

Standards of competence for registered nurses

February 2025



Te Kaunihera Tapuhi o Aotearoa
Nursing Council of New Zealand

Acknowledgement

The Council wishes to acknowledge the invaluable contribution of all nurses, particularly the members of the design and expert groups, the Māori rūpū and all other stakeholders.

Registered nurse scope of practice

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 and cultural safety, promoting equity, inclusion, diversity and rights of Māori as tangata whenua. These concepts also relate to Pacific peoples and all population groups to support quality services that are culturally safe and responsive.

Registered nurses are accountable and responsible for their nursing practice, ensuring that all health care provided is consistent with their education, assessed competence, relevant legislative requirements and is guided by the Nursing Council of New Zealand's standards for registered nurses.

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 judgement and scientific and professional knowledge.

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 in all settings. Registered nurses may also use their expertise in areas and roles such as leadership, management, education, policy 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 are responsible and accountable for directing and delegating to members of the healthcare team. Registered nurses provide support and guidance to enrolled nurses.

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

Standards of competence for registered nurses

Introduction

The Nursing Council of New Zealand (the Council) is required, under the Health Practitioners Competence Assurance Act 2003 (the Act), to establish standards of competence for particular scopes of practice, to enable nurses to demonstrate that they are, and remain, competent to practise.

This document sets out the standards of competence required for a registered nurse that must be demonstrated to gain entry to the register and then confirmed annually through the self-reporting of continuing competence. This provides the Council with the confidence the public is being protected and registered nurses have met the standards of competence essential to practise safely in New Zealand.

The standards of competence are structured to identify the key areas of competence across all practice settings; these are the six pou. Each pou has a set of descriptors which provides further depth and detail of the requirements to meet the pou. The Council has developed the six pou and descriptors, in collaboration with the sector and stakeholders, to identify and separate the fundamental elements of nursing practice and enable the assessment of aspects of practice when required. Each pou is interrelated and demonstrated in practice simultaneously. When practising, a nurse will be integrating aspects of each pou where they relate to their area of practice using a range of scientific, relational and cultural, evidence-based knowledge to provide effective care to people, whānau and communities.

Te Tiriti o Waitangi and cultural safety

Te Tiriti o Waitangi provides a foundation for working in partnership with Māori to address health inequities and support the provision of safe and effective care. The standards of competence integrate the articles and principles of te Tiriti to respect the rights of tangata whenua and contribute to improve health outcomes.

Nursing has been a leader in the integration of cultural safety into practice, in any clinical setting, since its recognition and acceptance in the early 1990s. This is now a fundamental requirement in the provision of effective and acceptable care. Cultural safety is a dynamic concept that has been addressed in different ways in nursing over the decades, but it has consistently been integrated into the education and competencies of nurses. It has always been seen as incorporating the cultural diversity in beliefs and values in the population and requires nurses to examine how their own preconceptions and biases may hinder the delivery of safe and effective care. This addresses the need to ensure the increasing diversity of the population is reflected in the practice of nurses.

Similarly, the need to understand the differences in Māori health, including health outcomes, is essential and reflects the nurse's responsibility to establish respectful and collaborative relationships, and work in partnership to consider the impact of nursing practice on Māori health outcomes.

Contemporary nursing practice

The six pou together reflect the complexity of both health needs and the interventions required for nursing practice and the provision of care. This complexity requires a change in required competence as the need for critical thinking and reasoning, differential diagnoses, and professional judgement based on evidence, is essential. To provide care in this environment, sound clinical, cultural and scientific knowledge to support decision-making is fundamental to ensuring safe care.

For care to be effective, collaborative and compassionate, relationships based on trust, partnership and acceptance of diversity are fundamental. Achieving this requires skill in communication and an understanding of the range of communication styles and appropriate strategies. An understanding of the need for different forms of communication enables the nurse to influence the interprofessional healthcare team, advocate for innovative change where appropriate and influence the direction of the profession.

Standards of competence for registered nurses

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

Evidence of safety to practise as a registered nurse is demonstrated when the following pou are met.



