

Tikanga ā-Rongoā

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He Mihi

Me maumahara ngā mate, te iti me te rahi, rātou kua takahi i te ara wairua, e kore e hoki mai. E ngā rangatira i kaha nei ki te kawē i tēnei kaupapa moe mai ra koutou.

Tēnā koutou katoa e ngā whānau o te kaupapa nei, rongoā, e oreore ana kia takatū te kōkiri i te kaupapa rongoā tikanga. Ka haere tōtika tonu ngā mihi ki a koutou katoa. I puta te kōrero i roto i ngā huihuinga ko te whakakotahitanga i roto o rongoā tō tātou oranga. E ai ki ngā kōrero a ngā tipuna, ‘Whiria he kaha tuatinitini mōu, ka whiria he kaha tuamanomano mo te whānau; hei koutu i te whenua kāore e taea te tango’.

Iwi Puihi (Percy) Tipene

Whakamihi

The Ministry of Health gratefully acknowledges the contribution of time and expertise from all those involved in developing this standard.

The significant input provided by the many technical experts whose experience and knowledge have made the development of this work possible, is particularly recognised.

We would like to acknowledge Willie Devine of Ngā Ariki Kaiputahi/Uepohatu for the art work, Standards New Zealand for their facilitation and contribution to the document and Te Paepae Matua Mo Rongoā Trust for allowing the Ministry of Health to include the designs in this standard.

Te Kāwai Tipuna

In 2006, the Ministry of Health released *Taonga Tuku Iho – Treasures of our heritage: Rongoā development plan*. The aim of the plan was to provide a framework for strengthening the provision of quality rongoā services throughout Aotearoa. This work was guided by four goals:

- a. improve the quality of rongoā services
- b. create leadership to strengthen safe practice through networking and quality assurance
- c. increase the capacity and capability of rongoā services
- d. adopt a work plan for research and evaluation activities.

The development of this Tikanga ā-Rongoā document is key to Goal 1: Improve the quality of rongoā services and Action 1: Review the current Māori traditional healing standards of this plan.

Hui were held throughout Aotearoa with rongoā whānau united under a collective vision to protect, nurture and grow the practice of rongoā, to be achieved through the development and implementation of rongoā tikanga.

Two principles underpinned the development of Tikanga ā-Rongoā. These were:

- Whakakotahi i ngā rohe: bringing together all groups within the rohe that provide a rongoā kaupapa, including contracted and non-contracted providers
- Whakapakari i ngā rohe: empowering the rohe with information on its own traditions about health and wellness.

The provision of safe and quality rongoā care to tūroto is paramount to the wellbeing of our communities.

The development of this document has been a collaborative journey with representatives from the rongoā sector to define a benchmark of excellence for the delivery of safe and quality rongoā services throughout Aotearoa.

This voluntary standard provides clear requirements for providers to attain. Guidance is provided in a separate toolkit booklet on how these can be achieved. Documenting both encourages and supports consistency of quality rongoā care and the ongoing development of the rongoā workforce.

This standard acknowledges the mana of rohe and its association with rohe rongoā tikanga.

Te Pou Ora

The overarching outcome of the Tikanga ā-Rongoā standard is to ensure the safe delivery of quality rongoā services to tūroto through the implementation, adoption and adherence to the guidelines for rongoā services throughout Aotearoa.

0 Te Ao Mārama

0.1 Rongoā Māori

Rongoā Māori is informed by a body of knowledge that has at its core the enhancement of Māori wellbeing, including that of the taiao. In this way, Rongoā Māori is a wellbeing oriented practice. It is a specialty based on a body of knowledge accumulated by tipuna Māori that is applied in totality to bring about wholeness or interconnectedness of body, mind, emotion, spirituality, energy, society, culture, relationships and environment. It is a way of being in the world and sharing the appropriate knowledge to help restore balance.

