# Proposed registered nurse standards of nursing competence

July 2024





# Proposed registered nurse scope statement

Registered nurses in Aotearoa New Zealand incorporate knowledge, concepts, and worldviews of both tangata whenua and tangata tiriti into practice. Registered nurses uphold and enact ngā mātāpono – principles of Te Tiriti o Waitangi, based on the kawa whakaruruhau framework for cultural safety, which promotes equity, inclusion, diversity, and rights of Māori as tangata whenua.

Registered nurses are accountable and responsible for their practice, ensuring that all healthcare provided is consistent with their education, competence, the relevant legislative requirements, including government priorities to ensure equitable health for all populations, and are guided by the Nursing Council of New Zealand's standards for registered nurses. This includes the right of Pacific peoples and all population groups to quality services that are culturally safe and responsive.

Registered nurses practise independently and in collaboration with individuals, their whānau, communities, and the interprofessional healthcare team, to deliver equitable person/ whānau/ whakapapa-centred nursing care across the life span and in all settings. Registered nurses may also use their expertise in areas and roles such as leadership, management, education, and research. Conditions may be placed on the scope of practice of some registered nurses dependent on their qualifications and/or experience, limiting them to a specific area of practice. Nurses who have additional experience and have completed the required education will be authorised by the Council to prescribe some medicines within their area of practice and level of competence.

Registered nurses use substantial scientific and nursing knowledge to inform comprehensive assessments, determine health needs, develop differential diagnoses, plan care and determine appropriate interventions. Interventions are evaluated to assess care outcomes based on clinical judgment, and scientific and professional knowledge.

Registered nurses are responsible and accountable for directing and delegating to others, such as unregulated workers and students. Registered nurses also provide support and guidance to enrolled nurses as required.

For the avoidance of doubt in other legislation where nurse is defined, this scope of practice includes general nursing and nursing functions.

# **Proposed standards of nursing competence- registered nurse**

Under the Health Practitioners Competence Assurance Act 2003 (the Act), the role of Te Kaunihera Tapuhi o Aotearoa Nursing Council of New Zealand (the Council) is to protect the health and safety of the public by providing mechanisms to ensure that nurses are competent and fit to practise.

These mechanisms include setting scopes of practice and standards of competence for the nursing profession. A scope of practice statement describes the general nature of the nursing role and is broad rather than prescriptive. Standards of competence (also known as competencies) define the combination of skills, knowledge, behaviours, values, and abilities that underpin effective performance as a nurse.

Standards of competence are used to:

- inform nursing education curriculums
- assess nursing students before registration
- assess nurses returning to the workforce
- · assess overseas nurses looking to work in Aotearoa New Zealand
- assess the ongoing competence of nurses.

The Council has developed these standards in collaboration with the nursing profession to ensure public confidence and safety are maintained. These standards reflect nurses' expectations of each other and describe what whānau, communities and the public can expect of nurses.

The standards are designed to a level that enables every registered nurse to apply them in the practice context where they work. The descriptors provide depth and context to the standards and support registered nurses to identify and develop quality practice in a range of settings.

The standards of nursing competence for registered nurses consist of six pou, which serve as symbols of strength and support. These pou include descriptors of quality nursing and outline what is required to practise safely as a registered nurse in Aotearoa New Zealand.

Pou is an important symbol in Māori culture. Its identity, meaning and significance reflect the deep connection that Māori have to their land and traditions. The pou in this context tells a story of the core values of nursing and the connection with a Māori world view.

#### The use of Māori kupu (words)

The Council has included Māori kupu (words) and concepts within the proposed standards of competence. In consultation with our Māori rōpū from the enrolled and registered nurse design groups, the preference is to avoid direct translations. Therefore, pou have Māori kupu and English words, which are not intended to be a translation of each other, rather to add depth and meaning.

#### Acknowledging regional differences

We acknowledge that there are regional differences in the meaning of kupu Māori. Māori are not a homogenous culture; while there are many common threads, themes, and links, there are also many differences. Different dialects of te reo Māori often build on regional differences between Māori in various parts of Aotearoa. For example, the meaning of pou in Te Arawa means anchor, while in other regions, it means pillar.

The understanding of the diversity within Māori culture is essential as we strive to uphold the standards of nursing competence and honour the unique cultural heritage and perspectives of Māori across Aotearoa.

