

# Te Ao Māori Framework Implementation Guide

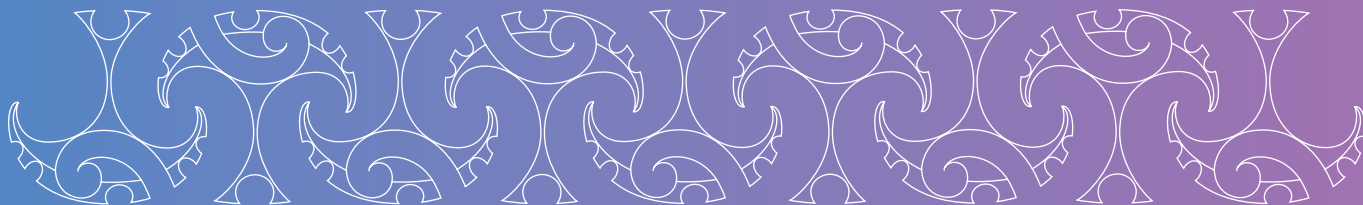
## He Aratohu mō Te Anga Mātauranga Māori



**Te Kāwanatanga  
o Aotearoa**  
New Zealand Government



HEALTH QUALITY & SAFETY  
COMMISSION NEW ZEALAND  
*Kupu Taurangi Hauora o Aotearoa*

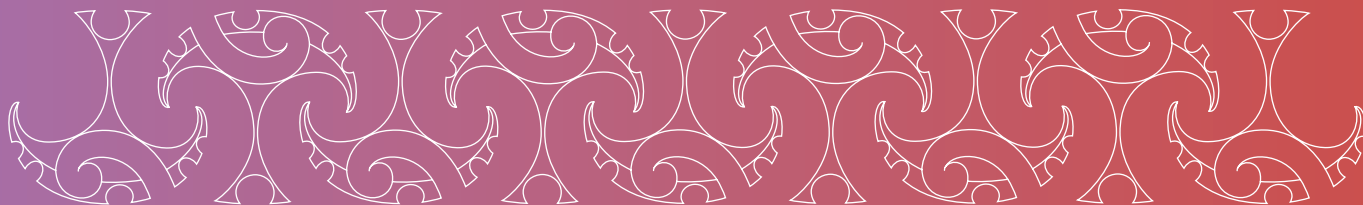


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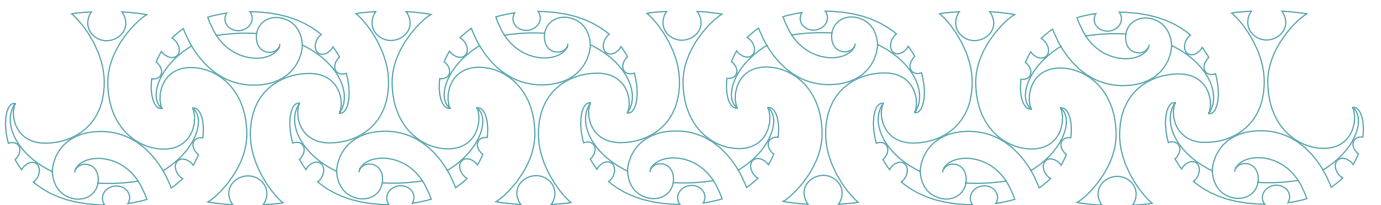
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## He karakia

Te huanga o te whakaaro nui  
He puakitanga mātauranga  
Tuia ki te ira tangata  
Tāwhiwhi atu ki te kāhui o ngā atua  
Kua horahia te Takapau wharanui  
Te rerenga o te kōrero ki te ao mārama  
Marama ki uta, marama ki tai  
Tahia te kī, tahia te wānanga  
Hoatu, e Rongo,  
whakairihia ake te kete kōrero ki runga  
Te kupu kōrero kia mau  
Te Kete wānanga kia ū  
Ō whiwhia, ō rawea  
Tūrou parea, tūrou hawaiiki  
E rarau ki te tapuwae nui o Tāne  
Tāne-i-te-wānanga  
Tāne-nui-ā-rangi  
Tuturu ā-whiti whakamaua kia tina  
Tina!  
Haumi ē! hui ē! Tāiki ē

Emerge into consciousness  
Revelations of new knowledge  
Bind it to humanity  
commune with supernatural forces  
our collective aspirations are set  
narratives have created pathways for clarity  
transparency spreads on land and sea  
our words unite us, we seek resolution as one  
Rongo receive  
suspend the basket of narrative above  
Holdfast to the spoken word  
Embrace the kete of worldly knowledge  
bring it all to fruition  
inner forces flourish, forces of ancient times  
pursue the pathway of Tāne  
Tāne of scholarly pursuits  
Tāne source of knowledge and humanity  
Bind it all together  
It is bound  
It is complete! Assemble together! it is done.