It is not a medical modality in which components can be selected or ignored as one chooses. It is a process that combines healing tradition, environment and mātauranga. As such it differs significantly from a western medical paradigm which has at its heart the identification and management or treatment of disease.

0.2 Papatūānuku rāua ko Ranginui

This standard covers rongoā services provided in a person's home or in their community. It applies to organisations and providers within a rohe.

0.2.1

Rongoā Māori is formulated in a Māori cultural context in which the understanding of events and consequences leading to ill health are addressed through a range of culturally determined responses. These culturally determined responses include, but are not limited to, rongoā rākau, mirimiri and karakia.

Māori wellbeing is determined by the harmonisation of the environment and the essential elements of cultural wellbeing, which include but are not limited to:

- a. mauri
- b. whakapapa
- c. wairua
- d. wai
- e. whenua.

0.2.2

For the purposes of this standard the following are excluded:

- a. alternative medicines and therapies not associated with Rongoā Māori
- b. services provided by registered allied health providers (those under the Health Practitioners Competency Assurance Act 2003) working in the capacity of their registration only and who are not associated with providing Rongoā Māori services
- c. certified health and disability services that are subject to NZS 8134:2008 *Health and disability services Standards* are not providing rongoā services as described in 0.2.1.

0.3 Te Waiora ā-Tangaroa

The objectives of the Tikanga ā-Rongoā standard are to:

- a. provide guidelines for the delivery of quality rongoā services that are safe and appropriate
- b. promote safety and quality of rongoā
- c. acknowledge and support the mana of rohe rongoā tikanga me ona āhuatanga which includes, but is not limited to, succession planning and training
- d. ensure consistency with the principles of the Treaty of Waitangi – partnership; participation and protection.

0.4 Kōrero Whakamārama

For the purposes of this standard, the word ‘shall’ refers to requirements that are essential for compliance with the standard, while the word ‘should’ refers to practices that are advised or recommended.

General guidance on how to meet the criteria for each standard is provided in a separate document. This document is a toolkit and has been developed to assist practitioners, service providers, auditors and assessors with the interpretation of the criteria for each standard by providing examples. However, these examples are general only and do not necessarily include all methods that can be used to meet the criteria of each standard.

NOTE: Where ‘may’ is used in the guidance material, it shows possible ways to demonstrate achievement; a rohe may demonstrate achievement in other ways.

0.5 Te Tiriti o Waitangi

He Korowai Oranga places whānau at the centre of public policy. It challenges us to create environments that liberate and empower whānau to shape and direct their own lives to achieve the quality of life that Māori are entitled to as tangata whenua in Aotearoa. The strategy requires the Crown and Treaty partners to work together in good faith. It encourages all agencies and organisations involved in health care to work together to create a system with defined processes and mechanisms to achieve improved outcomes. Such a system requires ongoing monitoring and evaluation to ensure that the interventions are achieving the desired outcomes for whānau.

0.6 Kōrero Tawhito

For the purposes of this standard the following definitions shall apply:

Arohatanga	love, compassion
Best practice	<p>The current accepted range of safe and reasonable actions that result in efficient and effective use of available resources to achieve quality outcomes and minimise risk for the tūrora.</p> <p>Current accepted best practice should also reflect standards for service delivery where these exist. This may include, but is not limited to:</p> <ul style="list-style-type: none">a. codes of practiceb. research/evidence/experience-based practicec. professional standardsd. best practice guidelinese. recognised/approved guidelinesf. benchmarking.
Interconnected	a oneness in all things
Karakia	incantation or prayers
Kotahitanga	unity; oneness; working together to achieve the same outcome/goal
Manaakitanga	showing respect; an act of kindness
Mauri	life principle
Mirimiri	touch gently, stroke
Orangatanga	wholeness and wellness
Organisation	associations, agencies, groups, independent practitioners, and individuals accountable for the delivery of services to the consumer
Pono	honesty
Rangatiratanga	self-determination – the right to decide how services are delivered while recognising tribal/hapū diversities
Rohe	rohe boundaries as defined by the rongoā whānau. These do not necessarily align with iwi or district health board boundaries.
Rongoā	traditional Māori healing practices, including medicines or remedies
Rongoā kaupapa	specific to the provision of rongoā services
Rongoā practitioner	person who delivers traditional Māori healing
Rongoā rākau	specific to plant properties
Rongoā service provider	<p>an organisation that is responsible for delivering rongoa services. The provision of direct or indirect care or support service to the tūrora and covers anyone who is responsible or accountable to the organisation, be they:</p> <ul style="list-style-type: none">a. employedb. self-employedc. contractedd. volunteer providers. <p>For the purpose of this standard the unpaid/informal carer or person's natural support network are excluded.</p>

