



Te taumata manaaki

Standard of care

Te tuku i ngā rongoā mō ngā ratonga mate
whakaahuru i Aotearoa

Administering assisted dying medication in
New Zealand Aotearoa

Te taumata manaaki

Standard of care

Te tuku I ngā rongoā mō ngā ratonga
mate whakaahuru i Aotearoa

Administering assisted dying
medication in New Zealand Aotearoa

2021

Ngā mihi | Acknowledgements

The members of the Support and Consultation for End of Life in New Zealand (SCENZ) Committee and the Ministry of Health gratefully acknowledge and thank all those who have given generously of their time and expertise in developing this standard.

Copyright in Ngā paewera Health and disability services standard Nzs 8134:2021 is owned by the Crown and administered by the New Zealand Standards Executive. The tables on pages 4-12 have been reproduced with permission from Standards New Zealand, on behalf of New Zealand Standards Executive, under copyright license LN001426.

Review of standard

We will review this standard regularly and welcome suggestions for how to improve it. Please send any suggestions to the Assisted Dying Services Registrar at RegistrarAD@health.govt.nz.

Citation: Ministry of Health. 2021. *Standard of Care: Administering assisted dying medication in New Zealand Aotearoa*. Wellington: Ministry of Health.

Published in November 2021 by the Ministry of Health
PO Box 5013, Wellington 6140, New Zealand

ISBN 978-1-99-100765-0 (online)
HP 7884



This document is available at [health.govt.nz](https://www.health.govt.nz)



This work is licensed under the Creative Commons Attribution 4.0 International licence. In essence, you are free to: share ie, copy and redistribute the material in any medium or format; adapt ie, remix, transform and build upon the material. You must give appropriate credit, provide a link to the licence and indicate if changes were made.

Ihirangi | Contents

Te whānuitanga Scope	1
Ngā paerewa o ngā ratonga hauora me te hauātanga NZS 8134:2021 Ngā paerewa Health and disability services standard NZS 8134:2021	2
Ngā whakaritenga ā-ture Legal duties	3
Te Tiriti o Waitangi	4
Ngā mātāpono o ngā ratonga mate whakaahuru Principles for assisted dying services	6
Ngā motika o te hunga kei te whiwhi i ngā ratonga mate whakaahuru The rights of people receiving assisted dying services	7
Me manaaki Treat with respect	9
Kaua te whakahau Free from coercion	9
Kōwhiringa i runga i te mōhio Informed choice	10
Ka kitea ngā whakawhitiwhitinga whai hua Effective communication	11
Ngā amuamu Complaints	12
Āpitihanga 1 Appendix 1	13

Te whānuitanga | Scope

This standard has been developed to ensure assisted dying services follow best practice in administering medication in New Zealand Aotearoa. It covers the period of service provision from when a service provider receives the medication from the pharmacy through to the time that the person receiving the medication dies and the service provider returns the medication kit. Contracted pharmacy services in-house standard operating procedures and the **Pharmacy Services Standard NZS 8134.7:2010** cover best practice in safely storing and transporting the medication. Other legal requirements are outlined in Ngā whakaritenga ā-ture | Legal duties.

Ngā paerewa o ngā ratonga hauora me te hauātanga NZS 8134:2021 | Ngā paerewa

Health and disability services standard NZS 8134:2021

This standard of care is intended to be read together with **Ngā paerewa Health and disability services standard NZS 8134:2021** (Ngā paerewa).¹ Ngā paerewa sets out the minimum requirements for acceptable care and support within specified services. It focuses on putting people and whānau at the centre of health and disability services and supporting providers to meet their obligations under Te Tiriti o Waitangi.

The first outcome statement of Ngā Paerewa is relevant to services administering assisted dying medication:

Outcome 1: Ō tātou motika Our rights

Ka whiwhi te tangata i ngā ratonga haumaru, i tētahi paerewa tōtika, e ū ana hoki ki te ture motika kiritaki. E tukuna ana ngā ratonga i runga i te wairua whakaute ki ngā motika tangata, e whakarite ana i te whakaetanga whai mōhio, e whakaiti ana i te tūkino, me te pupuri i ngā uara me ngā whakapono ahurea o ia tangata.

People receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of people's rights, facilitates informed choice, minimises harm, and upholds cultural and individual values and beliefs.

This assisted dying standard of care refers to specific sections, subsections and criteria of Ngā Paerewa that are relevant to services administering assisted dying medication. Assisted dying services should follow the intent of these requirements and adapt them to suit their own context. Refer to the **Ngā Paerewa Sector Guidance** on the Ministry's website for additional information.

This standard of care also replicates the outcome statements of relevant subsections in Ngā Paerewa. These statements reflect the partnership between service providers and the people and whānau who use their services. Further, they reflect the service provider's additional responsibilities under Te Tiriti o Waitangi to be responsive to the needs and aspirations of Māori.

¹ <https://www.standards.govt.nz/shop/nzs-81342021/>

Ngā whakaritenga ā-ture | Legal duties

Attending medical practitioners (AMPs) and attending nurse practitioners (ANPs) must administer medication in a way that meets all of their legal, ethical and professional obligations. These include their obligations under the:

1. **End of Life Choice Act 2019**
2. **Medicines Act 1981**
3. **Medicines Regulation 1984**
4. **Misuse of Drug Regulations 1977**
5. **Crimes Act 1961**
6. **Health Practitioners Competence Assurance Act 2003**
7. **Human Rights Act 1993**
8. **Privacy Act 2020**
9. **Health Information and Privacy Code 2020**
10. **Code of Health and Disability Services Consumers' Rights**
11. **Ngā Paerewa Health and Disability Services Standards (NZS 8134:2021)**
12. international human rights instruments that Aotearoa New Zealand has committed to, including the:
 - a. Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment 1984
 - b. Convention on the Elimination of All Forms of Discrimination Against Women 1979
 - c. International Covenant on Civil and Political Rights 1966
 - d. International Covenant on Economic, Social and Cultural Rights 1966
 - e. International Convention on the Elimination of All Forms of Racial Discrimination 1965
 - f. United Nations Convention on the Rights of the Child 1989
 - g. United Nations Convention on the Rights of Persons with Disabilities 2006
 - h. United Nations Declaration on the Rights of Indigenous Peoples 2007.

Te Tiriti o Waitangi

The health and disability sector is committed to fulfilling the special relationship between Māori and the Crown under Te Tiriti o Waitangi (Te Tiriti).² Services should interpret this standard in a way that is consistent with our Tiriti obligations. The sector's Tiriti framework is embedded in Whakamaua: Māori Health Action Plan 2020–2025.³ This framework (see **Appendix 1**) draws on the findings of the *Hauora Report on the Health Services and Outcomes Kaupapa Inquiry* (Wai 2575) and adopts an approach based on both the principles and articles of Te Tiriti.

For more detail, see the **Whakamaua** action plan. Also see the 2021 standard for more guidance on how to apply Te Tiriti principles. Specifically, AMPs and ANPs should be familiar with and follow the intent of **section 1.1 Pae ora healthy futures when working with Māori** in Ngā Paerewa.

E mātau ana ahau he aha tōna tikanga ki a au

Te Tiriti

Ka pāhautea ka whakapuāwai te Māori i tētahi taiao e whakarite ana i te hauora me te oranga pai.

Hei kaiwhakarato ratonga

Ka mahi tahi mātou ki te awhi, tautoko me te whakatairanga i tētahi tirohanga Māori ki te hauora me te whakarato i ngā ratonga kounga nui, manarite, whaihua hoki mō te Māori, e tāparetia ana e Te Tiriti o Waitangi.

I know what it means for me

Te Tiriti

Māori flourish and thrive in an environment that enables good health and wellbeing.

As service providers

We work collaboratively to embrace, support, and encourage a Māori worldview of health and provide high-quality, equitable, and effective services for Māori framed by Te Tiriti o Waitangi.

AMPs and ANPs have a responsibility to give effect to Te Tiriti in their clinical practice when working with the person and their whānau while administering assisted dying medication. The AMP or ANP should have the capability to engage with Māori in ways that uphold Māori cultural identity and do not detract from it.