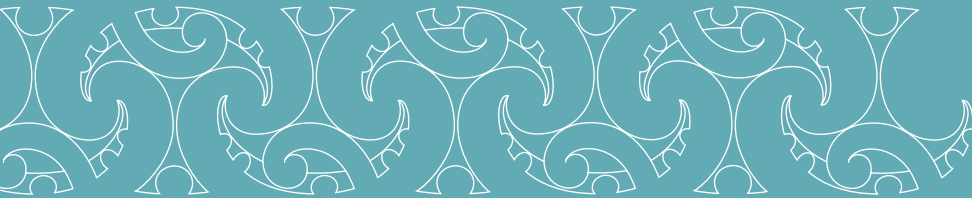
*He mea titoa tēnei karakia nā Tākuta Meihana Durie*



## He mihi whakamaumaharatanga

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Nei ka pupuru I te pae o maumahara ki a nunumi mā ki a roroa mā  
I roto ai I te tirohanga kanohi, I te rāngona taringa  
Ka taka kō roto nei ka māwherangi auē  
Ki a rātou mā ka whakairi ai hei kimonga ki te uma o Ranginui  
Moe māi rā.





## Document purpose

### Te whāinga

This document aims to guide health organisations in their implementation of the Health Quality & Safety Commission (the Commission) Te Ao Māori Framework, which was developed in 2020 in partnership with Māori health providers, Whānau Ora providers and participating district health boards (now Te Whatu Ora districts) across Aotearoa New Zealand.<sup>1</sup>

The implementation guide provides a 'roadmap' to improvement, suggesting how health organisations can be more responsive to whānau needs at both governance and operational levels.

## Introduction

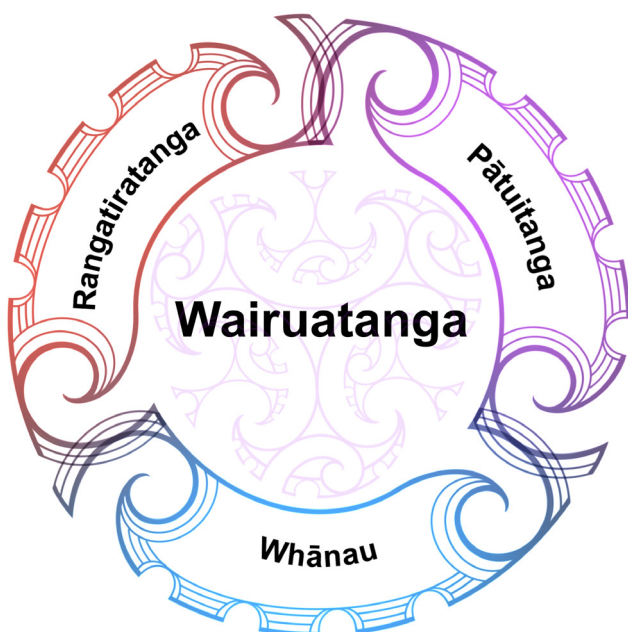
### He kupu whakataki

Institutional racism means that population groups have different levels of access to resources and power, and as a result some groups have advantages over others. The health and disability system in Aotearoa New Zealand has enabled this inequity to thrive and result in negative health outcomes for Māori.

To address this inequity, significant system change is needed, including a renewed and tangible commitment to Te Tiriti o Waitangi (Te Tiriti) obligations between the Crown and Māori.

Kaupapa Māori and te ao Māori-grounded approaches to quality care allow health providers to continually engage with and respond to the needs of whānau. The Te Ao Māori Framework (Figure 1) and its implementation guide will help health organisations to have a better understanding of how to improve their services and the quality of care whānau Māori can expect to receive. The framework and implementation guide offer pathways to develop and improve an organisation's cultural competency and cultural safety.

Figure 1: Te Ao Māori Framework



The framework and implementation guide seek to:

- bring about more meaningful partnerships between the Crown and Māori that reflect equitable resourcing, decision-making, service design and delivery as both partners work together to improve Māori health outcomes
- improve understanding and application of cultural competency and literacy within health organisations to increase Māori engagement with and access to services
- support health organisations to develop appropriate policies, strategies and planning systems that reflect greater understanding of and responsiveness to the issues and barriers experienced by Māori.

<sup>1</sup> See the Health Quality & Safety Commission website for documents describing the framework concept and how and why it was developed: [www.hqsc.govt.nz/resources/resource-library/te-ao-maori-framework/](http://www.hqsc.govt.nz/resources/resource-library/te-ao-maori-framework/)

## Background

### He kupu whakamārama

#### Rationale for systemic change

Improving the quality of care for whānau Māori should be a priority for all health services delivered within Aotearoa New Zealand. However, significant evidence suggests that Aotearoa New Zealand's history of health service delivery has embedded systems that enable inequities to thrive, ultimately dictating the quality of care whānau Māori can expect to receive.

As a result, whānau Māori have had to navigate a flawed system and have had inadequate access to services and received poorer quality of care. Health services have failed to improve over time.

To begin to address this inequity, the Commission held some collaborative consultation workshops in 2019/20, where the challenges and barriers affecting Māori health and wellbeing were highlighted. The workshops also demonstrated what works well and that quality care for Māori needs to be responsive to Māori, reflect mātauranga Māori and be based within a te ao Māori context.