Rongoā services	range of services that encompass traditional Māori healing
Rongoā whānau	those whānau involved in rongoā whether they are a practitioner or a supporter
Taiao	universe, wide world, conservation, area
Tapu	a sacred condition affecting persons, places and things which arise from innumerable causes
Taumata	distinguished level
Te Ao Mārama	enlightenment
Te Haumarutanga	safety, protection
Tika	integrity
Tikanga	patterns of appropriate behaviour including customs and rites. Tikanga encompasses, among other things, karakia, tapu, rāhui, rangatiratanga, kotahitanga, wairuatanga, manaakitanga.
Tūroro	consumer, client, customer, patient
Wairuatanga	spirituality
Whānau	the family or an extended family/group of people who are important to the person who is receiving the service. Family includes a tūroro extended family and whānau, their partners, friends, guardian or other representatives nominated by the tūroro.

0.7 Health and Disability Commissioner's Code of Health and Disability Services Consumers' Rights 1996

This standard will assist in meeting obligations under the Code of Health and Disability Services Consumers' Rights (the Code) 1996, a regulation under the Health and Disability Commissioner Act 1994. This standard should be interpreted in a manner that is consistent with consumers' rights and organisations' obligations under the Code. Every person or organisation subject to this standard should be knowledgeable about the Code and comply with its obligations. Refer to www.hdc.org.nz.

This standard and toolkit do not in any way replace or diminish the duties owed to consumers under the Code, but rather provides additional guidance on how the Code requirements might be met in the context of providing rongoā services.

Tūrora Tino Rangatiratanga



This diagram illustrates that the tūrora are at the centre of rongoā services. The rongoā service focuses on looking at treating the overall health of the tūrora in a holistic way; this is in contrast to treating the disease or the illness that a tūrora may have.

The total wellbeing of the tūrora is paramount. True healing puts the mind, body and spirit in harmony.

There are other dimensions of wellbeing to be considered when caring for a tūrora. These include te taha wairua, waiora, hinengaro, tinana, whenua, whakapapa and te reo Māori.

The interactions between tūrora and practitioner are imperative in the process of achieving orangatanga. The tūrora need to be involved in their oranga journey.

1 Tūroro Tino Rangatiratanga

Outcome 1 The rights and mana of the tūroro are respected and upheld.

1.1 Te Mana Tangata

Standard 1.1 The rongoā service is delivered by a rongoā service provider according to the rights and mana of the tūroro.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 1.1.1** The rongoā practitioner demonstrates knowledge and understanding of the mana of the tūroro under existing legislation and incorporates them as part of their everyday practice.
- 1.1.2** The privacy and personal space of tūroro are respected at all times by rongoā practitioners.
- 1.1.3** The tūroro are informed of their rights.

1.2 Te Mana Whakaae

Standard 1.2 The rongoā service provides the tūroro with a process of informed consent.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 1.2.1** The tūroro have a right to make an informed choice and give informed consent.
- 1.2.2** The rongoā service provider is able to demonstrate that consent is obtained.