Two examples of appropriate engagement illustrate how services can work to fulfil this responsibility. First, following a meaningful engagement process that is formed from mātauranga Māori can uphold the principle of tino rangatiratanga. Second, the AMP or ANP should be always guided by the person or their whānau when it comes to tikanga Māori, which may involve people reciting karakia, singing waiata or speaking matters of the heart. This approach can uphold the principle of options because the AMP or ANP is providing services in a culturally safe and appropriate way that recognises and supports the expression of Māori models of care. Under all circumstances, the AMP or ANP must treat everyone in attendance with courtesy and respect.

² <https://www.health.govt.nz/our-work/populations/maori-health/te-tiriti-o-waitangi>

³ Ministry of Health. 2020. *Whakamaua: Māori Health Action Plan 2020–2025*. Wellington: Ministry of Health. URL: <https://www.health.govt.nz/publication/whakamaua-maori-health-action-plan-2020-2025> (accessed 30 August 2021).

To help AMPs and ANPs be more responsive to Māori, refer to the general guidance from your professional association or regulatory authority. This guidance includes:

- Māuri Ora Associates: **Best Health Outcomes for Māori: Practice implications**
- The Royal Australasian College of Physicians: **Guideline commentary on consulting with Māori and their whānau**
- University of Otago MIHI 501 Health Professionals Course: **Application of Hui Process and Meihana Model to Clinical Practice**
- University of Otago Māori/Indigenous Health Institute Team: **Improving Māori health through clinical assessment: Waikare o te Waka o Meihana**
- Medical Council of New Zealand: **Statement on cultural safety**
- Medical Council of New Zealand: **He Ara Hauora Māori: A Pathway to Māori Health Equity**
- Nursing Council of New Zealand: **Guidelines for Cultural Safety, Te Tiriti o Waitangi and Māori Health in Nursing Education and Practice**
- IM Ramsden, Nursing Council of New Zealand: **Kawa Whakaruruhau: Guidelines for nursing and midwifery education.**

Ngā mātāpono o ngā ratonga mate whakaahuru | Principles for assisted dying services

The following principles should guide AMPs and ANPs in their delivery of assisted dying services.

1. Give effect to our obligations under Te Tiriti, including by considering the interests and needs of Māori.
2. Ensure equity (inclusiveness for all communities and equity of access to services).
3. Provide services that are effective and have robust accountability and safety measures.
4. Provide good value for health and disability system resources.
5. Provide services that are consistent with health and disability system strategies.

Ngā motika o te hunga kei te whiwih i ngā ratonga mate whakaahuru | The rights of people receiving assisted dying services

1. Ngā Paerewa gives direction on how to provide rights-based services. Specifically, AMPs and ANPs should be familiar with and follow the intent of the following sections and criterion from Ngā Paerewa when administering medicine to end a person's life:
 - a. section 1.2 Ola manua o ngā iwi o Te Moana-nui-a-Kiwa kei Aotearoa | Ola manua of Pacific peoples in Aotearoa

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
E tika ana kia whiwih hauora me te oranga pai rawa ngā iwi o Te Moana-nui-a-Kiwa kei Aotearoa e noho ana.	Ka āhukahuka ngā iwi o Te Moana-nui-a-Kiwa i te mana whenua o Aotearoa hei tuakana ki a rātou, ā, ka ū ki te tautoko i te mana whenua e tutuki ai te tino rangatiratanga.	Ka whakarato mātou i ngā ratonga hauora me te hauātanga matawhānui, tautika hoki, e pūtaketia ana e ngā tirohanga o Te Moana- nui-a-Kiwa, ā, e whanaketia ngātahitia ana ki ngā iwi o Te Moana-nui-a-Kiwa mō ngā putanga hauora pai rawa.

I know what it means for me

The people	Te Tiriti	As service providers
Pacific peoples in Aotearoa are entitled to live and enjoy good health and wellbeing.	Pacific peoples acknowledge the mana whenua of Aotearoa as tuakana and commit to supporting them to achieve tino rangatiratanga.	We provide comprehensive and equitable health and disability services underpinned by Pacific worldviews and developed in collaboration with Pacific peoples for improved health outcomes.

