

Working together



About our midland region

DHB	PHO
Bay of Plenty	Eastern Bay Primary Health Alliance Nga Mataapuna Oranga Ltd Western Bay of Plenty Primary Health Organisation Ltd
Lakes	Pinnacle Midlands Health Network - Lakes Rotorua Area Primary Health Services Ltd
Hauora Tairāwhiti	Pinnacle Midlands Health Network - Tairāwhiti Ngati Porou Hauora Charitable Trust
Taranaki	Pinnacle Midlands Health Network - Taranaki
Waikato	Hauraki PHO Pinnacle Midlands Health Network - Waikato *National Hauora Coalition



*MOH categorises Counties Manukau DHB as the lead DHB for the National Hauora Coalition (NHC), which excludes NHC from the Midland DHB list, however NHC figures have been added into the above table for Waikato DHB - where NHC provides a locally based service.

21%

The Midland region covers an area of 56,728 km², or 21% of New Zealand's land mass.



Stretches from Cape Egmont in the West to East Cape and is located in the middle of the North Island.

5

DHBs

Five District Health Boards: Bay of Plenty, Lakes, Hauora Tairāwhiti, Taranaki, and Waikato.



Includes major population centres of Tauranga, Rotorua, Gisborne, New Plymouth and Hamilton.



924,165 people (2017/18 population projections), including 237,020 Māori (26%) and 43 local iwi groups.

Our six regional objectives

Health equity for Māori

Integrate across continuums of care

Improve quality across all regional services

Build the workforce

Improve clinical information systems

Efficiently allocate public health system resources

In this issue

- 03 **A word from the HealthShare CEO**

- 04 **Midland Cancer Network Update**

- 06 **Midland Clinical Portal Foundation Update**

- 08 **Midland Mental Health & Addiction Regional Network**

- 09 **Robotic telepresence in Thames and Waikato Hospitals**

- 10 **The Regional Health Integration Team welcomes two new members**

- 11 **2017-18 Midland Regional Services Plan**

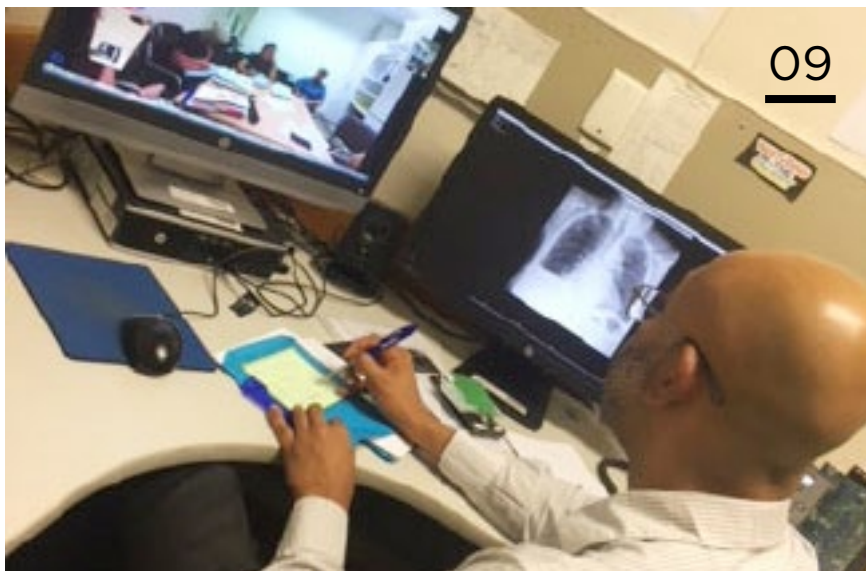
- 12 **Introducing... Dave Catchpole**

- 14 **Brave Hearts - the New Zealand Cardiac Story**

- 15 **HealthShare Culture Committee Vibe**

- 16 **Child Health Action Group**

- 17 **A Wedding in India**



09



10



12



17

A word from the HealthShare CEO

...continuing our journey together towards 'one team'



Andrew Campbell-Stokes
CEO, HealthShare

Midland District Health Boards'
shared services agency

It's hard to believe that we are now well into 2018 and heading towards the Easter break and winter. HealthShare staff have been producing work for significant regional discussions and investment; such as the regional Treasury funding bid for the Substance Abuse Legislation, a Health Equity paper for regional governance discussions, IS enabling investment for clinicians, and work programme discussions to support the planning required for the 2018-21 Midland Regional Services Plan.