#### Non direct clinical nursing roles

Practice is not restricted to the provision of direct clinical care. Nursing practice extends to any role where the nurse uses their nursing skills and knowledge. Practice includes working in non-clinical roles, such as in management, administration, education, research, advisory, regulatory and policy development roles that impact on safe, effective delivery of services. Registered nurses are responsible for their own practice and work in collaborative relationships with other health care professionals.

#### Registered nurse standards of nursing competence

There are six pou for the registered nurse standards of nursing competence. These pou describe the competence required to practise safely as a registered nurse in Aotearoa New Zealand.

Evidence of safety to practise as a registered nurse is demonstrated when the nurse meets the following pou:

#### Pou One: Te Tiriti o Waitangi

Giving effect to Te Tiriti o Waitangi in nursing practice requires registered nurses to support the right of Māori to exercise self-determination for health and wellbeing. Registered nurses understand and recognise the status of tangata whenua in Aotearoa New Zealand, which includes the importance of kawa whakaruruhau. They work with individuals and whānau to achieve equitable healthcare outcomes.

#### Pou Two: Cultural safety

Cultural safety in nursing practice ensures registered nurses provide culturally safe care to all people. This requires nurses to understand their own cultural identity, and its impact on professional practice, including the potential for a power imbalance between the nurse and the recipient of care.

#### Pou Three: Whanaungatanga and communication

Whanaungatanga underpins communication in nursing practice that requires registered nurses to establish relationships and connections through the use of effective communication strategies with individuals, whānau, and the interprofessional healthcare team.

#### Pou Four: Pūkengatanga and evidence informed nursing practice

Pūkengatanga and evidence informed nursing practice requires registered nurses to apply critical thinking, and scientific and nursing knowledge to inform the provision of quality nursing practice. Registered nurses use scientific and cultural knowledge to inform clinical decision making and the provision of care.

#### Pou Five: Manaakitanga and people centredness

Manaakitanga and people centredness in nursing practice requires registered nurses to work compassionately, collaboratively, and in partnership to build trust and shared understanding that enables decision making and incorporates the views of people and whānau.

#### Pou Six: Rangatiratanga and leadership

Rangatiratanga in nursing practice requires all nurses to lead and act as change agents. Rangatiratanga is exercised when nurses act as independent thinkers, intervene, speak out, advocate, and follow processes to escalate concerns. Rangatiratanga is further demonstrated when nurses proactively offer leadership support to others, providing solutions and leading innovative change for improvement.

# Standards of nursing competence - registered nurse

To meet continuing competence requirements, registered nurses do not need to provide evidence for each individual descriptor. However, evidence of the quality of their practice needs to be sufficient to reflect each pou.

### Pou One: Te Tiriti o Waitangi

Giving effect to Te Tiriti o Waitangi in nursing practice requires registered nurses to support the right of Māori to exercise self-determination for health and wellbeing. Registered nurses understand and recognise the status of tangata whenua in Aotearoa New Zealand, which includes the importance of kawa whakaruruhau. They work with individuals and whānau to achieve equitable healthcare outcomes.

The descriptors below identify the requirements for registered nurses working in partnership with Māori.

Descriptor 1.1	Engages in professional development related to Māori health, and the relevance of Te Tiriti o Waitangi articles and principles, to the health outcomes for all.
Descriptor 1.2	Understands the impact of colonisation and social determinants on health for Māori and whānau.
Descriptor 1.3	Challenges racism and discrimination in the delivery of nursing and healthcare.
Descriptor 1.4	Uses te reo and incorporates tikanga Māori into practice, as appropriate.

### Pou Two: Cultural safety

Cultural safety in nursing practice ensures registered nurses provide culturally safe care to all people. This requires nurses to understand their own cultural identity, and its impact on professional practice, including the potential for a power imbalance between the nurse and the recipient of care.

The descriptors below identify the requirements to ensure culturally safe nursing practice.

Descriptor 2.1	Practises culturally safe care which is determined by the recipient.
Descriptor 2.2	Creates equitable relationships with individuals and whānau in the provision of healthcare.
Descriptor 2.3	Advocates for individuals and whānau, by including their cultural, spiritual, physical, and mental health to provide whakapapa-centred care.
Descriptor 2.4	Contributes to a collaborative team culture which respects difference and diversity, protects cultural identity by acknowledging differing world views, values and practices.

### Pou Three: Whanaungatanga and communication

Whanaungatanga underpins communication in nursing practice that requires registered nurses to establish relationships and connections through the use of effective communication strategies with individuals, whānau and the interprofessional healthcare team.

The descriptors below identify the requirements for effective communication with individuals, whanau and the wider healthcare team.