1.3 Te Mana Reo

Standard 1.3 Information with the tūroro is communicated in a manner that is easily understood.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 1.3.1** The tūroro have a right to full and frank information and open kōrero.
- 1.3.2** The rongoā service provider allows sufficient time for kōrero to take place.
- 1.3.3** Rongoā practitioners provide relevant and appropriate patient and practice information to tūroro in a form, language and manner that enables each tūroro to understand the information.

1.4 Te Mana Wairua

Standard 1.4 Tūroro are free from any discrimination, coercion, harassment, sexual, financial or other exploitation, abuse (physical, psychological, sexual or financial) or neglect.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 1.4.1** There are policies and procedures in place to ensure tūroro are not subjected to discrimination, coercion, harassment, exploitation (sexual, financial or other), abuse (physical, psychological, sexual or financial) or neglect.

- 1.4.2** A process is established to record and report incidents of discrimination, abuse or neglect.
- 1.4.3** All allegations of discrimination, abuse or neglect of any kind are managed and recorded according to the rongoā service provider's policies, procedures and quality and risk management system.
- 1.4.4** Discrimination, abuse and neglect prevention awareness is included in the induction programme for the rongoā practitioner and is updated regularly to maintain knowledge and skills.

1.5 Te Mana Āwhiowhio

Standard 1.5 The tūroto right to make a complaint is understood, respected and upheld.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 1.5.1** An easily accessed, responsive and fair complaints process, which complies with Right 10 of the Health and Disability Commissioner's Code of Health and Disability Services Consumers' Rights 1996 is documented and implemented.
- 1.5.2** Information about a tūroto right to complain and the complaints process is available to tūroto and they are supported in their right to use the complaints process.
- 1.5.3** An up-to-date complaints register is maintained which documents and includes all complaints, dates and actions taken. This shall include but is not limited to:
 - a. there are clearly written guidelines for the rongoā service on what constitutes feedback or complaint
 - b. there is a link between the complaints system and the quality and risk management system.

1.6 Te Mana Tapu

Standard 1.6 The protection of confidentiality is a legitimate expectation of the tūroto.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

- 1.6.1** The rongoā service provider protects and maintains tūroto confidentiality and meets the requirements of appropriate legislation and relevant rongoā professional standards where these exist.

Te Pāharakeke o te Rongoā



This diagram embraces the principles of service delivery and the mauri of rongoā to ensure the tūroro are provided with a high quality and safe rongoā service.

Successful development and implementation of rongoā tikanga requires rohe to take responsibility for the rongoā services. Specifically, the initial steps rohe need to take are:

- a. collectively articulate and agree on their rongoā tikanga, and
- b. plan for and implement the tikanga. For example structures, strategy, systems, policies and procedures should be developed to ensure the implementation of rongoā tikanga in each rohe.

A number of organisations will also have key roles to endorse rongoā tikanga, for example:

- a. all health funders that contract rongoā services should require their contracted providers to meet the rongoā tikanga requirements for the rohe in which they deliver services
- b. rohe authorities should endorse the rongoā tikanga that has been developed and insist that all those who practise rongoā within rohe boundaries shall align with the relevant mandated rongoā roopu registered with the rongoā national association.

2 Te Pāharakeke o te Rongoā

Outcome 2 Management systems are in place to enable rongoā practitioners to deliver quality rongoā services that are safe and appropriate.

2.1 Te Kāwai Tangata

Standard 2.1 Tūroto receive services from rongoā practitioners who are trained and assessed as competent.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

2.1.1 Practitioners have their own skills that are recognised, interconnected, universally understood and accepted by the rongoā sector.

