

1. Purpose

This Procedure provides assistance to West Coast District Health Board (WCDHB) staff members for the provision of cultural appropriate care to patients/residents/clients of WCDHB who identify as **Māori**.

2. Application

This Procedure is to be followed by all WCDHB staff members.

3. Definitions

| Term | Description |
|-----------------------------|--|
| Hapū | <ul style="list-style-type: none"> (1) Sub-tribe of a large tribe (2) Pregnancy |
| Hinengaro | <ul style="list-style-type: none"> Psychological, thoughts, intellect |
| Iwi | <ul style="list-style-type: none"> Kinship group, tribe, nation, people, nationality, race - often refers to a large group of people descended from a common ancestor. |
| Kai | <ul style="list-style-type: none"> Food |
| Kaiāwhina | <ul style="list-style-type: none"> Helper, assistant, contributor <p>Designated Māori staff whose role is to provide support to Tūroro and Whānau using hospital services.</p> |
| Karakia | <ul style="list-style-type: none"> Prayer, to pray or recite a prayer |
| Mana | <ul style="list-style-type: none"> Prestige, influence, status. <p>The more prestigious the event or person, the more Mana it has. Health Services must empower Tūroro and their whānau, in doing so the service's own mana is enhanced.</p> |
| Muru Hara | <ul style="list-style-type: none"> To offend, cause offence |
| Muru Hē | <ul style="list-style-type: none"> To restore and heal a wrong. |
| Noa | <ul style="list-style-type: none"> Be free from the extensions of Tapu, ordinary, unrestricted. <p>In the positive sense, it is the state of freedom of mind and spirit that comes about through being acknowledged, enhanced, restored and healed.</p> |
| Pōwhiri | <ul style="list-style-type: none"> Formal Māori welcome ceremony |
| Rongoā | <ul style="list-style-type: none"> To treat, apply medicines <p>Māori methods of healing including Mirimiri (massage), Te Reo (language), Karakia and herbal remedies.</p> |
| Taonga | <ul style="list-style-type: none"> Treasure, valuables, something prized |
| Tapu | <ul style="list-style-type: none"> Be sacred, prohibited, restricted <p>Restrictions and prohibitions that protect Tapu (well being, dignity and sacredness) from violation.</p> |
| Te Tiriti o Waitangi | <ul style="list-style-type: none"> The Treaty of Waitangi |
| Tikanga | <ul style="list-style-type: none"> Correct procedure, custom, habit, lore, method, manner |
| Tinana | <ul style="list-style-type: none"> Physical body |
| Tūpāpaku | <ul style="list-style-type: none"> Deceased person |
| Tūroro | <ul style="list-style-type: none"> Sick person, invalid, patient |
| Wairua | <ul style="list-style-type: none"> The spirit, spiritual element, spiritual part of a person that exists beyond death |
| Whānau | <ul style="list-style-type: none"> Family, extended family, family group. |

4. Responsibilities

For the purposes of this Procedure:

All WCDHB Staff Members are required to:

- Comply with the requirements of this Procedure

5. Resources Required

These Guidelines requires no specific resources.

6. Process

1.00 Objectives

1.01 **Tikanga** Best Practice Guidelines aim to help staff within the hospital to provide culturally responsive health and disability services to **Māori Tūroro** (Māori patients) and their **Whānau** (family, extended family). These guidelines are underpinned by Māori values, protocols, concepts, views of health and **Te Tiriti o Waitangi**.

1.02 Central to the guidelines is the expectation that **Whānau** are treated in ways that respect their diversities as well as their values and beliefs. This is a reciprocal arrangement requiring of **Whānau** using the services, the same respect for hospital protocols and systems.

2.00 Guiding Principles

2.01 As soon as **Tūroro** and their **Whānau** are involved with a healthcare service they are deemed to be in a state of disempowerment. Acknowledging a person's rites/rights and respecting their beliefs restores the **Mana** of **Tūroro** and their **Whānau**.