Standards of competence for registered nurses

Pou one: Māori health

Reflecting a commitment to Māori health, registered nurses support, respect and protect Māori rights while advocating for equitable and positive health outcomes. Nurses are also required to demonstrate kawa whakaruruhau by addressing power imbalances and working collaboratively with Māori.

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

<i>Descriptor 1.1</i>	Engages in ongoing professional development related to Māori health and the relevance of te Tiriti o Waitangi articles and principles.
<i>Descriptor 1.2</i>	Advocates for health equity for Māori in all situations and contexts.
<i>Descriptor 1.3</i>	Understands the impact of social determinants, such as colonisation, on health and wellbeing.
<i>Descriptor 1.4</i>	Uses te reo and incorporates tikanga Māori into practice where appropriate.

Pou two: Cultural safety

Cultural safety in nursing practice ensures that registered nurses provide culturally safe care that is inclusive, responsive and equitable. This requires nurses to reflect on their practice, understand their cultural identity and the power imbalances between the nurse and the recipient of care.

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

<i>Descriptor 2.1</i>	Practises culturally safe care which is determined by the recipient.
<i>Descriptor 2.2</i>	Challenges racism and discrimination in the delivery of nursing and health care.
<i>Descriptor 2.3</i>	Engages in partnership with individuals, whānau and communities for the provision of health care.
<i>Descriptor 2.4</i>	Advocates for individuals and whānau by including their cultural, spiritual, physical and mental health when providing care.
<i>Descriptor 2.5</i>	Contributes to a collaborative team culture which respects diversity, including intersectional identities, and protects cultural identity by acknowledging differing worldviews, values and practices.

Pou three: Whanaungatanga and communication

A commitment to whanaungatanga and communication requires registered nurses to establish relationships through the use of effective communication strategies which are culturally appropriate and reflect concepts such as whānau-centred care and cultural safety. An understanding of different forms of communication enables the nurse to engage with the interprofessional healthcare team, advocate for innovative change where appropriate and influence the direction of the profession.

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

<i>Descriptor 3.1</i>	Understands and complies with professional, ethical, legal and organisational policies for obtaining, recording, sharing and retaining information acquired in practice.
<i>Descriptor 3.2</i>	Determines the language and communication needs (verbal and non-verbal) of people, whānau and communities.
<i>Descriptor 3.3</i>	Incorporates professional, therapeutic and culturally appropriate communication in all interactions.
<i>Descriptor 3.4</i>	Communicates professionally to build shared understanding with people, their whānau and communities.
<i>Descriptor 3.5</i>	Assesses health-related knowledge, provides information and evaluates understanding to promote health literacy.
<i>Descriptor 3.6</i>	Ensures documentation is legible, relevant, accurate, professional and timely.
<i>Descriptor 3.7</i>	Uses appropriate digital and online communication.
<i>Descriptor 3.8</i>	Provides, receives and responds appropriately to constructive feedback.

Pou four: Pūkengatanga and evidence-informed nursing practice

Pūkengatanga and evidence-informed nursing practice requires registered nurses to use clinical skills, coupled with critical thinking and informed by high quality and current evidence, to provide quality, safe nursing care. Evidence-informed practice prepares the nurse to differentially diagnose, plan care, identify appropriate interventions, lead the implementation and evaluate care provision and outcomes.

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

<i>Descriptor 4.1</i>	Understands the wide range of assessment frameworks and uses the appropriate framework to undertake comprehensive assessments in the practice setting.
<i>Descriptor 4.2</i>	Develops differential diagnoses based on a comprehensive assessment, clinical expertise and current evidence to inform the plan of care.
<i>Descriptor 4.3</i>	Implements and evaluates effectiveness of interventions and determines changes to the plan of care.