On 8 March the world took a moment to celebrate women in some way as part of 'International Women's Day', with 'Press for Progress' being the chosen focus for 2018. As an organisation committed to demonstrating equality, HealthShare is fortunate to have six women on its Senior Leadership Team of 10; bringing diverse, valued thinking to the organisation as we 'press for progress' in equality for all ages, genders, sexualities and ethnicities.

My personal thanks go to Jan Smith, Eseta Nonu-Reid, Debbie Manktelow, Jane Hawkins-Jones, Ruth Ross and Suzanne Andrew for your collective contribution to HealthShare's leadership and work in health.

Likewise, I would encourage you to read the article 'Midland Māori Leaders Recognised', as some of our region's female Māori leaders in health are acknowledged and celebrated.

The Health Minister Hon. Dr David Clark's visit to HealthShare's Hamilton offices on 6 March provided an opportunity for the HealthShare Chair, Ron Dunham and me to showcase the variety of activity taking place in the Midland region. Minister Clark and his Advisor had received good reports about HealthShare and wanted to know how regional shared services organisations could play a greater role in the NZ public health system. So Ron and I started a conversation that we hope will be the start of a journey as a region.

At our staff development day in early April HealthShare staff will have an opportunity to discuss and confirm the values/matapono of the organisation.

- Focus on people *Kia haangai te iwi*
- Do the right thing well *Whaia te mea tika*
- Act with integrity *Mana tangata / Ngaakau pono*
- Be courageous *Kia Maia / Kia Manawanui*

At our staff development day we will begin a conversation and start a journey towards jointly partnering to achieve our foremost regional objective: 'health equity for Māori'.

*Ēhara tāku toa
i te takitini,
he toa takitahi*

*My success would
not be bestowed
onto me alone, as it
was not individual
success but success
of a collective.*



Find out more about HealthShare

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Midland Cancer Network update



NZ Health Strategy themes and guiding principles



Refreshed guiding principles for the system

1. Acknowledging the special relationship between Māori and the Crown under the Treaty of Waitangi
2. The best health and wellbeing possible for all New Zealanders throughout their lives
3. An improvement in health status of those currently disadvantaged
4. Collaborative health promotion, rehabilitation and disease and injury prevention by all sectors
5. Timely and equitable access for all New Zealanders to a comprehensive range of health and disability services, regardless of ability to pay
6. A high-performing system to which people have confidence
7. Active partnership with people and communities at all levels
8. Thinking beyond narrow definitions of health and collaborating with others to achieve wellbeing.

Lakes Medical Oncology

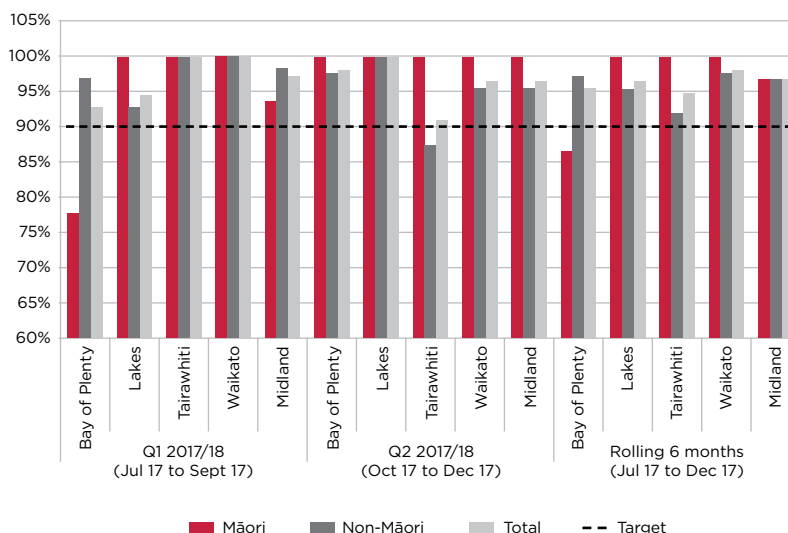
Aligning with the ideals for equity of access to services, and service closer to home, the Cancer Network is pleased to confirm that Lakes DHB has employed a Medical Oncologist who will be arriving mid-April 2018. He will be supported by the clinicians at Waikato Regional Cancer Centre, and a plan is in place to transition Lakes medical oncology patients to the Lakes resident medical oncologist. This appointment has facilitated a timely review of the Midland Medical Oncology model of service.