The framework was then developed with the aim of helping health organisations introduce te ao Māori-grounded approaches to care.

#### Where impact is most influential

The new health environment, established in July 2022, brought forth Te Whatu Ora - Health New Zealand, a single health entity to provide consistent, high-quality health services for all people. Te Whatu Ora works in partnership with Te Aka Whai Ora | Māori Health Authority to improve services and contribute to equitable health outcomes for Māori.

The Te Ao Māori Framework supports this direction and, through its implementation, seeks to guide and support health organisations in working both with one another and with whānau Māori to improve health outcomes for Māori.



## About the framework

### Mō te anga

The Te Ao Māori Framework contributes to addressing inequities in the current health system by improving the quality of care provided to whānau Māori.

The four principles of the framework – wairuatanga, rangatiratanga, pātuitanga and whānau – interconnect and, when implemented as a whole, will enable te ao Māori and mātauranga Māori to form the foundation of the required system change.

The framework focuses on:

- shifting embedded ways of doing things through Te Tiriti partnerships with Māori
- supporting improvements at both governance and operational levels
- supporting health care service design and delivery that appropriately acknowledges Māori well being as holistic, whānau centred and focused on whānau outcomes.

Table 1: How the framework principles will look when implemented

Framework principle	Problem definition	Principle demonstrated in equitable health sector	Intended outcomes
<b>Wairuatanga</b>	Te ao Māori and mātauranga Māori are not widely understood or embraced in relation to Māori wellbeing	Health care is holistic and includes the physical, cultural and spiritual elements to create and maintain wellbeing	Te ao Māori and mātauranga Māori are included and lead service design and implementation
<b>Rangatiratanga</b>	The health sector does not enable Māori autonomy and leadership to influence health system outcomes	Māori have the capacity to exercise autonomy and influence decision-making	Māori autonomy and leadership drives service funding allocations influencing service design and delivery
<b>Pātuitanga</b>	The existing partnership between the Crown and Māori is inequitable	Partnership between the Crown and Māori is based on a shared power relationship	Partnerships with Māori drive decisions and inform resource allocations and service selection
<b>Whānau</b>	Health care targets individual need	Māori access to services vis timely, culturally safe and responsive to their needs	Health services are holistic and designed based on whānau needs