Descriptor 3.1	Assesses language and communication needs (verbal and non-verbal) and uses appropriate professional, therapeutic, and cultural communication strategies in all interactions and contexts.
Descriptor 3.2	Communicates in a professional way that builds shared understanding and promotes health literacy.
Descriptor 3.3	Ensures documentation is relevant, accurate, professional and timely.
Descriptor 3.4	Complies with ethical, legal and organisational requirements for obtaining, recording, sharing, retaining and destroying information acquired in practice.
Descriptor 3.5	Provides, receives, and responds to constructive feedback.

### Pou Four: Pūkengatanga and evidence informed nursing practice

Pūkengatanga and evidence informed nursing practice requires registered nurses to apply critical thinking, and scientific and nursing knowledge to inform the provision of quality nursing practice. Registered nurses use scientific and cultural knowledge, and collaborative interprofessional learning to inform clinical decision making and the provision of care.

The descriptors below identify the requirements for the registered nurse to coordinate, manage, lead and evaluate the delivery of quality care.

Descriptor 4.1	Undertakes comprehensive nursing assessments to develop differential diagnoses to inform the plan of care.
Descriptor 4.2	Implements and evaluates effectiveness of care interventions and modifies the plan accordingly.
Descriptor 4.3	Makes appropriate decisions when coordinating and assigning care, delegating activities, and providing support and direction to others.
Descriptor 4.4	Uses knowledge of pharmacotherapeutics to safely manage medicines, including administration, in accordance with local and national policies and best practice guidelines.
Descriptor 4.5	Ensures individuals and whānau have sufficient information to make informed decisions about alternative treatment options.
Descriptor 4.6	Demonstrates digital health literacy and capability to support individuals, whānau, and communities to use technology for promoting wellbeing and managing health concerns.
Descriptor 4.7	Applies infection prevention and control principles in accordance with local and national policies and best practice guidelines.

Descriptor 4.8	Identifies, assesses and responds to emerging risks and challenging situations by adjusting priorities and escalating appropriately.
Descriptor 4.9	Maintains awareness of trends in national and global nursing to inform practice.

#### Pou Five: Manaakitanga and people-centredness

Manaakitanga and people-centredness in nursing practice requires registered nurses to work compassionately, collaboratively, and in partnership to build trust and shared understanding that enables decision making and incorporates the views of people and whānau.

The descriptors below identify the requirements for providing and evaluating person and whānau-centred care.

Descriptor 5.1	Practise integrated relational, holistic and whakapapa-centred care to meet the needs of people and whānau.
Descriptor 5.2	Upholds the mana of individuals, whānau and the profession by practising manaaki in all contexts.
Descriptor 5.3	Facilitates opportunities for people and whānau to share their views.

### Pou Six: Rangatiratanga and leadership

Rangatiratanga in nursing practice is demonstrated when nurses proactively offer leadership support to others, providing solutions and leading innovative change for improvement.

Rangatiratanga requires all nurses to lead and act as change agents. Rangatiratanga is exercised when nurses act as independent thinkers, intervene, speak out, advocate, and follow processes to escalate concerns.

The descriptors below identify the requirements for the registered nurse to lead and work effectively as part of an interdisciplinary team.

Descriptor 6.1	Contributes to, and leads, a collaborative team culture of respect, support, and trust.
Descriptor 6.2	Demonstrates understanding of professional and ethical responsibilities and adheres to the code of conduct, relevant legislation and organisational policies and procedures in practice.
Descriptor 6.3	Reflects on own practice and takes responsibility for own professional development.
Descriptor 6.4	Participates in quality improvement activities.
Descriptor 6.5	Considers and responds to the health, safety and wellbeing of self and others.
Descriptor 6.6	Demonstrates and supports sustainability practices and understands the importance of planetary health.