Tapu and **Noa** are key concepts that underpin many practices. For example, it is important to keep things that are **tapu** (sacred) separate from things that are **noa** (not-sacred). In many cases, these align with good health and safety procedures that should be practised by staff.

2.02 Permission must always be asked for and an explanation given prior to any intervention. If informed consent and compliance with **Tikanga** is not carried out in a respectful manner during the care of **Tūroro** then a **Mahi Hē** (offence) has been committed. This is regardless of how small the **Mahi Hē** may appear. Another action is then required to correct the **Mahi Hē** to bring about **Muru Hē** (restoration and healing).

2.03 **Tikanga** Best Practice Guidelines are primarily focused on **Māori** as they reflect **Māori** values and concepts. However, they can also be made available and delivered to consumers of health services regardless of ethnicity as they include best practice standards of care.

Central to the policy is the expectation that all users of health services are treated with dignity and respect. In turn, users of health services are expected to behave respectfully. In

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exercising the principles of the policy it is anticipated that the awareness and confidence of the health workforce will be raised and in doing so staff will demonstrate consideration of wider cultural needs and expectations.

- 2.04 **Tikanga** Best Practice Guidelines offers choice to the community about how health care is delivered. The document outlines processes for all staff to follow that are integral to best practice and will assist in the delivery of quality health services within the WCDHB.

3.00 Karakia (blessings/incantation/prayer)

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

4.00 Whānau Support

- 4.01 **Tūroro** and **whānau** will be actively encouraged, included and supported by staff to be involved in all aspects of care and decision making. This includes care plans, discharge planning and multi disciplinary team meetings. A copy of the care plan may be shared with the **Tūroro** and **whānau**.
- 4.02 Staff will ask **whānau** and/or **Tūroro** if they wish to nominate a person to speak on behalf of the **whānau**.
- 4.03 Staff will acknowledge and actively involve the nominated person.

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- 4.04 In agreement with **Tūroro** and **whānau**, staff will include the appropriate **Māori** staff e.g. **Kaiāwhina** in the care and decision making process.
- 4.05 A private room and adequate time will be allocated for **whānau** consultation and decision making throughout the care of **Tūroro**.
- 4.06 Staff will consult with **whānau** regarding suitable meeting times and needs.
- 4.07 Flexibility will be given to visiting times and visitor numbers where possible.
- 4.08 Staff will give serious consideration to a **whānau** member requesting to stay overnight with the **Tūroro**.
- 4.09 Staff will give serious consideration to **whānau** who ask to be present during a surgical procedure. Health and Safety and Infection Control considerations will be explained in this situation.
- 4.10 Staff will be especially supportive of **whānau** visiting when death is expected and/or imminent.
- 4.11 Where appropriate, staff will support and encourage **whānau** to bring food and share meals with the **Tūroro**. Particular food may be requested by the **Tūroro**. It is important that staff support **whānau** in this and especially when death is expected and/or imminent.

5.00 Information and Support

- 5.01 During all initial encounters, staff will introduce themselves and explain their role and service to the **Tūroro** and **whānau**.
- 5.02 When obtaining registration details, staff will accept that the **Māori** concept of “next of kin” may be broadly interpreted.
- 5.03 Where appropriate, staff will ensure that **Tūroro** are offered an interpreter.
- 5.04 Staff will ensure that the **Tūroro** and **whānau** are aware of accommodation options, preferably prior to admission and make referrals when requested.
- 5.05 Staff will notify the appropriate **Māori** staff of **Tūroro** in their care as soon as possible e.g. on admission/referral.
- 5.06 Staff will inform the **Tūroro** and **whānau** of internal and external resources e.g. **whānau** rooms and dedicated spaces to support **whānau** wellbeing, external **Māori** providers, primary providers, support services and relevant agencies outside of the health sector.