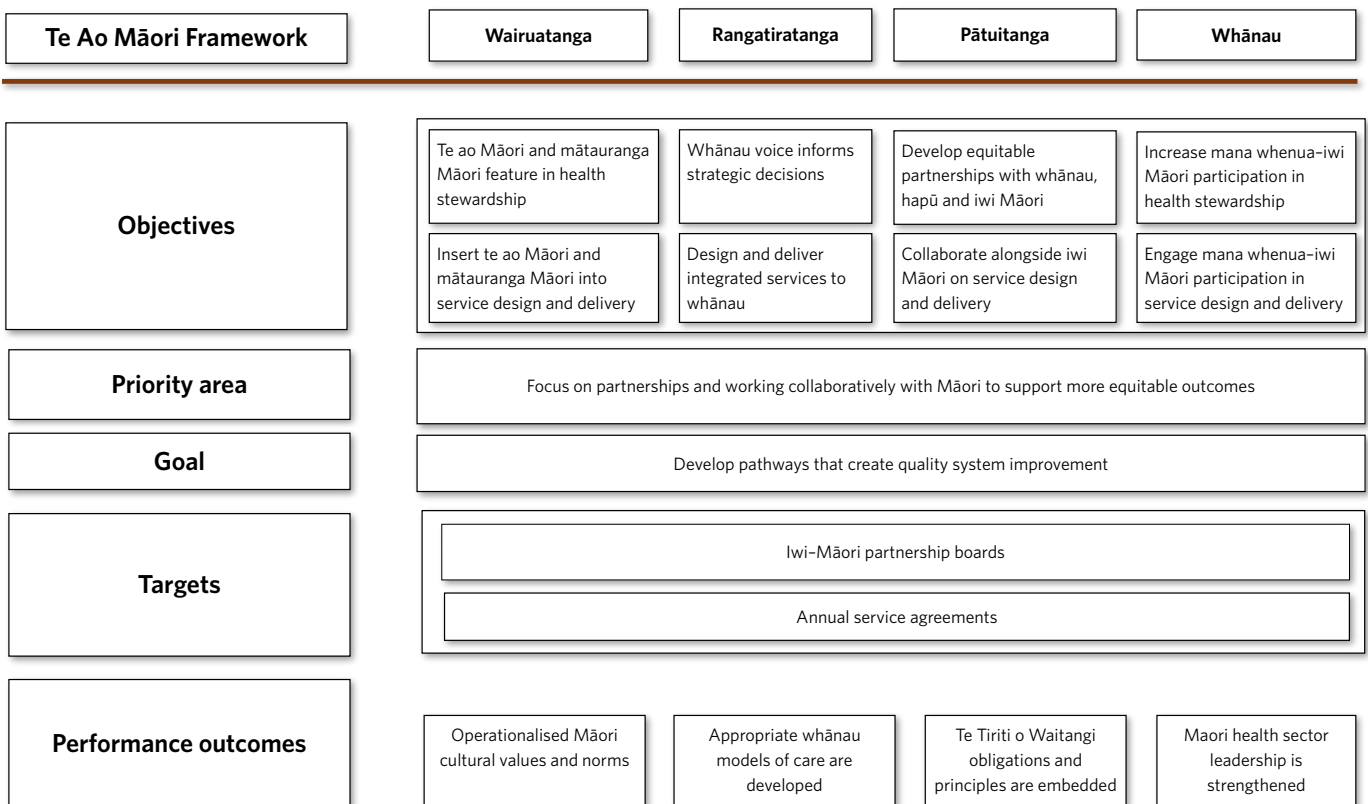
# High-level implementation guide

## He aratohu whakarite

The framework focuses on improving the quality of care provided to whānau Māori, whereas the implementation guide provides a roadmap to improvement, suggesting how a health organisation can be more responsive to whānau needs at both governance and operational levels. It also guides the partnership approach with Māori and the shifts required to embed changes incrementally and systemically.

Figure 2 shows a high-level implementation process, suggesting the pathways and actions health organisations can take, joining up collective efforts to shift inequities that have been embedded in the health system.

Figure 2: High-level Te Ao Māori Framework implementation process

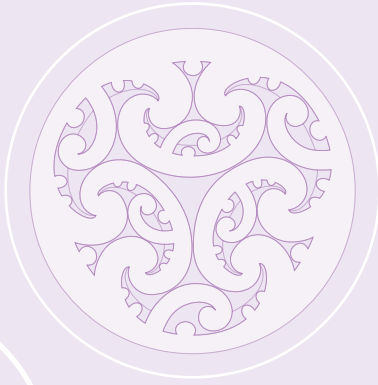


## Implementation guide for each framework concept

### He aratohu mō ia ariā o te anga

*‘Te Ao Māori Framework: Creating space to address equity and embed Te Tiriti o Waitangi’*

The following sections expand on each concept within the Te Ao Māori Framework and suggest ways in which health organisations can be more responsive to whānau needs at both governance and operational levels.



## Wairuatanga

The holistic nature te ao Māori links the physical being too emotional and spiritual wellbeing. Hence, wairuatanga is in the middle of the framework, which makes culture a central focus in the design of services. The goal of wairuatanga is to embed tikanga Māori and cultural safety into the health system.

### Governance

Objective				
Te ao Māori and mātauranga Māori are key in health stewardship				
Short-term indicator		Source	Frequency	
Champion and advance the use of te ao Māori and mātauranga Māori across the health sector		Governance board and executive lead	Six-monthly	
Advance the use of te ao Māori and mātauranga Māori across the health sector				
Activity	Target	Resources	Lead	Impact
Governance board members and executive leads check unconscious bias and racism within their organisation	Attendance numbers at workshops on unconscious bias	Governance board and executive lead	Governance board and executive lead	Unconscious bias and racism are acknowledged and addressed
Develop a funding model that considers te ao Māori and mātauranga Māori as pivotal criteria for funding distribution decisions	Develop funding model that increases equitable resourcing	Governance board and executive lead	Governance board and executive lead	Te ao Māori and mātauranga Māori are prioritised in funding allocation
Governance board members champion the use of te ao Māori and mātauranga Māori	Develop partnerships with iwi Māori	Governance board and executive lead	Governance board and executive lead	Improve the uptake of te ao Māori and mātauranga Māori across the health sector



## Operational

<b>Objective</b>				
Insert te ao Māori and mātauranga Māori into service design and delivery				
<b>Short-term indicator</b>		<b>Source</b>	<b>Frequency</b>	
Identify and integrate mātauranga models of wellbeing		Service lead	Six-monthly	
<b>Identify and integrate mātauranga models of wellbeing</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Mana whenua and/or whānau are engaged to identify appropriate te ao Māori and mātauranga principles for service delivery	Project or service development initiation	Human, time, koha and other monetary resources	Governance board and executive lead	Māori cultural concepts are explicitly understood and embedded into the system
Cultural principle measurement tools are developed to monitor progress alongside mana whenua	Service development at conceptual stage initiation	Staff time Māori specialist knowledge	Executive lead Human resources lead Project lead	Baseline measures are identified to measure and monitor outcomes achieved
Service agreements outline that health service providers are accountable to achieve te ao Māori and mātauranga measures	Service development at conceptual stage initiation	Staff time Māori specialist knowledge	Executive lead Human resources lead Project lead	Accountability is specific and outlined in service agreements



## Rangatiratanga

The inclusion of Māori leadership in decision-making processes when services are designed.