Faster Cancer Treatment

All Midland DHBs continue to meet the Faster Cancer Treatment health target of 90% of patients triaged with a high suspicion of cancer and needing to be seen within two weeks receive treatment within 62 days.

The next challenge for DHBs will be to work on service improvement to tackle some of the 'amenable to change' delays that patients experience. The CancerCare System in Waikato has been updated to allow for collection of any delays a patient experiences in their cancer pathway, not just the single delay code that gets reported to the Ministry of Health. These updates will be released in Lakes and Tairāwhiti shortly.

Achievement of FCT health target
Quarter 2 2017/18 (Rolling 6 months Jul to Dec 2017)



Midland Bowel Screening Regional Centre

The National Bowel Screening Programme (NBSP) continues to be rolled out with the Ministry of Health assigning the Midland DHBs the following confirmed and indicative go live dates.

Year	DHBs	Month of go-live
2018/19	Lakes	11 September 2018 (confirmed)
2019/20 – indicative, by alphabetical order	Tairāwhiti	to be confirmed
2020/21 – indicative, by alphabetical order	Bay of Plenty Taranaki Waikato	to be confirmed



Midland BSRC members from left; Diane Casey, Brent McMillin, Sarah Harihari, Maria Stapleton. Absent from photo; Mr Ralph Van Dalen, Dr Jo Scott-Jones, Jan Smith.

The Midland Bowel Screening Regional Centre (Midland BSRC) is a key component of the NBSP and provides four key roles during the NBSP roll out:

- supporting DHBs in the NBSP planning and implementation, includes the end to end colonoscopy and symptomatic colorectal cancer pathway
- provide clinical leadership and support
- develop a regional equity plan, quality plan and support implementation
- overview of performance of the Midland DHBs against the bowel screening quality standards and support opportunities for improvement along the end to end colorectal/ colonoscopy cancer pathway.

The Midland BSRC consists of:

- Midland regional lead – Jan Smith, Manager, Midland Cancer Network
- Midland BSRC manager– Brent McMillin
- Clinical Lead primary care – Dr Jo Scott-Jones, Medical Director, Pinnacle
- Clinical Lead secondary care – Mr Ralph Van Dalen, Co-Chair Midland BSRC Governance Group and Colorectal Surgeon Waikato DHB.
- Quality project manger– Diane Casey
- Quality project manager – Maria Stapleton
- Equity project manager – Sarah Harihari



For more information contact:

Jan Smith | Manager, Midland Cancer Network | HealthShare

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UPDATE FROM THE eSPACE TEAM

The Midland Clinical Portal, an initiative from eSPACE, is a clinician-led programme that provides a single point of access for patient information across the Midland region – the overall aim is one patient, one record.

The Midland Clinical Portal was launched across the five Midland DHBs in July 2017. It has been in development since 2016. At this point the Midland Clinical Portal provides a read only view of selected documents, as well as limited information about patient encounters within the region since October 2016.

To date more than 1.5 million patients' records are registered on the Midland Clinical Portal since October 2017.

WHAT DOES THIS MEAN?

Health professionals now have a consistent view of patient records in one place, in the future dispensing and prescription information will also be available.

WHAT IS NEXT?

The Midland Clinical Portal lays the foundation for what is to come. More functionality will be added, that will, together, deliver a single point of access for clinical information across the Midland Region.