- b. section 1.3 **Aku motika i te wā e tukuna ana ngā ratonga | My rights during service delivery**

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
He pānga whaitake tō ōku motika mā roto i ngā mahi me ngā whanonga a ētahi atu.	E whakarangatira ana ngā kaiwhakarato ratonga i te mana motuhake a te Māori.	Ka whakarato ratonga me te tautoko mātou ki te hunga e puritia ana o rātou motika, e ū ana hoki ki ngā whakaritenga ā-ture.

I know what it means for me

The people	Te Tiriti	As service providers
My rights have meaningful effect through the actions and behaviours of others.	Service providers recognise Māori mana motuhake (self-determination).	We provide services and support to people in a way that upholds their rights and complies with legal requirements.

- c. **criterion 3.5.7: Service providers adopt a holistic approach to menu development that ensures nutritional value, respecting and supporting cultural beliefs, values, and protocols around food. Māori and whānau shall have menu options culturally specific to te ao Māori as it relates to any food the person consumes before an AMP or ANP administers assisted dying medication.**
2. Whānau participation, where the person approves it, is an important part of providing an assisted dying service. Specifically, AMPs and ANPs should be familiar with and follow the intent of Ngā Paerewa **criterion 2.3.14: Service providers shall have policies and procedures relating to whānau participation. These are used to maximise whānau involvement in the service and ensures their collective feedback is sought** when administering assisted dying medicine. This criterion supports whānau participation and involvement in the service design for administering assisted dying medication, including collecting and responding to whānau feedback as appropriate.

Me manaaki | Treat with respect

3. Every person has the right to receive compassionate and respectful service. Specifically, AMPs and ANPs must be familiar with and follow the intent of section **1.4 E whakautetia ana ahau | I am treated with respect** in Ngā Paerewa when administering assisted dying medicine.

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
Ka taea e au te noho māori ina whakautetia ahau, ina manaakitia ahau.	Ka ū ngā kaiwhakarato ratonga ki te mana motuhake Māori.	Ka whakarato ratonga me te tautoko ki te tangata mā te huarahi manaaki i te katoa ā, e whakautea ana hoki tō rātou tuakiri me ā rātou wheakotanga.

I know what it means for me

The people	Te Tiriti	As service providers
I can be who I am when I am treated with dignity and respect.	Service providers commit to Māori mana motuhake.	We provide services and support to people in a way that is inclusive and respects their identity and their experiences.

Kua te whakahau | Free from coercion

4. AMPs and ANPs must ensure that the person has made the decision to receive assisted dying medicine independently and free from pressure. Specifically, AMPs and ANPs must be familiar with and follow the intent of section **1.5 E whakahaumarutia ana ahau i ngā mahi tūkino | I am protected from abuse** in Ngā Paerewa.

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
E rongo ana au i te haumurutanga, ā, ka whakahaumarutia i ngā mahi tūkino.	Ka whakarato ngā kaiwhakarato i ngā ratonga haumaru ā-ahurea, ā-haumanu hoki ki te Māori kia rongo ai rātou i te haumaru, ā, ka whakahaumarutia i ngā mahi tūkino.	Ka whakarite mātou kia noho haumaru, kia whakahaumarutia hoki mai i ngā mahi tūkino ngā tāngata e whakamahi ana i ā matou ratonga.

I know what it means for me

The people	Te Tiriti	As service providers
I feel safe and protected from abuse.	Service providers provide culturally and clinically safe services for Māori, so they feel safe and are protected from abuse.	We ensure the people using our services are safe and protected from abuse.

Kōwhiringa i runga i te mōhio | Informed choice

5. Every person has the right to be given information about receiving their assisted dying medicine in a manner the person understands. Specifically, AMPs and ANPs should be familiar with and follow the intent of section **1.6 Ka kitea ngā whakawhitiwhitinga whai hua | Effective communication occurs** and criterion **3.4.5** in Ngā Paerewa.