# **Glossary of Terms**

Accountability	Being answerable for your decisions and actions.
Aiga	Aiga is a Samoan term that means a person belonging to a family, village, and nation. It's a sense of belonging and where genealogy and history intertwines. <sup>1</sup>
Appropriate	Matching the circumstances of a situation or meeting the needs of the individual or group.
Assessment	(Of skill or competence). A systematic procedure for collecting qualitative and quantitative data to describe progress and ascertain deviations from expected outcomes and achievements.
Carers	Individuals, family, whānau and aiga providing care for someone close to them who needs additional assistance with their everyday living because of a disability, health condition, illness or injury. <sup>2</sup>
Cultural Safety	Cultural safety in New Zealand was developed in response to Māori experiences of poor health care that has evolved into two philosophical perspectives (kawa whakaruruhau and cultural safety), with Te Tiriti o Waitangi remaining the framework to develop and progress these perspectives for nursing education and practice. <sup>3</sup> Cultural safety relates to the experience of the recipient of nursing service and extends beyond cultural awareness and cultural sensitivity. It provides recipients of nursing services with the power to comment on practices and contribute to the achievement of positive health outcomes and experiences. It also enables them to participate in changing any negatively perceived or experienced service. <sup>4</sup>
Collaborate	Work together, co-operate with each other.
Competence	The combination of skills, knowledge, attitudes, values and abilities that underpin effective performance as a nurse.
Competency	A defined area of skilled performance.
Competent	The person has competence across all domains of competence applicable to the nurse, at a standard that is judged to be appropriate for the level of nurse being assessed.
Differential diagnosis	Differential diagnosis has become a key element of nursing practice that incorporates history taking, physical assessment and clinical reasoning skills. <sup>5</sup> This level of critical thinking develops with practice from novice to expert. <sup>6</sup> A differential diagnosis is not an official diagnosis, but a step before determining what condition is causing a person's presenting symptoms as there are different conditions that often share similar symptoms. <sup>7</sup>

<sup>1</sup> Efi, T. A. T. T. (2009). Su'esu'e manogi, In search of fragrance: Tui atua Tamasese Ta'isi and the Samoan Indigenous reference. National University of Samoa..p 80 & 105

7 Cleveland clinic

<sup>2 &</sup>lt;u>https://www.health.govt.nz/our-work/carers-in-new-zealand</u>

<sup>3</sup> Barton, P (2023). Kawa whakaruruhau – cultural safety: he kõrero nā Tākuta Irihapeti Ramsden

<sup>4</sup> https://online.flippingbook.com/view/960779225/

<sup>5</sup> J Conner et al (2022) Clinical judgement in nursing – An evolutionary concept analysis. Journal of Clinical Nursing

<sup>6</sup> Benner, P (1984). From novice to expert, excellence, and power in clinical nursing practice

Evidence informed practice	Integration of the best available evidence with the knowledge and considered judgements from stakeholders and experts to benefit the needs of a population. <sup>8</sup>
Health care assistant	A person employed within a healthcare, residential or community context who undertakes a component of direct care and who is not regulated in law by a regulatory authority. Kaiāwhina is a te reo Māori term that is the over-arching term to describe non-regulated roles in the health and disability sector. The term does not replace specific role titles such as healthcare assistant, orderly, mental health support worker. <sup>9</sup>
Health consumer	An individual who receives nursing care or services. The term represents patient, client, resident or disability consumer. This term is used in the Health Practitioners Competence Assurance Act 2003.
Health inequity	Health inequities are systematic differences in the health status of different population groups. These inequities have significant social and economic costs both to individuals and societies. <sup>10</sup>
Integrated relational care	The Fundamentals of Care Framework (is one example of a framework for integrated relational care) that outlines what is involved in the delivery of safe, effective, high-quality fundamental care, and what this care should look like in any healthcare setting and for any care recipient. The framework emphasises the importance of nurses and other healthcare professionals developing trusting therapeutic relationships with care recipients and their families/carers. It also emphasises the need to integrate people's different fundamental needs; namely their physical (e.g., nutrition, mobility) and psychosocial needs (e.g., communication, privacy, dignity), which are mediated through the nurses' relational actions (e.g., active listening, being empathic). The framework also outlines that the context in which care is taking place must support care providers to develop relationships and integrate the needs of those for whom they are providing care. <sup>11</sup>
Kawa whakaruruhau	Kawa whakaruruhau – cultural safety was primarily developed as a means to address the power relationship and attitudinal change of nurses when caring for Māori and was considered a reciprocal obligation of accountability and responsibility within the context of Te Tiriti o Waitangi. Subsequently, cultural safety changed to include all minority groups, while kawa whakaruruhau remained focused on cultural safety within a Māori context and equitable health outcomes for Māori. <sup>12</sup>
Legislated	Those requirements laid down by New Zealand Acts and regulations.
Manaaki	To support, take care of, give hospitality to, protect, look out for - show respect, generosity and care for others. <sup>13</sup>
Manaakitanga	Manaakitanga is a powerful way of expressing how Māori communities care about each other's wellbeing, nurture relationships, and engage with one another. Manaakitanga also extends to the whenua that needs care in order to ensure sustainability for future generations. The value of Manaakitanga is often expressed through the responsibility

<sup>8</sup> WHO (2022). Global competency framework for universal health coverage.