It is pleasing to see that some of the key benefits of the Midland Clinical Portal – less clinician time spent searching for information; reduced duplication, and improved clinical outcomes are being realised. The anecdotal benefits from clinicians below suggest good integration and visibility of patient information throughout the region, if only at the currently limited read-only level.

HOW THE MIDLAND CLINICAL PORTAL IS MAKING A DIFFERENCE

"An oncology patient presented this weekend – you know how hard it is getting notes at the best of times. It was very pleasing to be able to see all the notes in the Midland Clinical Portal."

Waikato DHB Clinician, November 2017

"Just some positive early feedback ... I already find the Midland Clinical Portal extremely useful. I was just able to view a discharge summary for a renal transplant patient that I transferred to Waikato for consideration of a renal biopsy. This meant I was able to follow up on their progress without the hassle of ringing around. This will save time for both myself and the Waikato Renal Physicians."

Bay of Plenty DHB Renal Specialist, December 2017

"Just wanted to say how great this is!!

Have had a question from a mum about the cleft palate surgery her daughter received in Waikato. I was able to look up the notes and explain things to her!

Also was able to look up discharge information around a visit to Mothercraft in Waikato and what the recommendations and changes were.

Both letters had been sent to the GP, but I found the information really useful for my own practice."

Taranaki DHB Speech Therapist, December 2017

"It is so good having access to Bay of Plenty discharge summaries. It is a revelation to us."

Waikato DHB ED Physician, November 2017



All about eSPACE

eSPACE is a clinically-led transformation programme across the five Midland District Health Boards – supported and enabled by technology.

The Midland Clinical Portal is an electronic platform for managing health documentation relating to the care of individual patients across the Midland region – including the Bay of Plenty, Lakes, Tairāwhiti, Taranaki and Waikato DHBs.

To date more than 1.5 million patients' records have been registered on the Midland Clinical Portal. Health professionals now have a consistent view of patient information in one place.

The new portal will take away a lot of frustration for clinicians, as they will no longer have to rely on paper-based record keeping, and unconnected data repositories.

The Midland Clinical Portal will help to reduce errors and duplication, as well as improving clinical decision making through increased access to patient information.



Have you checked out Midland Mental Health & Addiction Regional Network's quarterly newsletters yet?

Read the highlights from around the region in the recent 'End of Summer' newsletter

Midland Māori Leaders Recognised

Effective Māori health leadership is critical to setting the foundation for addressing health disparities and to achieve improved Māori health outcomes.

100 Māori Leaders is part of the Henry Rongomau Bennett Foundation Leadership Strategy and identifies Māori at the top of their health career pathways, to inspire the Māori health workforce and generate interest from others to look at careers in health. Māori and other leaders were approached to write kōrero awhi about the leadership qualities, including leaders within the Midland region, such as Dr Diana Rangihuna-Kopua, Donna Blair, and Phyllis Tangitu. To read about these and other recognised inspirational Māori leaders in health from our Midland region and Aotearoa, [click here](#).



Pictured from left: Dr Diana Rangihuna-Kopua, Donna Blair, and Phyllis Tangitu

Department of Corrections Community Work Partnership Award

The Community Work Partnership Awards are a way for the Department of Corrections to acknowledge individuals or organisations with an outstanding commitment to providing meaningful, challenging projects that allow offenders to make up for their offending, learn new skills and behaviours, and provide role models to make a positive difference to others.

Bay of Plenty Addiction Services (BOPAS) clinicians Rachel Cade (RN), Ian Garfitt (RN) Sally Whitelaw (Team Leader), along with Lesley Watkins, BOPDHB portfolio manager for mental health and addiction service, have been nominated and awarded by the Department of Corrections, a Community Work Partnership Award. This is attributed to the work done by both Rachel and Ian at the Tauranga Courts and Community Corrections services across the Western Bay of Plenty (WBOP). [Click here to read more.](#)

Opening of Te Whare Oranga Ngakau

Friday, 9 March saw the opening of the new alcohol and other drug residential treatment building 'Te Whare Oranga Ngakau' a service provided by Manaaki Ora Trust, trading as Te Utuhina Manaakitanga (TUM).