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
E mōhio ana ahau kei te whakarangona, kei te uaratia aku kōrero, ā, e whai wāhi ana ngā mōhiohio katoa e whakawhitia ana ki te pikinga o taku oranga.	He ngāwari noa te tiki i ngā ratonga me te toro haere, ā, e tukuna ana ngā karere hauora mārama, hāngai hoki ki te Māori.	Ka whakarongo, ka whakaute mātou i ngā reo o ngā tāngata e whakamahi ana i ā mātou ratonga me te whakawhitiwhiti pai ki a rātou mō ō rātou whiringa.

I know what it means for me

The people	Te Tiriti	As service providers
I feel listened to and that what I say is valued, and I feel that all information exchanged contributes to enhancing my wellbeing.	Services are easy to access and navigate and give clear and relevant health messages to Māori.	We listen and respect the voices of the people who use our services and effectively communicate with them about their choices.

Ka kitea ngā whakawhitihitinga whai hua | Effective communication

6. Every person has the right to be supported to make informed decisions about receiving assisted dying medicine. Specifically, AMPs and ANPs should be familiar with and follow the intent of section **1.7 Kua whai mōhio ahau, ā, ka taea a au te mahi whiringa | I am informed and able to make choices** in Ngā Paerewa.

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata	Te Tiriti	Hei kaiwhakarato ratonga
E mōhio ana au ka pātaitia he aha aku tirohanga. Ka whakautetia aku whiringa i te wā e whakatau take ana mō taku oranga. Ki te kore e whakatinanahia aku whiringa, ka whakaratoa mai ētahi mōhiohio e tautoko ana ahau kia mōhio he aha ai.	E whakaratoa ana ngā ratonga kounga nui e ngāwari ana hoki te urunga me te whakaterenga. Ka tukuna e ngā kaiwhakarato ngā karere mārama, hāngai hoki kia taea ai e ngā tāngata me ngā whānau te whakahaere tika i tō rātou hauora ake, te noho hauora, me te noho pai.	Ka whakarato mātou i ngā tāngata e whakamahi ana i rātou māngai ā-ture rānei ki ngā mōhiohio e tika ana ki te whakatau i ngā take i runga i te mōhio, e ai hoki ki ō rātou motika me tō rātou āhei ki te noho motuhake, te whai whiringa me te whakahaerenga motuhake.

I know what it means for me

The people	Te Tiriti	As service providers
I know I will be asked for my views. My choices will be respected when making decisions about my wellbeing. If my choices cannot be upheld, I will be provided with information that supports me to understand why.	High-quality services are provided that are easy to access and navigate. Providers give clear and relevant messages so that individuals and whānau can effectively manage their own health, keep well, and live well.	We provide people using our services or their legal representatives with the information necessary to make informed decisions in accordance with their rights and their ability to exercise independence, choice, and control.

Ngā amuamu | Complaints

7. Any person has the right to complain about the assisted dying services received in any form appropriate to them. Specifically, health practitioners should be familiar with and follow the intent of section **1.8 Nōku te mana ki te tuku amuamu | I have the right to complain** in Ngā Paerewa.

E mātau ana ahau he aha tōna tikanga ki a au

Ngā tāngata

He ngāwari noa ki a au te tuku amuamu. Ina tuku amuamu ahau, ka arotia nuitia ahau, ā, ka whai whakautu wawe.

Te Tiriti

Ko te Māori me ngā whānau te pūtake o te pūnaha hauora me te hauātanga, hei hoa hohe i te whakapaitanga o te pūnaha, me te manaaki, tautoko hoki i a rātou.

Hei kaiwhakarato ratonga

He pūnaha tōkeke, pūataata, tautika hoki tā mātou e ngāwari ai te whiwhi me te whakatau, te whakateitei rānei i ngā amuamu i tētahi āhuatanga e hua mai ana he whakapaitanga pai rawa atu.

I know what it means for me

The people

I feel it is easy to make a complaint. When I complain I am taken seriously and receive a timely response.

Te Tiriti

Māori and whānau are at the centre of the health and disability system, as active partners in improving the system and their care and support.