- 5.07 The **Māori** health service will maintain a current list of contacts to assist **Tūroro** and their **whānau**.
- 5.08 Staff will offer the choice of having the chaplain attend. Staff will make the arrangements if this is requested.
- 5.09 Information will be delivered clearly and in terms the **Tūroro** and **whānau** understand.
- 5.10 Staff will ensure the **Tūroro** and **whānau** understand the information given.
- 5.11 Information will be provided in more than one way where possible e.g. spoken and written, **Māori** and English.
- 5.12 Staff will inform **Tūroro** and **whānau** of the advocacy service provided by Advocacy Services
- 5.13 If a health advocate is required, staff will make the arrangements unless stated otherwise by **Tūroro** and **whānau**.
- 5.14 Staff will provide verbal and written information and support regarding complaints procedures.

6.00 Specific Needs

- 6.01 Staff will ask **Tūroro** and **whānau** if they have any special cultural, spiritual, language or other needs.
- 6.02 These needs will be documented in the relevant notes e.g. treatment plan, needs assessment, clinical file. Staff will actively seek to ensure they are met.
- 6.03 Staff will respect and support the importance and use of **Rongoā** (**Māori** methods of healing) during **Tūroro** care.
- 6.04 Staff will be prepared to negotiate, document and work collaboratively with **Māori** healers, **Tūroro** and **whānau** regarding the use of **Rongoā**.
- 6.05 Staff will ensure they attempt to pronounce **Māori** names correctly and ask when unsure.
- 6.06 Staff will endeavour to use the preferred name of the **Tūroro**.
- 6.07 A simple request and explanation will be given and consent obtained from **Tūroro** and/or **whānau** before touching **Tūroro** anywhere on the body and especially on the head.

7.00 Food

- 7.01 Food will never be passed over the head.
- 7.02 Fridges/freezers used to store food or medication for human consumption will be clearly identified and not used for any other purpose.
- 7.03 Microwaves used for food will not be used for heating anything that has come into contact with the body.
- 7.04 Tea towels will only be used for the purpose of drying dishes.
- 7.05 Tea towels will be washed separately from all other soiled linen.
- 7.06 Anything that comes into contact with the body or body fluids must be kept separate from food e.g. combs or brushes should not be placed on surfaces where food is placed.
- 7.07 Receptacles used for drinking water will be solely used for this purpose.
- 7.08 Staff will not sit on tables or workbenches and particularly on surfaces used for food or medication.

8.00 Taonga/Valuables

- 8.01 Only remove **Taonga** (valuables/heirlooms) if leaving them on places **Tūroro** at risk; wherever possible **Taonga** will be taped to their person, if not the reason for this explained.
- 8.02 If there is any risk is involved, consent will be obtained from the **Tūroro** or **whānau** before removing **Taonga**.
- 8.03 **Tūroro** and **whānau** will be informed of the risk of storing **Taonga**.
- 8.04 **Tūroro** and **whānau** are to be given the option of removing **Taonga**.
- 8.05 **Whānau** will have the option of caring for **Taonga**.
- 8.06 If **whānau** are not caring for the **Taonga**, it will be kept in the identified valuables safe, where provided.

9.00 Bedpans/Urinals

- 9.01 Bedpans/urinals and food will never be present at the same time.

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- 9.02 Excreta and food will always be kept separate. Excreta will not be placed on surfaces where food is placed e.g. bedpans/urinals will not be placed on surfaces used for food trays.
- 9.03 Bedpans/urinals will not be placed on top of the bedside lockers or nightingales.
- 9.04 Always place bedpans/urinals on the equipment used for this purpose.
- 9.05 Always store bedpans/urinals in the designated area.

10.00 Linen

- 10.01 Different coloured **pillowcases** will be used to differentiate pillows for the head and those used for other parts of the body. (**White for above the waist and blue for below the waist**).
- 10.02 Pillowcases will not be used for any other purpose.
- 10.03 Staff will support **whānau** if they bring their own pillowcases.
- 10.04 Where possible different coloured **pillows** will be used to differentiate pillows for the head and those used for other parts of the body.
- 10.05 Different flannels will be used for the washing of above the waist and below the waist. Where possible use different coloured flannels to differentiate. Washing will follow a strict order starting from the neck to genital and then anal area.
- 10.06 All below waist pillow cases and wash clothes are to be put into the red linen bag for processing by the laundry.