### Governance

<b>Objective</b>				
Increase whānau, mana whenua and iwi Māori participation in health stewardship				
<b>Short-term indicators</b>			<b>Source</b>	<b>Frequency</b>
Māori leadership drives strategy and decision-making			Governance board and executive lead	Six-monthly
<b>Māori leadership drives strategy and decision-making</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Māori leadership drives service funding allocation, service selection, design and delivery	Service development at conceptual stage initiation	Governance board and secretariat	Governance board and executive lead	Improved Māori health sector leadership
Build Māori capacity and capability to participate equitably in health stewardship settings	Service development at conceptual stage initiation	Governance board and secretariat	Governance board and executive lead	Improved Māori health sector leadership

### Operational

<b>Objective</b>				
Engage whānau, mana whenua and/or iwi Māori participation in service design and delivery				
<b>Short-term indicators</b>			<b>Source</b>	<b>Frequency</b>
Mana whenua are engaged at senior leadership levels to participate equitably in decision-making processes			Executive lead	Six-monthly
<b>Mana whenua are engaged at senior leadership levels to participate equitably in decision-making processes</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Whānau, mana whenua and/or iwi Māori are engaged to implement appropriate te ao Māori and mātauranga Māori at the conceptual stage of service design phase	Service development at conceptual stage initiation	Staff time Lead(s)	Executive lead	Improve Māori health sector leadership

## Pātuitanga

The growing and fostering of strong partnerships with Māori, which is fundamental to ensuring the right concepts are included in the design and delivery of services.

### Governance

Objective				
Develop equitable partnerships with whānau, hapū and iwi Māori				
Short-term indicators			Source	Frequency
Māori make decisions and are supported to implement them			Governance board and executive lead	Six-monthly
Māori are empowered to make and implement decisions				
Activity	Target	Resources	Lead	Impact
Acknowledge the Crown's role as enabler and implementer	Service development at conceptual stage initiation	Governance board and executive lead	Governance board and executive lead	Formal partnership agreements can be measured and monitored
Allow equitable contributions to be made by all partners	Service development at conceptual stage initiation	Governance board and executive lead	Governance board and executive lead	

### Operational

Objective				
Collaborate alongside whānau, mana whenua and/or iwi Māori on service design and delivery				
Short-term indicators			Source	Frequency
Co-design with Māori to determine the issue, design the process, develop solutions and make decisions			Service lead	Six-monthly
Co-design with Māori to determine the issue, design the process, develop solutions and make decisions				
Activity	Target	Resources	Lead	Impact
Agree on clearly defined outcomes and a common agenda	Service development at conceptual stage initiation	Staff time Lead(s)	Executive lead	Formal partnership agreements can be measured and monitored
Share resources to achieve the best outcomes for whānau Māori	Service development at conceptual stage initiation	Staff time Lead(s)	Executive lead	

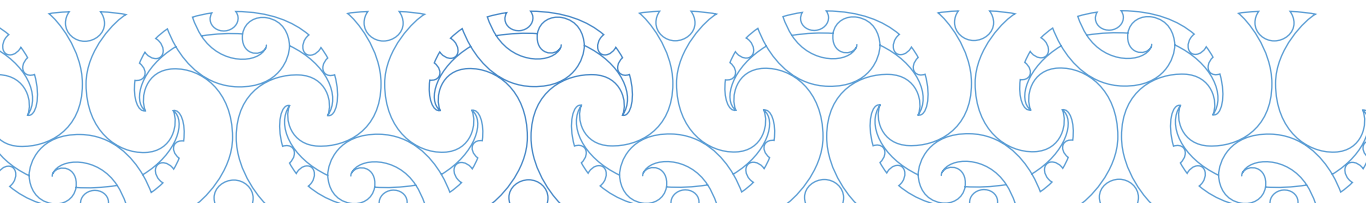


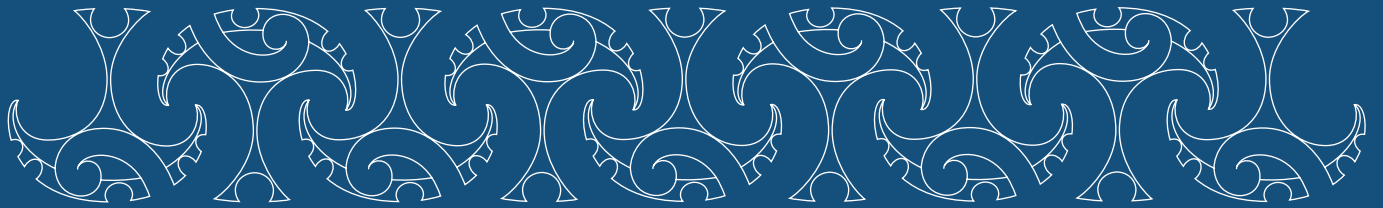
# Whānau

Whānau needs and improving health outcomes for whānau are the drivers for why services are created and designed.