<sup>9 &</sup>lt;u>https://kaiawhinaplan.org.nz/</u>

<sup>10 &</sup>lt;u>https://www.who.int/news-room/facts-in-pictures/detail/health-inequities-and-their-causes</u>

<sup>11</sup> The fundamentals of Care Framework

<sup>12</sup> Barton, P (2023). Kawa whakaruruhau – cultural safety: he kōrero nā Tākuta Irihapeti Ramsden

<sup>13</sup> https://maoridictionary.co.nz/word/3425

Nursing practiceorigin perspNursing practiceUsing mana professafetPacific peoplesSpect and F throutPerson-centrednessThis globa clientPartnershipThe H and P haucePlanetary healthPlanet our respPouA car An est	ri knowledge that covers a wide expanse of knowledge and understanding nating from tūpuna Māori (ancestors), including the Māori worldview and pectives, Māori creativity, and cultural practices. <sup>15</sup> g nursing knowledge in a direct relationship with clients or working in nursing agement, nursing administration, nursing education, nursing research, nursing essional advice or nursing policy development roles, which impacts on public ty. cifically referenced to acknowledge the unique whakapapa relationship with Māori Pacific peoples sharing ancient whakapapa (genealogical) and cultural bonds ugh te Moana Nui a Kiwa (greater Oceania ancestral connections). <sup>16</sup> is a term that is becoming increasingly familiar within health and social care at a al level; it is being used to describe a standard of care that ensures the patient/ t is at the centre of care delivery. <sup>17</sup> health sector should engage with Māori to develop, deliver, and monitor services programmes that reflect Māori needs and aspirations and are designed to improve
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Planetary health Plane nature susta curre Pou A car Preceptor An ex	
Pou A car Preceptor An ex	ora Māori outcomes, reflecting a strong and enduring Te Tiriti partnership. <sup>18</sup>
Preceptor An ex	etary health recognises the interconnection between the health of the earth's ral systems and the wellbeing of human beings. It emphasises the need for ainable practices and policies that protect both the environment and the health of ent and future generations. <sup>19</sup>
-	rved wooden post or pillar that serves as a symbol of strength and support. <sup>20</sup>
Prece	xperienced practitioner who provides supervision during clinical practice and tates the application of theory to practice for students and staff learners. eptorship is a clinical educational strategy where both the preceptor and eptee work together for a specified period of time. The process of preceptorship lves teaching, learning and orientation to the clinical area.
and a	rs to expertise, skill, competence, encompassing the depth of knowledge ability. This highlights the importance of keeping abreast of new knowledge, nologies and models of whānau-centred care; the ability to self-reflect on one's

14 <u>https://www.imsb.maori.nz/maori-wellbeing-in-tamaki-makaurau/manaakitanga/</u>

15 <u>https://www.takai.nz/find-resources/articles/matauranga-maori/</u>

16 Matika, M et al (2021). Maori and Pasifika language, identity, and wellbeing in Aotearoa New Zealand.

17 https://pubmed.ncbi.nlm.nih.gov/22088150/

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21 https://www.nzqa.govt.nz/assets/Maori/Field-Maori-ASMs/Te-Iti-a-Taranga/assessment-guidelines-pukengatanga.pdf

<sup>18</sup> NCNZ (2023) Te Tiriti o Waitangi Policy

<sup>19</sup> University of Technology Sydney (2023). Planetary Health, Climate Change and Sustainable Healthcare: Essential Knowledge and Skills for Nursing Students