<i>Descriptor 4.4</i>	Coordinates and assigns care, delegates activities and provides support and direction to others.
<i>Descriptor 4.5</i>	Safely manages medicines based on pharmacotherapeutic knowledge, including administration in accordance with policies and best practice guidelines.
<i>Descriptor 4.6</i>	Supports individual and whānau choices of complementary therapies by ensuring they have sufficient information to make informed decisions about treatment options.
<i>Descriptor 4.7</i>	Understands cultural preferences for complementary treatment, such as the use of rongoā, and supports integration into care.
<i>Descriptor 4.8</i>	Demonstrates digital capability and online health literacy to support individuals, whānau and communities to use technology for managing health concerns and promoting wellbeing.
<i>Descriptor 4.9</i>	Applies infection prevention and control principles in accordance with policies and best practice guidelines.
<i>Descriptor 4.10</i>	Identifies, assesses and responds to emerging risks and challenging situations by adjusting priorities and escalating to the appropriate person.
<i>Descriptor 4.11</i>	Understands and works within the limits of expertise and seeks guidance to ensure safe practice.
<i>Descriptor 4.12</i>	Maintains awareness of trends in national and global nursing to inform change in practice and delivery of care.

Pou five: Manaakitanga and people-centred care

Manaakitanga and people-centred care requires nurses to demonstrate compassion, collaboration and partnership to build trust and shared understanding between the nurse and people, whānau or communities. Compassion, trust and partnership underpin effective decision-making in the provision of care to support the integration of beliefs and preferences of people and their whānau.

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

<i>Descriptor 5.1</i>	Ensures integrated relational and whakapapa-centred care to meet the needs of people and whānau.
<i>Descriptor 5.2</i>	Upholds the mana of individuals, whānau and the nursing profession by demonstrating respect, kindness, honesty and transparency of decision-making in practice.
<i>Descriptor 5.3</i>	Facilitates opportunities for people and whānau to share their views and actively contribute to care planning, decision-making and the choice of interventions.
<i>Descriptor 5.4</i>	Establishes, maintains and concludes safe therapeutic relationships.

Pou six: Rangatiratanga and leadership

Rangatiratanga and leadership in nursing practice are demonstrated when nurses proactively provide solutions and lead innovation to improve the provision of care. Leadership requires all nurses to act as change agents and lead change when appropriate. Fundamental to the integration of leadership is the need for nurses to intervene, speak out, and advocate to escalate concerns on behalf of colleagues or recipients of care.

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

<i>Descriptor 6.1</i>	Actively contributes to a collaborative team culture of respect, support and trust.
<i>Descriptor 6.2</i>	Demonstrates professional and ethical accountabilities in practice and adheres to the Nursing Council of New Zealand Code of Conduct, relevant legislation and organisational policies and procedures.
<i>Descriptor 6.3</i>	Understands continuous learning and proactively seeks opportunities for professional development.
<i>Descriptor 6.4</i>	Engages in quality improvement activities.
<i>Descriptor 6.5</i>	Identifies and responds appropriately to risk impacting the health, safety and wellbeing of self and others to practise safely.
<i>Descriptor 6.6</i>	Understands the impact of healthcare provision on global and local resources, demonstrates and supports the constant assessment and improvement of sustainability practices.

Glossary of terms

Competence	The combination of skills, knowledge, attitudes, values and abilities that underpin effective performance as a nurse. ¹
Cultural safety	Cultural safety relates to the experience of the recipient of nursing care and extends beyond cultural awareness and cultural sensitivity. 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. ^{2 3}
Differential diagnosis	Differential diagnosis has become a key element of nursing practice that incorporates history taking, physical assessment and clinical reasoning skills. As part of an interprofessional healthcare team, nurses contribute their expertise to evaluate symptoms, interpret findings and consider various conditions. This collaborative approach ensures a comprehensive and accurate diagnosis. ⁴ This level of clinical judgement ⁵ and critical thinking develops with practice from novice to expert. ^{6 7} 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. ⁸
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. ⁹
Health equity	In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes. ^{10 11}
Integrated relational care	Care is fundamental to human being and human relating. For nurses, care goes beyond technical and organisational skills to a willingness to connect with the recipient. ¹² One example, the fundamentals of care framework, 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. 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 nurse's relational actions (e.g. active listening, being empathetic). ^{13 14 15 16}
Intersectional identities	Intersectionality refers to the interconnected relationship between demographic characteristics (such as gender, ethnicity, sexual orientation, disability, etc.) within an individual or group, and how they interact to create unique experiences of privilege or disadvantage. When someone belongs to multiple non-dominant or marginalised groups, they can face compounded inequities and an experience of disadvantage that's distinct. ¹⁷
Kawa whakaruruhau	Kawa whakaruruhau (cultural safety in Māori context) in nursing is the practice of delivering care that respects and upholds the cultural identity, values and rights of Māori, ensuring their mana and cultural beliefs are protected. It emphasises equitable,