11.00 Māori Specific Areas

- 11.01 These are areas observing **Tikanga Māori**. This includes both current and future areas permanently governed by **Māori** protocols e.g. **Māori** accommodation services, Marae.
- 11.02 For these areas staff will ensure that **Māori** protocols are followed and that **Tikanga** governs.

12.00 General Areas

- 12.01 These are areas used on occasion for a **Māori** specific purpose. This includes rooms that are not permanently governed by **Māori Tikanga** and protocols except on specific occasions.
- 12.02 On these occasions staff will ensure that **Tikanga** governs and **Māori** protocols are followed e.g. **Pōwhiri**. All areas used in the care of **Tūpāpaku** e.g. **Whānau**/Family Rooms, will follow the outlining the procedures for **Tūpāpaku** (Deceased Person).

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13.00 Whānau/Family Room

- 13.01 **Whānau**/Family Rooms are designated rooms located on the ward. All **Whānau**/Family Rooms are governed by tikanga principles and protocols. This room supports the needs of whānau/family of Tūrora on the ward. The **Whānau**/Family Room is available to all Tūrora, staff, and whānau/families regardless of ethnicity.
- 13.02 Staff will ensure the following principles have priority in the **Whānau**/Family Rooms:
- **Whānau** caring for **Tūrora** throughout the process of dying.
 - When the **Whānau**/Family Room is occupied by **Tūpāpaku**, staff will ensure that the **Tikanga** Recommended Best Practice outlining the procedures for **Tūpāpaku** are followed.
- 13.03 **Whānau**/Family Rooms will be guided by the following:
- Everyday use of the **Whānau**/Family Rooms will be determined by consultation between ward staff and appropriate **Māori** staff
 - Staff will negotiate with **whānau** the use of the space for other meeting purposes.

14.00 Research

- 14.01 **Te Tiriti o Waitangi**/The Treaty of Waitangi principles of partnership, participation and protection will be actively addressed and undertaken in good faith. This will occur from the outset of the project i.e. from the negotiating and formulation of the research to the final outcome.
- 14.02 Researchers must address how the research will benefit **Māori**, including how information will be shared with **Māori**.
- 14.03 Before research is initiated, consent may be required from iwi groups, particularly if the research may potentially breach **Tikanga** or involve sensitive issues. This is over and above individual consent.
- 14.04 Some issues may also require consent from **Iwi** and/or **Hapū** especially where ownership may belong to collective stakeholders.
- 14.05 Informed consent (written and verbal) must be sought from **Māori** participants and/or **whānau** involved in the research. This includes requests for body parts/tissue and/or substances (including genetic material) to be collected for research purposes.
- 14.06 Return, retention or disposal procedures will be discussed and agreed to by participants. This will be documented.
- 14.07 Time will be allowed for consultation and decisions to be reached.

14.08 Confidentiality will be maintained, in particular where individuals may be identifiable.

15.00 Removal, Retention, Return or Disposal of Body Parts and/or Tissue and/or Substances including Placenta

15.01 Regardless of how minor the part/tissue or substance is perceived to be by staff, the following process will be followed. All discussions will be non-directive and follow an informed process.

15.02 Staff will talk with the **Tūroro** and/or **whānau** giving a true and clear verbal explanation regarding the full procedure and options as early as possible.

15.03 Staff will offer the option of further support from the appropriate **Māori** staff. Where possible this must happen prior to any intervention.

15.04 Staff will offer the option of **karakia** and make the arrangements if required.

15.05 Staff will give a clear verbal and written explanation to the **Tūroro** and/or **whānau** regarding the interpretation of the terms body parts, human tissue and substances.

15.06 The removal, retention, return or disposal of body parts/tissue/substances will follow WCDHB Procedures and written information will be made available to **whānau** and/or **Tūroro** where applicable.

15.07 Staff will ensure that the **Tūroro** and/or **whānau** have the correct information to make an informed choice. This is especially critical when staff request body parts/tissue be retained and/or examined.