2.1.2 A training plan relevant to the rongoā practitioner's scope of practice is maintained.

2.2 Te Hono ki ngā Kete Ako

Standard 2.2 The rongoā service provider has an orientation and induction programme in place.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

2.2.1 There is a rongoā practitioner orientation and induction programme in place.

2.3 Te Kono Whaikōrero

Standard 2.3 A rongoā service provider is tūroto focused and open to feedback from tūroto and whānau.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

2.3.1 Guidelines for the management of feedback from parties external to the organisation are in place.

2.4 Te Tukutuku Mahitahi

Standard 2.4 The rongoā service provider ensures continuity of service through whakawhanaunga with other groups.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

2.4.1 Links are identified and maintained with key groups, including the rongoā national association, district health boards, Ministry of Health and primary health-care organisations to facilitate continuity of service for the tūroto.

2.4.2 Where appropriate the tūroto are advised of options to access other services.

2.5 Te Pingao Onamata

Standard 2.5 Tūroro receive rongoā services that are planned, coordinated and appropriate to their needs.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

2.5.1 The structure, purpose, values, scope, direction and goals of the rongoā service provider are clearly identified and reviewed.

2.6 Te Whakaritorito

Standard 2.6 Tūroro receive timely, appropriate, and safe services through efficient and effective service management.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

2.6.1 The rongoā service provider is managed by suitably qualified and experienced people with authority, accountability, responsibility and knowledge for the provision of services.

2.7 Te Muka Raranga

Standard 2.7 The rongoā service provider embraces and advocates for the professional and ethical conduct of rongoā practitioners.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

2.7.1 There are policies and procedures to ensure tūroro are not subjected to discrimination, coercion, harassment, sexual, financial or other exploitation, abuse (physical, psychological, sexual or financial) or neglect.

2.7.2 The rongoā practitioner maintains professional boundaries and refrains from acts or behaviour which could benefit the rongoā service provider or organisation at the expense or wellbeing of the tūroro.

Rongoā Taonga Tuku Iho



This diagram illustrates how principles support the delivery of rongoā services to tūroro.

Tikanga begins with overarching principles. They are the foundation for the development and implementation of a rongoā service. Within the rongoā context, these principles are reflected in providers:

- a. Whakapono
- b. Āhuatanga
- c. Ngā Mahi.

Whakapono

Principles help frame a person's beliefs. They have their own mauri, are interconnected and are universally understood and accepted by the rongoā sector. Examples of rongoā principles are manaakitanga, wairuatanga, orangatanga and arohatanga.

At a fundamental level, the rongoā sector has a common understanding of each principle. However the detailed application of each principle may differ for every rohe, in accordance with rohe tikanga. Therefore, it follows that every person in a specific rohe should practise rongoā in accordance with their rohe rongoā tikanga. This will be evidenced by the person's knowledge of rongoā and how they apply that knowledge when providing a rongoā service or product.

Āhuatanga

Āhuatanga refers to a person's knowledge of rongoā which should reflect a holistic approach to doing things, for the right reasons, at the right time. For example, in relation to taiao a person's understanding of manaakitanga will influence their body of knowledge. This will be evidenced by their knowledge of what plants should be grown where, and when and how plants should be sustainably harvested to produce the rongoā required.

Ngā mahi

Ngā mahi refers to how a person applies their knowledge of rongoā. Thus, the actions a person takes from harvesting rongoā through to producing and storing the finished product, reflects their knowledge of taiao and their understanding of manaakitanga within the rongoā context.

3 Rongoā Taonga Tuku Iho

Outcome 3 The rongoā service has been established along the lines of Appendix A
(*Whakaōrite Ngā Kaupapa Rongoā – Traditional Integrated Rongoā Māori service*).

3.1 Ngā Mahi

Standard 3.1 The rongoā service is delivered by a rongoā practitioner according to the appropriate interaction of the spiritual realm with the physical realm.

Criteria The criteria to achieve this outcome shall include a rongoā service provider being able to demonstrate the following.

3.1.1 Has kōrero tawhito that lay down the principles that are practised in the rohe.

3.1.2 Has rongoā practitioners who demonstrate respect for the elements and the qualities that they have and uphold the mauri/integrity of rongoā.