Staff and residents welcomed the Midland recovery whanau on the morning of the opening. Many who had been previous residents of the whare and who continue in recovery. After the morning whakatau the past and present whanau joined the staff for a waiata practice to support the afternoon events. [Click here to read more.](#)



For more information contact:

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Robotic telepresence in Thames and Waikato Hospitals

A pilot project is underway at the Thames inpatient unit involving a Hamilton-based clinician doing ward rounds at Thames Hospital through a robot nicknamed 'Dougie'. The clinician logs on to a web-based programme from his office (or mobile application), and manoeuvres the robot into the patient rooms so that he can use the robot's high quality audio and video to conduct a virtual consultation.

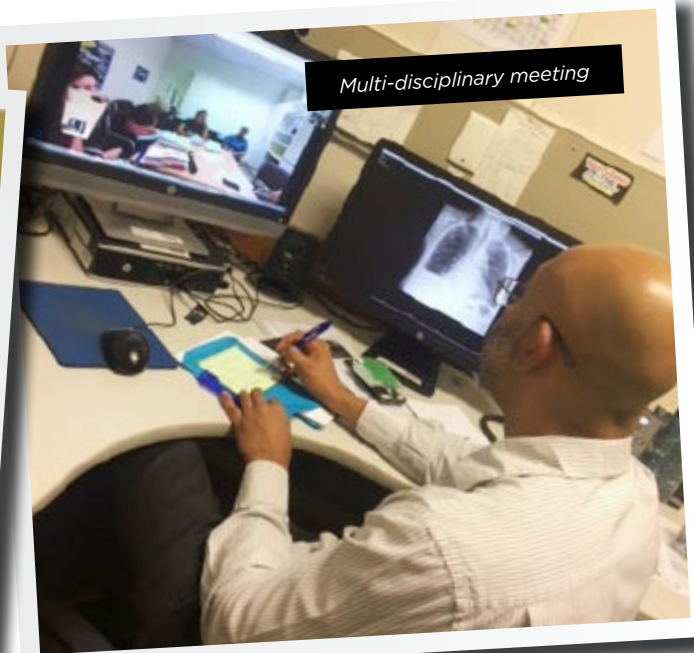
The unique aspect to the technological component of this project is that the remote clinician controls the robot – eliminating

the requirement for Thames staff to do any technical set up of equipment at the hospital or bedside.

This is the first time a telepresence robot has been used in a clinical environment in New Zealand. Dr Paul Huggan, Driden Kunaka, and Jeweleigh Bates (Project & Service Improvement Manager, Midland Cancer Network, HealthShare) are leading the pilot as part of the Post Graduate Certificate in Health Leadership and Management Programme at the University of Waikato.



Clinicians based in Waikato Hospital practising their smiles for telepresence ward rounds in Thames Hospital



Multi-disciplinary meeting



For more information contact:

Dr Ruth Large FACEM FDRHM | Clinical Director Thames Hospital, Emergency Physician Waikato Hospital, Waikato DHB
ruth.large@waikatodhb.health.nz