As service providers

We have a fair, transparent, and equitable system in place to easily receive and resolve or escalate complaints in a manner that leads to quality improvement.

8. If a person or whānau has a complaint, in the first instance they are encouraged to talk to the health practitioner who provided the service. Independent agencies, such as the Nationwide Health and Disability Advocacy Service, offer free advocacy advice and support.⁴ The assisted dying services information on the Ministry's website gives details of the process people and whānau can follow when making a complaint.

⁴ <https://advocacy.org.nz/submit-a-complaint-to-the-advocacy-service/>

Āpitihanga 1 | Appendix 1

Te Tiriti o Waitangi me te pūnaha hauora me te hauātanga | Te Tiriti o Waitangi and the health and disability system



Tā Mātou Pou Tarāwaho Tiriti o Waitangi | Our Te Tiriti o Waitangi framework

Te Tiriti o Waitangi

The text of Te Tiriti, including the preamble and the three articles, along with the Ritenga Māori declaration, are the enduring foundation of our approach. Based on these foundations, we will strive to achieve the following four goals, each expressed in terms of mana:

■ Mana whakahaere

Effective and appropriate stewardship or kaitiakitanga over the health and disability system. This goes beyond the management of assets or resources.

■ Mana motuhake

Enabling the right for Māori to be Māori (Māori self-determination); to exercise their authority over their lives, and to live on Māori terms and according to Māori philosophies, values and practices including tikanga Māori.

■ Mana tangata

Achieving equity in health and disability outcomes for Māori across the life course and contributing to Māori wellness.

■ Mana Māori

Enabling Ritenga Māori (Māori customary rituals) which are framed by te ao Māori (the Māori world), enacted through tikanga Māori (Māori philosophy and customary practices) and encapsulated within mātauranga Māori (Māori knowledge).

The Treaty obligations are a foundation for achieving Māori health aspirations and equity for Māori and therefore delivering on He Korowai Oranga.

Principles of Te Tiriti o Waitangi

The principles of Te Tiriti o Waitangi, as articulated by the Courts and the Waitangi Tribunal, provide the framework for how we will meet our obligations under Te Tiriti in our day-to-day work. The 2019 Hauora report recommends the following principles for the primary health care system. These principles are applicable to wider health and disability system. The principles that apply to our work are:

■ Tino rangatiratanga

The guarantee of tino rangatiratanga, which provides for Māori self-determination and mana motuhake in the design, delivery, and monitoring of health and disability services.

■ Equity

The principle of equity, which requires the Crown to commit to achieving equitable health outcomes for Māori.

■ Active protection

The principle of active protection, which requires the Crown to act, to the fullest extent practicable, to achieve equitable health outcomes for Māori. This includes ensuring that it, its agents, and its Treaty partner are well informed on the extent, and nature, of both Māori health outcomes and efforts to achieve Māori health equity.

■ Options

The principle of options, which requires the Crown to provide for and properly resource kaupapa Māori health and disability services. Furthermore, the Crown is obliged to ensure that all health and disability services are provided in a culturally appropriate way that recognises and supports the expression of hauora Māori models of care.

■ Partnership

The principle of partnership, which requires the Crown and Māori to work in partnership in the governance, design, delivery, and monitoring of health and disability services. Māori must be co-designers, with the Crown, of the primary health system for Māori.

He Korowai Oranga

Meeting our obligations under Te Tiriti is necessary if we are to realise the overall aim of Pae Ora (healthy futures for Māori) under He Korowai Oranga (the Māori Health Strategy).

Along with the high-level outcomes for the Māori Health Action Plan:

- Iwi, hapū, whānau and Māori communities can exercise their authority to improve their health and wellbeing.
- The health and disability system is fair and sustainable and delivers more equitable outcomes for Māori.
- The health and disability system addresses racism and discrimination in all its forms.
- The inclusion and protection of mātauranga Māori throughout the health and disability system.



Equity lives within our Treaty framework

Equity is defined as 'In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.'

Equity is both inherent to Article 3 and an important Treaty principle.