3.1.3 Provides rongoā services that aim to assist the tūroto to improve their taha wairua, taha hinegaro and taha tinana.

3.2 Tūroto Mauri

Standard 3.2 The rongoā service provider's tūroto assessment is delivered by a rongoā practitioner who is tika and pono.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

3.2.1 A quality assessment that is tika and pono is delivered.

3.2.2 Written and verbal information is in a format and language that tūroto understand.

3.3 Tūroto Mōteatea

Standard 3.3 The rongoā service provider and its staff maintain appropriate tūroto records.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

3.3.1 A consistent method (manual or computerised) for registering tūroto and retrieval of records.

3.3.2 Rongoā service providers maintain comprehensive tūroto records, which contain all appropriate and relevant information as described in NZS 8153:2002.

3.3.3 Staff who access tūroto records are trained to use and maintain the records system. Only authorised personnel have access to tūroto records.

3.3.4 Information of a private or personal nature is maintained in a secure manner that is not publicly accessible or observable.

- 3.3.5** Rongoā practitioners use up-to-date and relevant tūroto records.
- 3.3.6** Rongoā practitioners make these records at the same time as the events being recorded or as soon as possible afterwards.
- 3.3.7** All records are legible and the name and designation of the rongoā practitioner is identifiable.

3.4 Tūroto Whakapapa

Standard 3.4 The rongoā practitioner generates individual tūroto service plans to describe their goals, support needs and requirements.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 3.4.1** An individual service plan is developed to reflect the tūroto goals, support needs and requirements.
- 3.4.2** The tūroto are actively involved in consultation, planning, monitoring and implementation of the service plan. With consent, whānau and other relevant rongoā services are actively involved in any or each of these parts of the development of the service plan.
- 3.4.3** The service plan is developed and agreed with the tūroto and clearly details the actions to be taken by the rongoā service and tūroto.
- 3.4.4** The service plan is evaluated regularly to determine the effectiveness of care, advice provided and tūroto levels of compliance.

3.5 Mahi Tiketike

Standard 3.5 Continuous quality improvements are embraced as part of the rongoā service provider's everyday work.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

- 3.5.1** The rongoā service provider applies a culture of continuous improvement to enable the delivery of quality services.
- 3.5.2** A process that promotes the evaluation of the quality of the service and the implementation of ongoing improvements.

Te Mauri o te Rongoā



The preservation of mauri is seen as a life principle for Māori wellbeing as illustrated in the diagram. Mauri weaves through all aspects of rongoā service delivery ensuring health and safety practices protect tūroro, providers, practitioners and the organisation.

Within the context of rongoā, mauri denotes health and spirit, a sustaining intrinsic life force, an essential essence of being, an energy that permeates through all things, animate and inanimate.

Concepts of mauri include:

- all things are connected through whakapapa
- all things of the natural world are connected and interdependent
- there is an existing relationship between the natural environment and the spiritual world
- shifts in the balance of the environment or mauri (for example, through misuse, damage, overuse) would cause shifts in other parts of the system and its related components – as a result, the whole system is eventually affected
- maintaining and restoring balance to a system.

4 Te Mauri o te Rongoā

Outcome 4 Te haumarutanga of tūroro, providers, practitioners and whānau is promoted by the rongoā service provider.

4.1 Te Mauri Haumaru

Standard 4.1 The rongoā service demonstrates a duty of care to ensure the health and safety of tūroro, whānau, practitioners and providers.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

4.1.1 There is a health and safety management system to enable proactive identification and minimisation of workplace hazards and early reporting of incidents, near misses and accidents.

4.1.2 Staff attend compulsory safety training.

4.1.3 Buildings and equipment are regularly cleaned and maintained.

4.1.4 Use of equipment is by authorised and qualified staff only.

4.2 Te Mauri Manaaki

Standard 4.2 The rongoā service provider offers a workplace that minimises the spread of infection.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

4.2.1 The development of a risk assessment tool. This tool should record the spread of infectious diseases and confirm what is to be done by whom, when and the method by which spread of infection will be minimised. This is to be kept on an infectious diseases register.

