

Te Rōpū Whakakaupapa Urutā position is:

Mana whakaora - Culturally-safe health care is an essential right through all levels of the pandemic response.

Mana taurite - Culturally-safe whānau visitation recommendations need to be transparent and equitably delivered throughout the health care system.

Mana motuhake - Enabling sovereign decisions by Whānau Manaaki is crucial and requires access to resources, irrespective of setting.

Mana whakaora - Culturally-safe health care is an essential right through all levels of the pandemic response.

Access to culturally-safe quality healthcare is a right afforded to Māori by Te Tiriti o Waitangi and the United Nations Declaration of the Rights of Indigenous People.

Nowhere is this right more important, than in the right to accessing culturally-safe palliative and end of life care. The COVID-19 situation does not remove the Crown's obligations to Māori.

While the COVID-19 pandemic response requires extraordinary measures, it is imperative that Māori participate in all critical decision-making, particularly

where these decisions have such detrimental impact on cultural practices.

Māori participation is vital in planning and decision making for all stages of COVID 19 alert levels.

Whilst the drive to prevent the spread of COVID-19 in our hospitals and communities is absolutely supported, we advocate for carefully planned, culturally-appropriate, tailored solutions to achieve prevention of infection spread, whilst upholding the Crown's responsibility to ensure Māori patient- and whānau-centred palliation.

Mana taurite - Culturally-safe whānau visitation recommendations need to be transparent and equitably delivered throughout the health care system

Isolating Māori patients from their whānau during palliative or end of life care is in breach of their rights to equitable, culturally-safe care.

The current lockdown rules compromise access to culturally-safe palliation in all healthcare settings including hospitals, hospice and aged residential care facilities.

Whānau Manaaki (Family Carers) are at the centre of good quality, culturally-safe palliative and end of life care and are an essential resource.

Evidence around the risks of hospital-acquired COVID spread is limited, however emerging case studies suggest hospital-acquired infection rates can be prevented with comprehensive infection control measures.

Therefore, in order to deliver culturally-safe equitable care, in the hospital setting, **whānau visitation for palliative and end of life care could be**

managed with infection control and PPE measures. In the hospice environment, allowance of **a whānau 'bubble' should be considered** to support care.

The decision to allow visitation of whānau in the various healthcare settings is inconsistent, and we expect inequitable, within and across the District Health Boards (DHBs). For example, exemptions to this no visitor policy are variably determined by individual clinical staff members.

Currently, all individuals requiring palliative or end of life care are subjected to the same visitation restrictions, independent of their COVID-19 infection status or risk. This blanket approach to infection risk management requires critical consideration.

Leadership from the Ministry is necessary to ensure **clear, transparent and equitable visitation guidelines**. Communication of these guidelines must be disseminated in a way that is accessible to whānau, community and clinical staff.

Mana motuhake - Enabling sovereign decisions by Whānau Manaaki is crucial and requires access to resources, irrespective of setting

The mana and authority of whānau, Hapū, Iwi and Māori communities is non-negotiable. Palliative or end of life care providers must ensure Māori have the autonomy and necessary resources to be able to make and enact sovereign decisions.

Whānau are making the decision to move from secondary care settings back into the home due to visitation restrictions, even when there is less support

in the community. Supporting and empowering Whānau Manaaki to effectively carry out their role in end of life care if at home is essential. Adequate and culturally-appropriate resources and care in the home packages need to be in place, otherwise inequities of care will be magnified.

Tailored whānau care plans must be developed for Māori patients in all care settings.

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