## Governance

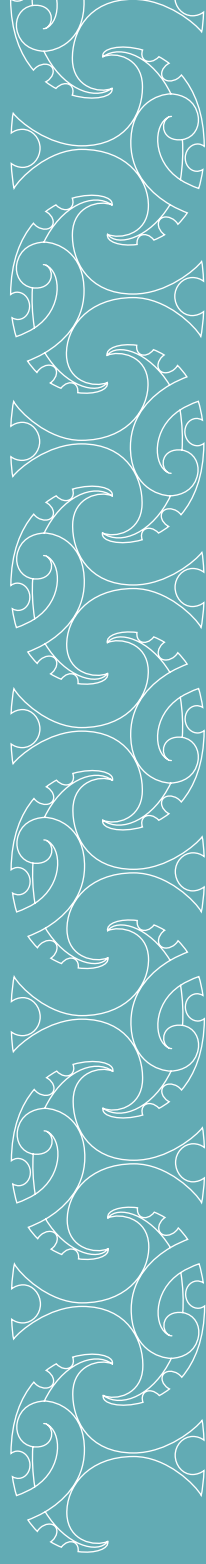
<b>Objective</b>				
Whānau voice informs strategic decisions				
<b>Short-term indicators</b>		<b>Source</b>	<b>Frequency</b>	
Whānau outcomes are weaved into stewardship decisions		Governance board and executive lead	Six-monthly	
<b>Whānau outcomes are weaved into stewardship decisions</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Whānau outcomes are developed and monitored for success	Service development at conceptual stage	Staff time Lead(s)	Governance board	Whānau satisfaction increases





## Operational

<b>Objective</b>				
Design and deliver integrated services to whānau				
<b>Short-term indicators</b>		<b>Source</b>	<b>Frequency</b>	
Streamline service entry and exit points to meet whānau service needs		Service lead	Annual	
Develop responsive care models that meet whānau needs		Service lead	Annual	
Develop whānau tools that refine models of care		Service lead	Annual	
<b>Streamline service entry and exit points to meet whānau service needs</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Confirm outcomes-driven service agreements that detail a one-stop-shop service approach	Service development at conceptual stage initiation	Staff time Lead(s)	Executive lead	Whānau satisfaction
<b>Develop responsive care models that meet whānau needs</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Assess accessibility and responsiveness of services to whānau circumstances (location, socioeconomics, etc)	Service development at conceptual stage initiation	Staff time Lead(s)	Executive lead	Whānau satisfaction
<b>Develop whānau tools that refine models of care</b>				
<b>Activity</b>	<b>Target</b>	<b>Resources</b>	<b>Lead</b>	<b>Impact</b>
Develop/operationalise a whānau triage tool to enable identification of whānau needs	Project initiation	Expert Māori leadership	Executive lead	Whānau triage tool in place and operational
		Staff time	Project lead	
Develop a whānau feedback system across all aspects of service design and delivery	Project initiation	Māori lead Staff time	Executive lead Project lead	Whānau feedback monitoring tool in place



## Performance measures Paearu mahi

High-level outcomes and impacts				
Principles	Wairuatanga	Rangatiratanga	Patuitanga	Whānau
Where the focus lies	Health and wellbeing is holistic	The right for Māori to choose, and make decisions for themselves	Growing and fostering strong partnerships with Māori	Whānau are at the centre of their individual health needs and care
<b>Outcomes</b> Goals for health and wellbeing	The health sector is informed by te ao Māori and mātauranga Māori <sup>2</sup>	Te Tiriti partnerships with Māori guarantee equity	Whānau Māori receive high-quality health care	
Intention	Te ao Māori and mātauranga Māori inform quality improvement for whānau and Māori	Māori autonomy and leadership inform strategy and policies	Partnerships with Māori inform decisions, resource allocations and service selection	Health services are holistic and designed based on whānau need
<b>Impacts</b> Where positive change can be made	<b>Governance</b> Te ao Māori and mātauranga Māori feature in health stewardship <b>Management</b> Te ao Māori and mātauranga Māori are embedded in service design and delivery	<b>Governance</b> Māori participation in governance and decision-making bodies has increased <b>Management</b> Māori participation in service resourcing, design and delivery has increased	<b>Governance</b> Whānau outcomes feature in health stewardship <b>Management</b> Integrated whānau-centred services have been designed and delivered	