15.08 Staff will consult with the **Tūroro** and/or **whānau** regarding their intentions for removal, retention, return or disposal.

15.09 The process used to discuss this will be done in a sensitive, non-judgmental and consultative way.

15.10 Time will be allowed for the **Tūroro** and/or **whānau** to consult and reach a decision unless immediate physical care is severely compromised e.g. urgent amputation.

15.11 Explicit consent must be obtained (in writing) for the removal of body parts and tissue.

15.12 Explicit consent must be obtained for the retention of body parts.

15.13 Informed acceptance must be obtained for the retention of tissue.

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- 15.14 Where retention is consented to, the purpose for retention will also be agreed to through an informed consent process i.e. for the purpose of education and teaching. This will be documented.
- 15.15 Future use will **only** be the original purpose as agreed to by **Tūroro** and/or **whānau**.
- 15.16 In most cases informed acceptance will be obtained (verbally) for the collection, retention, return and or disposal of substances e.g. blood.
- 15.17 Staff will respect all decisions made by the **Tūroro** and/or **whānau**.
- 15.18 Staff will document all discussions and decisions in the clinical notes, using the appropriate documentation.
- 15.19 Staff will ensure all body parts/tissue and substances are correctly labeled and documented. This is especially crucial if returns are requested.
- 15.20 All body parts/tissue/substances will be returned when requested if this does not involve a high risk to safety.
- 15.21 Staff will ensure any special requests regarding the retention, return or disposal of body parts/tissue/substances are documented and monitored.
- 15.22 Where body parts/tissue/substances are not immediately returned, they will be retained for a reasonable time to allow for the **Tūroro** and/or **whānau** to consent to a process for return, retention or disposal. Flexibility will be allowed.
- 15.23 Staff will make every attempt to ensure body parts/tissue and substances are returned quickly.
- 15.24 Staff will inform the **Tūroro** and/or **whānau** of any necessary safety precautions regarding the handling and disposal of the returned body parts/tissue/substances.
- 15.25 The return of body parts/tissue/substances will be carried out in a way that is consistent with **Tikanga** and in consultation with appropriate **Māori** staff.
- 15.26 Body parts/tissue/substances will be returned in containers that are durable and reflect **Tikanga** practices. This will be determined in consultation with appropriate **Māori** staff.
- 15.27 Staff will record and carry out the wishes of the **Tūroro** and/or **whānau** for the return or disposal of body parts/tissue/substances if the original purpose for retention changes e.g. later found unsuitable for use. Returns will follow **Tikanga** practices and protocols determined in consultation with **Māori** staff.

- 15.28 Staff will offer the return of all hair, fingernails and toenails. This will be documented in the clinical notes.
- 15.29 These will be saved in a patient labeled snap closure plastic bag and returned to the **Tūroro** and/or **whānau**.

16.00 Pending Death

- 16.01 Where possible, **whānau** will have the choice of taking their terminally ill relative home.
- 16.02 Where death is expected imminently, **whānau** will be notified immediately.
- 16.03 Where death is expected imminently, support staff involved in the care of the **Tūroro** will be notified immediately.
- 16.04 Staff will make every attempt to ensure a single room is available.
- 16.05 Staff will make every attempt to allow **whānau** to be present at all times.
- 16.06 Staff will facilitate access to appropriate staff e.g. chaplain and facilities (Chapel).
- 16.07 If there is the potential for involvement from the coroner, **whānau** will be informed at the earliest opportunity.
- 16.08 If there is the potential of a post mortem request, **whānau** will be consulted immediately.

17.00 Movement of Tūpāpaku

- 17.01 The wishes of the **whānau** will always be respected as to how the **Tūpāpaku** is moved.
- 17.02 Whānau will be able to accompany the **Tūpāpaku** when moved.
- 17.03 Staff will always handle the **Tūpāpaku** in a sensitive and respectful manner.
- 17.04 The **Tūpāpaku** will always be transported feet first.
- 17.05 Transportation of **Tūpāpaku** will be conducted discreetly.
- 17.06 All services will have a pre determined “pathway” for **Tūpāpaku**.
- 17.07 Staff will ensure all linen, food cupboards, inpatient and staff pantry and toilet doors are closed during the moving of **Tūpāpaku**.