4.2.2 There is an Infection, Prevention and Control Plan included as part of induction training and orientation pack.

4.3 Te Mauri Tika me te Pono

Standard 4.3 The rongoā service provider maintains the highest standard of occupational health and safety for tūroro, providers, practitioners, manuhiri, and whānau under the Health and Safety in Employment Act 1992.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

4.3.1 There is a mechanism for the prompt notification and recording of incident details and investigation of incident causes.

4.4 Te Mauri Tāwharau

Standard 4.4 The rongoā service provider demonstrates coordinated activities to direct and control risk management.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

4.4.1 A risk management system is established, implemented and maintained.

4.4.2 All rongoā service providers are responsible for the effective management of risk, including the identification of potential risks.

4.5 Te Mauri Mārama

Standard 4.5 The rongoā service provider is monitored and reviewed regularly.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

4.5.1 Keeping tūroto service plans up to date.

4.5.2 Reviews are documented and are tūroto focused.

4.5.3 Feedback from whānau, tūroto and other rongoā service providers is sought as part of the review where appropriate.

4.5.4 There is formal evidence of a review occurring in line with the rongoā service policy.

Te Kahukiwi Rongoā



Each element is interconnected in rongoā tikanga and can be considered as an interwoven whole.

Rongoā principles and practices are determined within the context of rohe tikanga. To achieve consistent, quality rongoā practices within a rohe, rongoā tikanga are defined and determined by the local rohe. Rongoā rohe boundaries are defined by the rongoā whānau and do not necessarily align with iwi or district health board boundaries. How the rohe interprets the basic principles and implements its rongoā tikanga is the responsibility of each rohe.

Once each rohe defines its rongoā tikanga it will have a framework which can be used to validate, verify and endorse the integrity of rongoā practice.

Validating is a process of evaluating the practices and body of knowledge of a rongoā provider. For example how does a provider integrate tikanga within its rongoā mahi and what is the rationale being applied? Kōrero with the provider helps identify the comprehensiveness of their knowledge of rongoā tikanga and what it means to them.

Verifying is a process of checking the compliance of the practice or implementation of the rongoā tikanga of each rohe. Thus it involves confirming that the provider integrates the elements of rongoā tikanga in their day-to-day mahi.

Endorsing involves monitoring the mahi of rongoā practitioners to ensure the required service outcomes are achieved. Endorsement recognises that a person's practice of rongoā is in accordance with the rongoā tikanga of each rohe.

As an illustration, to validate the use of rongoā rākau in a rongoā practice, a provider or practitioner may be asked what they use rongoā rākau for and why and the principles of the tikanga when processing rongoā rākau from harvesting through to final product on the shelf. Verification may involve witnessing and auditing all relevant activities to ensure the providers and practitioner's kōrero and practice align. Endorsement of the provider's use of rongoā rākau would involve certifying that the rongoā rākau product has been produced in accordance with rongoā tikanga, and with routine and continued monitoring of the provider's use of rongoā rākau.

This process would apply equally to other rongoā Māori practices such as mirimiri and karakia.

5 Te Kahukiwi Rongoā

Outcome 5 The rohe rongoā sector takes responsibility of the rongoā service providers and practitioners within its rohe.

5.1 Te Aho Tapu ā-Haumiatiketike

Standard 5.1 Rohe are involved in contributing to and evaluating the delivery of rongoā service providers within their boundaries.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

5.1.1 The rongoā service provider establishes mechanisms to involve rongoā whānau in the planning, provision, monitoring and evaluation of rongoā services.