2 Māori world view, cultural principles and practices.

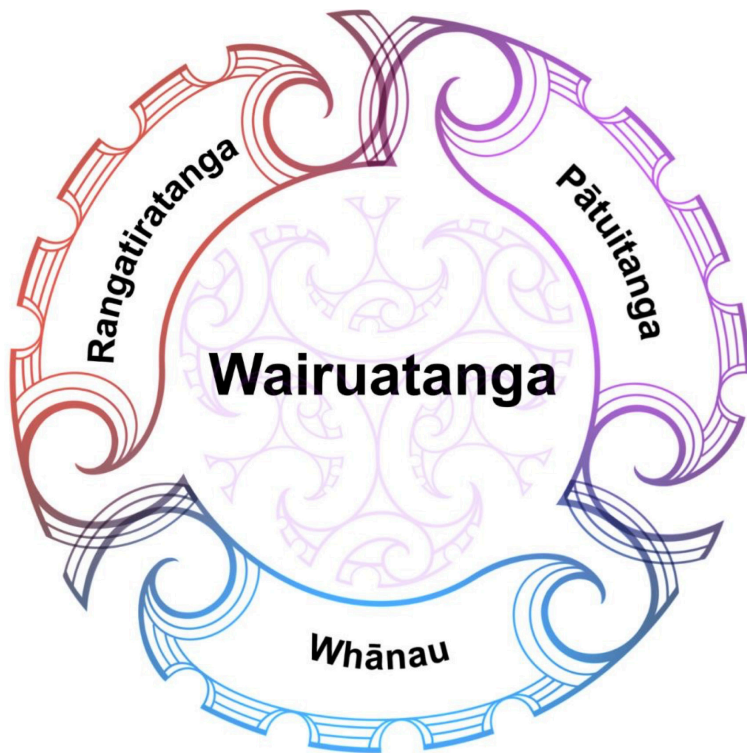
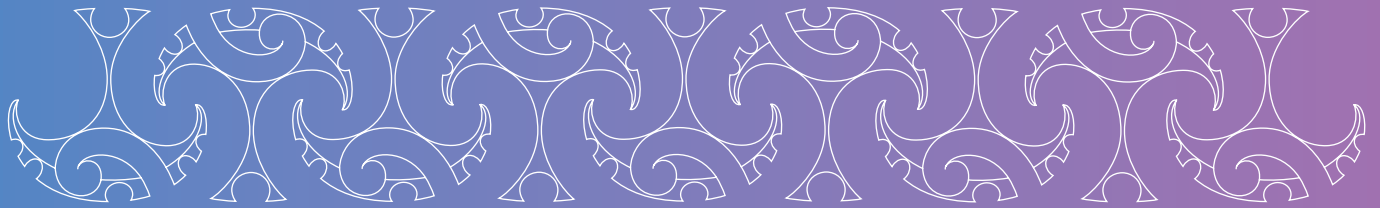


Target group The main stakeholders	Te Whatu Ora – Health New Zealand	Service providers (social and health)	Māori service providers (social and health)	Māori health entity
<b>Outputs</b> Activities to undertake	<b>Focus area: Cultural safety</b> <ul style="list-style-type: none"> <li>Insert te ao Māori and mātauranga Māori in strategy and policy development</li> <li>Engage mana whenua on cultural principles and practices</li> <li>Develop kaupapa Māori approaches to inform service design and delivery</li> </ul>	<b>Focus area: Partnership and participation</b> <ul style="list-style-type: none"> <li>Increase collaborative models and approaches to working with Māori</li> <li>Enable Māori capacity and capability to participate equitably</li> <li>Allow equitable contributions to be made by all partners, to improve outcomes for Māori</li> </ul>	<b>Focus area: Whānau-centred models of care</b> <ul style="list-style-type: none"> <li>Whānau voice informs strategic decisions</li> <li>Design and deliver integrated services to whānau</li> </ul>	
<b>Performance measures</b> What success looks like	<ul style="list-style-type: none"> <li>Champion the use of te ao Māori and mātauranga Māori across the health sector</li> <li>Identify and integrate Māori models of health and wellbeing</li> </ul>	<ul style="list-style-type: none"> <li>Māori leadership drives strategy and decision-making</li> <li>Partnerships with Māori that inform service commissioning, design and delivery</li> <li>Co-design with Māori to determine the issue and design solutions<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>Whānau outcomes inform strategy and decision-making</li> <li>Streamline service entry and exit points to meet whānau need</li> <li>Develop responsive care models that meet whānau need (triage and feedback systems)</li> </ul>	
<b>Short-term indicators</b>  How much did we do?  How well did we do it?  Is anyone better off?	<b>Te ao Māori and mātauranga Māori feature in accountability documents<sup>4</sup></b> <ul style="list-style-type: none"> <li>Culturally responsive strategy, measures and policies</li> <li>Protocol agreements with mana whenua</li> <li>Kaupapa Māori services and approaches</li> <li>Mātauranga Māori authenticated and endorsed by mana whenua</li> <li>Individuals – whānau who participate increases</li> <li>Service agreements for kaupapa Māori services</li> <li>Greater provider knowledge and understanding of cultural values and practices</li> </ul>	<b>Formal partnership agreements between the Crown and Māori</b> <ul style="list-style-type: none"> <li>Accountability documents with agreed outcomes for Māori</li> <li>Providers who worked collaboratively with Māori providers</li> <li>Māori providers resourced for workforce development</li> <li>Service agreements for co-design approaches</li> <li>Investment plans that support whānau-centred models of care</li> <li>Investment plans that support kaupapa Māori services</li> <li>Service agreements with Māori providers</li> <li>Greater collaboration and integration of services between providers</li> </ul>	<b>Whānau-centred models of care</b> <ul style="list-style-type: none"> <li>Individuals – whānau who participated</li> <li>Integrated service agreements, for whānau<sup>5</sup></li> <li>Individuals – whānau who completed the service/s</li> <li>Individuals – whānau satisfied with the service/s</li> <li>Service agreements, with whānau outcomes</li> <li>Whānau have access to other services and support</li> </ul>	

3 Iwi, Māori providers, communities and mana whenua.

4 Strategic plans and reports, investment plans and service agreements.

5 Integration of social, health and wellbeing programmes and services for whānau.



There are four parts to the Te Ao Māori Framework: whānau, rangatiratanga, pātuitanga and wairuatanga.

