will be discussed and agreed to by participants. This will be documented.
- Time will be allowed for consultation and decisions to be reached.
- Confidentiality will be maintained, in particular where individuals may be identifiable.
- Contact the GM Maori Health & Vulnerable Populations for guidance.

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#### **Organ & Tissue Donation**

Live donor or Tupapaku (deceased person) donor

The following applies to both the recipient and donor, as applicable:

- Body parts and/or tissue will never be removed for donation without informed consent.
- Discussion will occur as early as is reasonable and carried out in a sensitive and non-judgmental way.
- Staff will offer the option of further support from the appropriate Maori staff e.g. Te Waka Hauora or where appropriate, with the Maori Health Provider they are enrolled with.
- Staff will talk with the tangata mauiui and/or whanau giving a true and clear verbal and written explanation regarding the full procedure and options.
- Staff will ensure that the tangata mauiui and/or whanau are fully informed on all aspects of the donation process in order to make an informed choice and where agreed give informed consent.
- Staff will respect and comply with the decisions made by the tangata mauiui and/or whanau.
- Staff will offer the choice of having karakia prior to and/or following any intervention.
- Staff will ensure tangata mauiui and/or whanau are aware and agree to the possibility that certain body parts and/or tissue may be stored for use in the future. (Future use will *only* be the original purpose as agreed to by tangata mauiui and/or whanau.)
- · Staff will offer to make the arrangements if required.
- Staff will record and carry out the wishes of the tangata mauiui and/or whanau for return or disposal if the original purpose for retention changes e.g. return or disposal
- All body parts and/or tissue will be offered for return if unused or unsuitable e.g. when a heart valve is used, the surrounding heart tissue will be offered for return.
- All returns will follow the He Oranga Maori Best Practice (see NMH Body Parts policy).
- Staff will document all discussions and decisions.
- Tupapaku procedures will follow the He Oranga Maori Best Practice under Tupapaku (deceased person).

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#### **Procedure: Pending Death**

#### **Principles**

For Maori, death is one of the most culturally significant times. The overriding principal is one of remaining with the tupapaku until burial. The importance of this can be understood within the concept of "whanaungatanga" (inter-connectedness between families), spiritual protection and appropriate grieving. NMH staff will work with whanau respecting cultural difference.

#### Procedure

- When informing tangata maujui ensure whanau support is available.
- Where possible, whanau will have the choice of taking their terminally ill relative home.
- Where medical intervention can no longer be given and where death is imminent staff will notify whanau immediately.
- Where death is expected imminently, support staff involved in the care of the tangata mauiui will be notified immediately e.g. Te Waka Hauora, or the Maori health provider they are enrolled with.
- Staff will make every attempt to ensure a single room is available.
- Staff will make every attempt to allow whanau to be present at all times.
- Staff will facilitate access to appropriate staff e.g. chaplain and facilities (Chapel).
- If there is the potential for involvement from the coroner, whanau will be informed at the earliest opportunity.
- If there is the potential of a post-mortem request, whanau will be consulted immediately.

#### **Procedure: Following Death**

#### Procedure

- When death occurs the whanau will be notified immediately.
- Support staff involved in the care of the tangata mauiui will be notified immediately e.g. Te Waka Hauora,
   Maori health provider.
- Staff will be guided by whanau on the cultural and spiritual practices for them at this time. A single, private room will be allocated for the tupapaku and grieving whanau at the earliest opportunity.
- Whanau will be offered the choice of washing and dressing the tupapaku.
- Staff will allow time for whanau to grieve before moving the tupapaku. Whanau will determine the time needed in liaison with staff.
- · Food and drink will not be taken into the room.
- Staff will make every attempt to ensure a speedy release of the tupapaku.
- Before the tupapaku is removed and, in particular, before a post-mortem, whanau will be given the
  opportunity and time to exercise their beliefs and practices.

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#### Movement of Tupapaku

- Staff must engage with whanau to determine their wishes regarding the movement of the Tupapaku.
- The Tupapaku will always be wrapped in the allocated sheets. Whanau will be able to accompany the tupapaku when moved.
- The Tupapaku will always be transported feet first.
- All services will have a predetermined "pathway" for tupapaku, avoiding lifts dedicated to transporting food where practical.
- Staff will ensure all linen, food cupboards, inpatient and staff pantry and toilet doors are closed during the moving of tupapaku.
- The movement of tupapaku through public areas will be avoided wherever possible. If not, staff will use
  the shortest route, avoiding food and waste areas. This will be carried out in an efficient, respectful and
  dignified manner.