17.08 The movement of **Tūpāpaku** through public areas will be avoided wherever possible. If not, staff will use the shortest route, **avoiding food and waste areas**. This will be carried out in an efficient, respectful and dignified manner.

17.09 Staff will ensure that the designated lifts are used.

18.00 Following Removal of Tūpāpaku

18.01 Where possible, **karakia** will be performed in the room/area as soon as the **Tūpāpaku** is removed.

18.02 Where possible, the room will not be physically cleaned until **karakia** has occurred.

19.00 Autopsy

19.01 When a post mortem is required by the coroner, or requested by staff a true explanation will be given to **whānau**.

19.02 At all times staff will continually update and inform **whānau**. This will be done as soon as possible so **whānau** are prepared and informed.

19.03 Staff will respect the privacy of **whānau** during discussions.

19.04 A quiet, private area will be allocated to **whānau**.

19.05 Support staff will be notified as soon as possible

19.06 The removal or cutting of **Tūpāpaku** hair is to be avoided unless absolutely necessary to any post mortem. **Whānau** will be notified of this prior to the procedure and offered the option of retaining the hair.

19.07 Staff will make every attempt to ensure a speedy release of the **Tūpāpaku**.

19.08 If a non-coronial post mortem is requested, staff will ensure **whānau** have the correct information to make an informed choice and if agreed, give informed and written consent.

19.09 Time will be allowed for the **Tūroro** and/or **whānau** to consult and reach a decision.

19.10 The retention of body parts/tissue/substances must follow the **Tikanga** Best Practice Guidelines.

19.11 Discussion with **whānau** will also include information on the use of photography. Informed consent for this must be obtained.

- 19.12 All procedures will be discussed in a sensitive, non-judgmental non-directive and consultative way.
- 19.13 Staff will document all discussions and decisions in the clinical notes and appropriate documentation.
- 19.14 All body parts and/or tissue will be returned as soon as possible and follow the **Tikanga** Best Practice Guidelines outlining their return.
- 19.15 All consents will be clearly documented. A record of parts/tissue retained will be kept.
- 19.16 In coronial cases staff must ensure that **whānau** have access to information regarding the autopsy procedures, it is for the coroner's office to ensure this information is provided. When body parts and/or tissue are required for further analysis in determining death it is the responsibility of the pathologist to ensure that appropriate liaison and/or consultation with the family/ **whānau** occurs
- 19.17 Informed consent will be obtained for any procedures other than those needed to establish cause of death.
- 19.18 Body parts, tissue and/or substances will only be taken if needed to determine the cause of death.
- 19.19 Return, retention or disposal will follow the **Tikanga** Best Practice Guidelines.
- 19.20 Retention of body parts and/or tissue from post mortems beyond the agreed and/or required examination time will not be retained unless written and verbal informed consent has been obtained.
- 19.21 All consents will be clearly documented. A record of parts/tissue retained will be kept.
- 19.22 All body parts and/or tissue will be returned as soon as possible and will follow the **Tikanga** Best Practice Guidelines outlining their return.

7. Precautions and Considerations

- ➔ Patients/residents/clients must be allowed to identify themselves as **Māori**.
- ➔ When treating **Māori** it is important for staff members to acknowledge their cultural values and beliefs in relation to the four cornerstones of **Māori** health care.
- ➔ Cultural assessments can be provided as part of the interdisciplinary team approach to care and are to be undertaken by a suitably qualified and experienced staff member.

8. References

There are no references associated with this Procedure.

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9. Related Documents

WCDHB Return of Body Parts Procedure

WCDHB Informed Consent Procedure

WCDHB Ethics Procedure

WCDHB Compliance with the Code of Health and Disability Services Consumer Rights Procedure

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