5.2 Te Tāniko ā-Tane Mahuta

Standard 5.2 Rohe adopt a Whakaōrite Ngā Kaupapa Rongoā framework (see Appendix A) to validate, verify and endorse the integrity of rongoā within their rohe.

Criterion The criterion required to achieve this outcome shall include ensuring the following.

5.2.1 The rohe rongoā service provider implements Whakaōrite Ngā Kaupapa Rongoā as a means of validating, verifying and endorsing the integrity of the rongoā service delivered.

5.3 Te Tawhiu Tikanga a io Taketake

Standard 5.3 The rongoā service is delivered in a manner that respects and acknowledges the values and beliefs of iwi and hapū in the rohe.

Criteria The criteria required to achieve this outcome shall include ensuring the following.

5.3.1 Rongoā service providers understand and respect the key principles of rohe rongoā tikanga.

5.3.2 Rongoā service providers demonstrate a commitment to these principles in the delivery of services.

Referenced documents

Reference is made in this document to the following:

New Zealand standards

NZS 8134:2008 *Health and disability services Standards Part 3 – Health and disability services (Infection prevention and control) Standards*; Wellington: Standards New Zealand.

NZS 8153:2002 *Health records*; Wellington: Standards New Zealand.

Australian standard

AS 2828:1999 *Paper-based health care records*; Sydney: Standards Australia, 1999.

Other publications

Ministry of Health. 2002. *He Korowai Oranga: Māori Health Strategy*. Wellington: Ministry of Health.

Ministry of Health. 2006. *Taonga Tuku Iho – Treasures of our heritage: Rongoā development plan*. Wellington: Ministry of Health.

United Nations Convention on the Rights of Persons with Disabilities. 2006 (ratified by New Zealand on 26 September 2008).

United Nations Declaration on the Rights of Indigenous Peoples 2008.

United Nations Principles for Older Persons 1991.

Related documents

When interpreting this standard it may be helpful to refer to other documents, including but not limited to:

Related legislation

Health and Disability Commissioner Act 1994

Health and Disability Services (Safety) Act 2001

Health and Safety in Employment Regulations 1995

Human Rights Regulations 1993

New Zealand Bill of Rights Act 1990

New Zealand Public Health and Disability Act 2000

Official Information Act 1982

Protection of Personal and Property Rights Act 1988

Treaty of Waitangi Act 1975

New Zealand legislation

Health Act 1956

Health and Safety in Employment Act 1992

Health Practitioners Competence Assurance Act 2003

Health (Retention of Health Information) Regulations 1996

Human Rights Act 1993

Privacy Act 1993

Health and Disability Act 1994

Codes

Code of Health and Disability Services Consumers' Rights 1996

Health Information Privacy Code 1994

Websites

Health and Disability Commissioner

www.hdc.org.nz

Health Quality and Safety Commission

www.hqsc.govt.nz

Ministry of Health

www.health.govt.nz

New Zealand Legislation

www.legislation.govt.nz

Te Kāhui Rongoā Trust

www.rongoāmāori.org.nz

Appendix A – Traditional Integrated Rongoā Māori Service/Kaupapa

(Informative)

Whakaōrite Ngā Kaupapa Rongoā is an inclusive rohe-centred approach to the delivery and practice of rongoā. See Figure A1. It identifies fundamental elements of an ideal rongoā practice and is a framework that can be used to validate, verify and endorse the integrity of the delivery and practice of rongoā. Integral to the delivery and practice of rongoā is tikanga ā-rohe.

Some of the basic principles governing rongoā include wairuatanga, manaakitanga, kaitiakitanga and arohatanga.

Three fundamental building blocks make up rongoā tikanga:

1. Ngā Atua: All rongoā mahi can be traced back to Atua
2. Ngā Mana: refers to elements of the environment used to provide resources for the rongoā practice
3. Ngā Mahi: refers to how knowledge of rongoā is applied.

Figure A1: Traditional Integrated Rongoā Māori Service/Kaupapa