patient-centred care that empowers Māori and their whānau to make health decisions that align with their cultural practices, addressing power imbalances in health care. Grounded in Te Tiriti o Waitangi, kawa whakaruruhau protects the rights of Māori to self-determination and equitable healthcare outcomes, ensuring they are not marginalised or discriminated against in the system.^{18 19 20 21 22}

Manaaki	To support, take care of, give hospitality to, protect, look out for – show respect, generosity and care for others. ²³
Manaakitanga	Manaakitanga is a powerful way of expressing how Māori communities care about each other's wellbeing, nurture relationships and engage with one another. The value of manaakitanga is often expressed through the responsibility to provide hospitality and protection. Incorporating manaakitanga into practice requires respect, humility, kindness and honesty. ²⁴
People-centredness	Describes a standard of care that ensures the patient/client is at the centre of care delivery. ²⁵
Pou	A carved wooden post or pillar that serves as a symbol of strength and support. ²⁶ 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 tells a story of the core values of nursing and the connection with a Māori worldview.
Pūkengatanga	Refers to expertise, skill, competence, encompassing the depth of knowledge and ability. This highlights the importance of keeping abreast of new knowledge, technologies and models of whānau-centred care; the ability to self-reflect on one's own model of practice as part of continuous self-improvement; and sharing lessons learnt with other practitioners, providers, whānau and other key stakeholders. ²⁷
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. ²⁸
Rongoā	Traditional Māori medicine – a system of healing that was passed on orally. It comprised diverse practices and an emphasis on the spiritual dimension of health. Rongoā includes herbal remedies, physical therapies such as massage and manipulation and spiritual healing. ²⁹
Social determinants	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. ³⁰
Sustainability	The simultaneous pursuit of human health, environmental quality and economic well-being for current and future generations. ³¹
Te Tiriti o Waitangi	One of the founding documents for Aotearoa New Zealand, signed in 1840 by the Māori people and the British Crown. ³² Te Tiriti o Waitangi is at its heart a relationship agreement. It is a living partnership agreement between Māori and the Crown. It entails enduring rights, responsibilities and obligations on both partners. ³³

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. ³⁴
Tikanga Māori	Māori customary practices or behaviours. The concept is derived from the Māori word 'tika' which means 'right' or 'correct'. In Māori terms, to act in accordance with tikanga is to behave in a way that is culturally proper or appropriate. ³⁵
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 worldview. It is through the whānau that values, histories and traditions from the ancestors are adapted for the contemporary world. ³⁶
Whakapapa centred care	The meaning of 'whakapapa-centred' care in the scope's use of this term is derived from whānau-centred ³⁷ – 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.
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. ³⁸