#### Following Removal of Tupapaku

- Karakia will be performed in the room/area as soon as the tupapaku is removed.
- The room will not be physically cleaned until karakia has occurred.

#### **Autopsy**

#### General

- When a postmortem is required by the coroner or requested by staff the reasons and procedure will be explained to whanau.
- At all times staff will continually update and inform whanau. This will be done as soon as possible so whanau are prepared and informed.
- Staff will respect the privacy of whanau during discussions.
- A quiet, private area will be allocated to whanau.
- Support staff will be notified as soon as possible, e.g. Te Te Waka Hauora.
- The removal or cutting of tupapaku hair is to be avoided unless absolutely necessary to any postmortem. Whanau will be notified of this prior to the procedure and offered the option of retaining the hair.
- Staff will make every attempt to ensure a speedy release of the tupapaku.

#### Coronial autopsies

- In coronial cases the Police/Iwi liaison person may be available via the Police.
- Whanau will be informed that they can view the tupapaku when moved to the mortuary for a postmortem.
- Whanau will be informed that there are rooms in the mortuary where they can wait during the postmortem.



- In coronial cases staff will inform whanau if body parts and/or tissue are required for further analysis in determining death and ensure the next of kin are advised of their options.
- Informed consent will be obtained for any procedures other than those needed to establish cause of death.
- Body parts, tissue and/or substances will only be taken if needed to determine the cause of death.
- Return, retention or disposal will follow the He Oranga Maori Best Practice outlined in NMH Body Parts and related Board policies.
- Retention of body parts and/or tissue from post mortems beyond the agreed and/or required examination time will not be retained unless written and verbal informed consent has been obtained.
- All consents will be clearly documented. A record of parts/tissue retained will be kept.
- All body parts and/or tissue will be returned as soon as possible and will follow He Oranga Maori Best Practice outlining their return.

#### **Associated documents**

NMH policies:

Body parts

http://nmhintranet/home/procedures-policies-and-guidelines/CareDelivery.html

- Informed Consent
- Incident Management

http://nmhintranet/home/procedures-policies-and-guidelines/ClinicalGovernance.html

#### References

- Hauora o te Tinana me ona Tikanga: a guide for the removal, retention, return and disposal of Maori body parts, organ donation and post-mortem: Maori and their whanau (1999). Te Puni Kokiri
- Hauora o te Tinana me ona Tikanga: a guide for the removal, retention, return and disposal of Maori body parts, organ donation: Service providers (1999). Te Puni Kokiri
- Body Parts, Tissue, & Substances Review Panel Report (Hollings).



#### **GLOSSARY**

#### **Principles**

Term	Description
Mana	Spiritual power and authority to enhance and restore tapu. Health Services must empower tangata mauiui and their whanau. In doing so the service's own mana is enhanced.
Tapu	Physical, psychological, emotional, spiritual and cultural well being.
	Dignity and sacredness.
	Restrictions and prohibitions that protect tapu (well being, empowerment) from violation.
Noa	In the positive sense, it is the state of freedom of mind and spirit that comes about through being acknowledged, enhanced, restored and healed.
	In the negative sense, it is the state of diminished tapu, of weakness and powerlessness resulting from violation.
Hara	A sin of violation, a transgression.
He	An act of wrongdoing.
Mahihe	Offence.
Muruhe	To restore and heal a wrong, restoration and healing.
Whanau	Relationships are intrinsically linked and connected through whanau, hapu and iwi. Whanau extends beyond the concept of the "family unit", "nuclear family" or "biological family".
(Acknowledgement to Pa Henare	Tate for definitions of the principles.)



#### **Definitions**

Term	Description
lwi	A nation or people with a shared identity and genealogy/tribe.
Kai	Food.
Karakia	Blessings /incantation/ prayer.
Marae	Place of Maori practice. Often comprising a carved meeting-house, marae atea (sacred space in front of the meeting-house), dining room and ablution facilities.
Mihi/Mihimihi	Informal Maori process of welcome/ing.
Tangata Mauiui	Consumers/ clients/ patients. Person who is unwell seeking or requiring assistance from a health professional.
Taonga	Treasure, valuables.
Te Waka Hauora	Maori liaison worker. Designated Maori staff that focus on the spiritual and cultural needs of tangata mauiui and their whanau
Tikanga	Issues of principle/integrity of intent. Values and respect. Processes.
Tinana	Physical body.
Tupapaku	Deceased person.
Wairua	Spiritual element. Wairua is an integral part of tapu and noa that is inextricably linked to wellbeing.
Whanau	Family, including extended family group.
Whanaungatanga	Inter-connectedness between families.