Each of the outer sections has two koru representing tapu and noa. The haehae lines bind each section together as they interact with each other.

The inside koru of each outer section opens into wairuatanga as wairuatanga is a part of each outer section. The inner design represents the connection each of the outer sections has with wairuatanga.

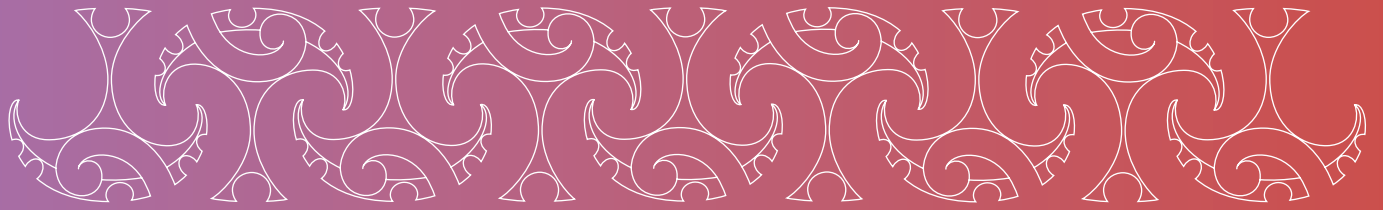
The pitau design on the edge of the outer sections represents a new beginning and is the interconnection between te ao Māori and te ao.

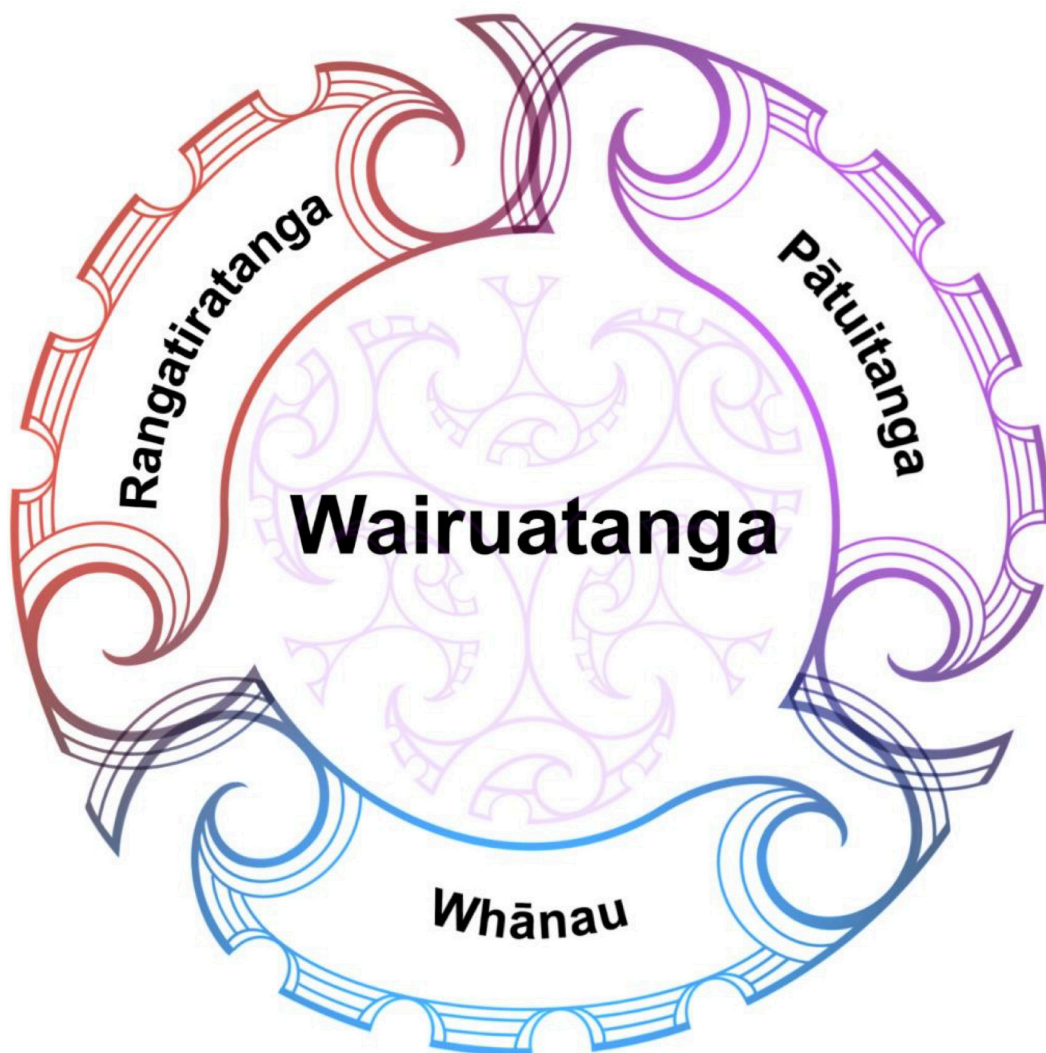
## He whakamihi

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**Te Kāwanatanga  
o Aotearoa**  
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