Glossary reference list

- 1 Nabizadeh-Ghanrghozar, Z., Alavi, N., & Ajorpaz, N. (2021). Clinical competence in nursing: a hybrid concept analysis. *Nurse Education Today* 97(104728). <https://doi.org/10.1016/j.nedt.2020.104728>
- 2 Nursing Council of New Zealand (2011). *Guidelines for cultural safety, the Treaty of Waitangi and Māori health in nursing education and practice*. Nursing Council of New Zealand. <https://nursingcouncil.org.nz/common/Uploaded%20files/Public/Nursing/Standards%20and%20Guidelines%20for%20Nurses/Guidelines-for-cultural-safety-TW.pdf>
- 3 Papps, E., & Ramsden, I. (1996). Cultural safety in nursing: the New Zealand experience. *International Journal for Quality in Health Care*, 8 (5), 491–497. <https://doi.org/10.1093/intqhc/8.5.491>
- 4 Victor-Chmil, J. (2013). Critical thinking versus clinical reasoning versus clinical judgment: differential diagnosis. *Nurse Educator*, 38 (1), 34–36. doi: 10.1097/NNE.0b013e318276dfbe
- 5 Connor, J., Flenady, T., Massey, D., & Dwyer, T. (2023). Clinical judgement in nursing – an evolutionary concept analysis. *Journal of Clinical Nursing*, 32(13-14), 3328–3340. <https://doi-org.ezproxy.aut.ac.nz/10.1111/jocn.16469>
- 6 Benner, P. (2001). *From novice to expert: excellence and power in clinical nursing practice*. Commemorative edition. Prentice-Hall International.
- 7 Wises, M., Ossenberrg, C., Spiller, K., & Henderson, A. (2023). Appraising differential capabilities of new graduate nurse: development across the first nine months of employment. *Nurse Education Today*, 130, 105943 <https://doi.org/10.1016/j.nedt.2023.105943>
- 8 Cleveland Clinic (2022). Differential Diagnosis. *Cleveland clinic* Accessed 9 October 2024
- 9 World Health Organization. (2022). Global competency framework for universal health coverage. In *Global competency framework for universal health coverage*. WHO
- 10 Bloomfield, A. (2019). Defining equity. Ministry of Health. <https://www.health.govt.nz/strategies-initiatives/programmes-and-initiatives/equity>
- 11 Rolleston, A. D., Cassim, S., Kidd, J., Lawrenson, R., Keenan, R., & Hokowhitu, B. (2020). Seeing the unseen: evidence of Kaupapa Māori health interventions. *AlterNative*, 16(2), 129–136.
- 12 Dewar, J., Cook, C., Smythe, E., & Spence, D. (2023). A Heideggerian analysis of good care in an acute hospital setting: insights from healthcare workers, patients and families. *Nursing Inquiry*, e12561. <https://doi.org/10.1111/nin.12561>
- 13 Mudd A., Feo R., Conroy T., & Kitson A. (2020). Where and how does fundamental care fit within seminal nursing theories: A narrative review and synthesis of key nursing concepts. *Journal of Clinical Nursing*, 29(19-20), 3652–3666. <https://doi.org/10.1111/jocn.15420>
- 14 Kitson, A., Conroy, T., Kulski, K., Locock, L., & Lyons, R. (2013). *Reclaiming and redefining the fundamentals of care: nursing's response to meeting patients' basic human needs*. University of Adelaide.
- 15 International Learning Collaborative (n.d.). *The fundamentals of Care Framework*
- 16 Wilson, D., Moloney, E., Parr, J.M., Aspinall, C., & Slark, J. (2021). Creating an indigenous Māori-centred model of relational health: A literature review of Māori models of health. *Journal of Clinical Nursing* (00). 1–17. <https://doi.org/10.1111/jocn.15959>
- 17 Diversity works New Zealand (n.d.). <https://diversityworks.nz/> Accessed 9 October, 2024
- 18 Durie, M. (1998). *Whaiaora: Māori health development (2nd ed.)*. Oxford University Press.
- 19 Nursing Council of New Zealand (2011). *Guidelines for cultural safety, the Treaty of Waitangi, and Māori health in nursing education and practice*. Nursing Council of New Zealand. <https://nursingcouncil.org.nz/common/Uploaded%20files/Public/Nursing/Standards%20and%20Guidelines%20for%20Nurses/Guidelines-for-cultural-safety-TW.pdf>
- 20 Ministry of Health (2014). *He Korowai Oranga: Māori Health Strategy*. Ministry of Health <https://www.health.govt.nz/publications/the-guide-to-he-korowai-oranga-maori-health-strategy>
- 21 Ramsden, I. (2002). *Cultural safety and nursing education in Aotearoa and Te Waipounamu [Doctoral thesis]*, Victoria University of Wellington.
- 22 Wepa, D. (Ed.). (2015). *Cultural safety in Aotearoa New Zealand (2nd ed.)*. Cambridge University Press.
- 23 Moorfield, J. C. (2003–2024). *Te Aka Māori Dictionary*. <https://maoridictionary.co.nz/word/3425>
- 24 Houkura Independent Maori Statutory Board (2024). *Kia eke Tangaroa to Māori I Tamaki Makaurau - Advancing the interests of Maori in Tamaki Makaurau* <https://www.imsb.maori.nz/maori-wellbeing-in-tamaki-makaurau/manaakitanga/>
- 25 McCance, T., McCormack, B., & Dewing, J. (2001). An exploration of person-centredness in practice. *Online Journal of Issues in Nursing* 16(2)1. PMID: 22088150. <https://pubmed.ncbi.nlm.nih.gov/22088150/>