<sup>20</sup> https://teara.govt.nz/en/te-waonui-a-tane-forest-mythology/page-4

Rangatiratanga	Rangatiratanga in nursing is fostering a healthcare system that upholds the dignity, rights, and values of all, with a particular emphasis on acknowledging and addressing the needs and aspiration of Māori. It also enhances the quality of care that contributes to a more equitable, responsive and respectful healthcare system for everyone. <sup>22</sup>
Reflection	Reflection on practice has become an important part of nursing education and the continuing competence process. Reflection is linked to the skill of self-monitoring and involves purposefully paying attention to one's thoughts feelings and judgements. The underlying argument is that reflecting on practice helps nurses to gain new insights, foster self-regulation, and contribute to the development of accountable professional practitioners. A lack of insight has been found to be a cue to unsafe practice and reflection has been identified as a component of, or precursor to, insight. Reflection has been defined in various ways but for the purposes of this document, it is defined as the deliberate process of thinking through and interpreting one's thoughts, memories, actions and activities in order to make sense of them, learn from them and make changes if required. <sup>23</sup>
Registered health practitioner	A person who is registered under the Health Practitioners Competence Assurance Act 2003, e.g. midwife, medical practitioner, occupational therapist.
Responsibility	A charge or duty that arises from one's role or status in a profession or organisation.
Self-determination	Mana Motuhake (Article II – unique and indigenous) - enabling the right for Māori to be Māori and to exercise self-determination over their lives and to live on Māori terms according to Māori philosophies, values and practices, including tikanga Māori. <sup>24</sup>
Social determinant	<b>s</b> Social determinants of health are the circumstances in people's environments in which people are born, grow up, live, learn, work, and age, that can affect their health, wellbeing, and quality of life. <sup>25</sup>
Te Tiriti o Waitangi	The founding document for Aotearoa New Zealand signed in 1840 by the Māori people and the British Crown.
Te ao Māori	The Māori world, emphasising the importance of relationships between nature and people. It is a holistic worldview that focuses on interconnections and is grounded in tikanga customary values, lore, and mātauranga knowledge. <sup>26</sup>
Tikanga	Māori customary practices or behaviours. The concept is derived from the Māori word 'tika' which means 'right' or 'correct' so, in Māori terms, to act in accordance with tikanga is to behave in a way that is culturally proper or appropriate. <sup>27</sup>
Whānau	Whānau is often translated as 'family', but its meaning is more complex. It includes physical, emotional and spiritual dimensions and is based on whakapapa. Whānau can be multi-layered, flexible and dynamic. Whānau is based on a Māori and a tribal world view. It is through the whānau that values, histories and traditions from the ancestors are adapted for the contemporary world. <sup>28</sup>

<sup>22</sup> Te One & Clifford (2021). Tino Rangatiratanga and Well-being: Māori Self Determination in the Face of Covid-19



<sup>23</sup> NZNO (2021). Reflective writing.

<sup>24</sup> https://www.health.govt.nz/publication/whakamaua-maori-health-action-plan-2020-2025

<sup>25 &</sup>lt;u>https://healthify.nz/healthcare-providers/s/social-determinants-of-health/</u>

<sup>26 &</sup>lt;u>https://www.otago.ac.nz/maori/world</u>

<sup>27 &</sup>lt;u>https://www.wgtn.ac.nz/maori-hub/rauemi/tikanga-tips</u>

<sup>28</sup> https://teara.govt.nz/en/whanau-maori-and-family/print

Whakawhanaungatanga Process of establishing relationships, relating well to others.<sup>29</sup>

Whakapapa	Genealogy, genealogical table, lineage, descent - reciting whakapapa was, and is, an important skill and reflected the importance of genealogies in Māori society in terms of leadership, land and fishing rights, kinship and status. It is central to all Māori institutions. <sup>30</sup>
Whakapapa centred care	The meaning of "whakapapa-centred" care in the scope's use of this term is derived from whānau-centred <sup>31</sup> - person, whānau, whakapapa-centred care is collaborative health care focused on meeting the needs, values, and desired outcomes of individuals, whānau and future generations. It describes how this is referred to and acknowledges the longer term, multi-generational impacts, and outcomes (positive and negative) of nursing care and support. <sup>32</sup>
Whanaungatanga	Relationships and connections are central to Māori and Māori wellbeing. Whanaungatanga is about forming and maintaining relationships and strengthening ties between kin and communities. This value is the essential glue that binds people together, providing the foundation for a sense of unity, belonging and cohesion. <sup>33</sup>
Whenua	The Māori word for land, also means placenta. <sup>34</sup> Local people, hosts, indigenous people - people born of the whenua, i.e. of the placenta and of the land where the people's ancestors have lived and where their placenta are buried. <sup>35</sup>

<sup>29</sup> https://maoridictionary.co.nz/word/12711

<sup>30</sup> https://maoridictionary.co.nz/search?&keywords=whakapapa

<sup>31</sup> Families Commission (2010)

<sup>32</sup> Whānau Strategic Framework (2009–2012)

<sup>33</sup> https://www.imsb.maori.nz/maori-wellbeing-in-tamaki-makaurau/whanaungatanga/

<sup>34</sup> https://teara.govt.nz/en/papatuanuku-the-land/page-4

<sup>35 &</sup>lt;u>https://maoridictionary.co.nz/search?&keywords=whenua</u>