- 26 Te ara encyclopedia of New Zealand (n.d.)
<https://teara.govt.nz/en/te-waonui-a-tane-forest-mythology/page-4>
- 27 Fleming, T., Crengle, S., Peiris-John, R., Ball, J., Fortune, S., Yao, E. S., Latimer, C. L., Veukiso-Ulugia, A., & Clark T. C. (2024). Priority actions for improving population youth mental health: an equity framework for Aotearoa New Zealand. *Mental Health & Prevention* 34(200340).
<https://doi.org/10.1016/j.mhp.2024.200340>
- 28 Te One, A., & Clifford, C. (2021). Tino Rangatiratanga and well-being: Māori self-determination in the face of Covid 19. *Frontiers in Sociology*, 6, 613340.
<https://doi-org.ezproxy.aut.ac.nz/10.3389/fsoc.2021.613340>
- 29 Te Ara Encyclopedia.
<https://teara.govt.nz/en/rongoa-medicinal-use-of-plants/page-1>
- 30 Healthify He Puna Waiora (2021). *Social determinants of Health for healthcare providers*.
<https://healthify.nz/healthcare-providers/s/social-determinants-of-health/>
- 31 Kitt-Lewis, E., Adam, M., Buckland, P., Clark, D., Hockenberry, K., Jankura, D., & Knott, J. (2020). Creating a generation of sustainable nurses: sustainability efforts in nursing education. *Nursing clinics of North America*, 55(1). 1-10
<https://doi.org/10.1016/j.cnur.2019.10.001>
- 32 Orange, C. (2021). *The Treaty of Waitangi / Te Tiriti o Waitangi: An illustrated history*. Bridget Williams Books.
- 33 Nursing Council of New Zealand (2023). *Te Tiriti o Waitangi Policy*. Nursing Council of New Zealand.
https://www.nursingcouncil.org.nz/Public/NCNZ/About-section/Te_Tiriti_o_Waitangi.aspx?hkey=36e3b0b6-da14-4186-bf0a-720446b56c52
- 34 University of Otago Ōtakou Whakaihu Waka (n.d.) *Te Ao Māori: The Māori world*.
<https://www.otago.ac.nz/maori/world>
- 35 Victoria University of Wellington Te Herenga Waka (n.d.) *Tikanga customary practices guide*.
<https://www.wgtn.ac.nz/maori-hub/rauemi/tikanga-tips>
- 36 Walker, T. (n.d.). *Whānau – Māori and Family*. Te Ara the encyclopedia of New Zealand.
<https://teara.govt.nz/en/whanau-maori-and-family/print>
- 37 Families Commission (2010). *Whanau Strategic Framework* (2009-2012).
<https://www.imsb.maori.nz/maori-wellbeing-in-tamaki-makaurau/whanaungatanga/>
- 38 Houkura Independent Māori Statutory Board (2024). *Kia eke Tangaroa to Māori I Tāmaki Makaurau - Advancing the interests of Māori in Tamaki Makaurau*
<https://www.imsb.maori.nz/maori-wellbeing-in-tamaki-makaurau/manaakitanga/>