The Regional Health Integration Team

welcomes two new members

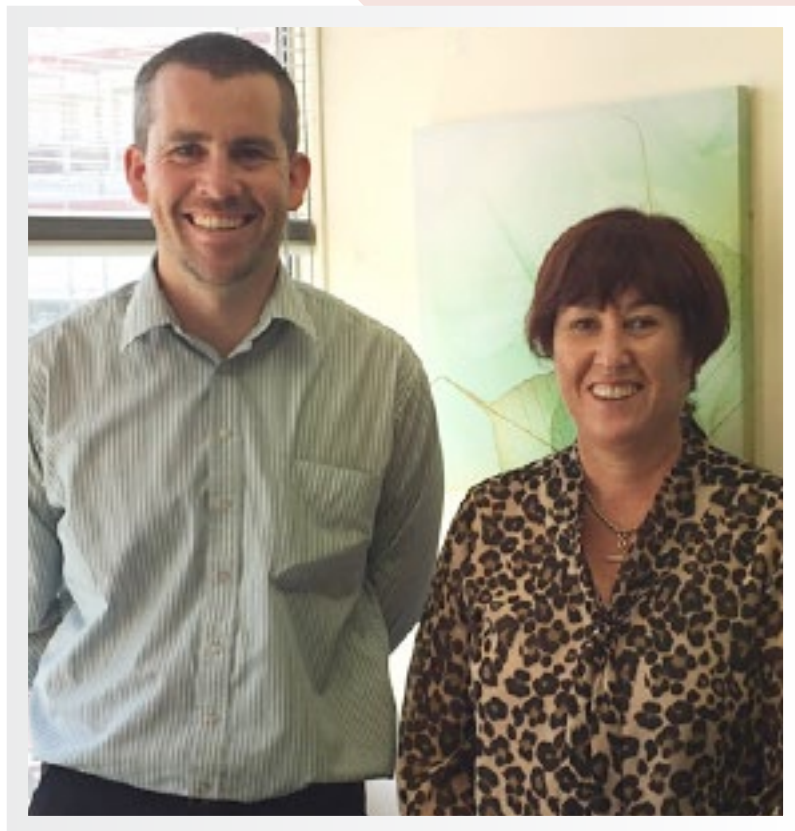
Richard Simpson is the project manager for a new child health project sponsored by the Midland United Regional Integrated Alliance Leadership (MURIAL) group. The project is looking at ways to support primary care enrolment and engagement for pregnant mothers and newborns.

Richard is based in Taupo, where he relocated with his family in November last year. Previously, Richard worked at Auckland Regional Public Health Service, focusing on public health emergency management, logistics, and after hours services.

Anna-Maree Harris is the new Midland Child Health Action Group (CHAG) project manager. She has recently moved from Counties Manukau DHB where she worked on a number of clinical and non-clinical projects over 12 years.

Originally from Gisborne Anna-Maree is familiar with the Midland region, and is enjoying being out of the Auckland traffic. Anna-Maree is based in the Hamilton office.

Richard and Anna-Maree are with HealthShare until July 2018.



For more information about child health services contact:

Richard Simpson | Project Manager | richard.simpson@healthshare.co.nz

Anna-Maree Harris | Project Manager | anna-maree.harris@healthshare.co.nz

2017-18 Midland Regional Services Plan

Ministry of Health feedback on progress in quarter 2

GREEN – ACHIEVED*

- ✓ **Cancer Services** - The Midland region has reached an average Faster Cancer Treatment achievement rate of 90%.
- ✓ **Cancer Services** - Following the Kia Ora E Te Iwi programme's success at Tairāwhiti, the Cancer Network will further support it into the Midland DHBs.
- ✓ **Healthy Ageing** - Achieved.
- ✓ **Hepatitis C Service** - We acknowledge the feature article you included on the Te Puia Springs walk-in hepatitis C clinic. This was an effective way of taking the service to the people with self-referrals, further encouraged by a radio and Facebook campaign.
- ✓ **Mental Health & Addictions Network** - Thank you for your report we note most actions are on track or complete.
- ✓ **Major Trauma** - Very interesting article on the Waikato DHB health workshop with the Mongrel Mob that included the impact of major trauma.

AMBER – PARTIALLY ACHIEVED

- ✓ **Cardiac Services** - Well done on achieving the Acute Coronary Syndrome (ACS) door to cath indicator as a region. Overall your regional plan is well developed and is on track.

We acknowledge the work the Midland region is undertaking to improve access to cardiac secondary services. We look forward to increased access to cardiac services and improved management of patient flow processes as the current work progresses.
- ✓ **Elective Services** - We acknowledge the work being undertaken by the region to improve the number and timeliness of electives delivery.
- ✓ **Stroke Services** - It is great to see the activity that is occurring throughout the region to support the improvement of regional stroke services.
- ✓ **Information Systems** - It is recognised that 50% of the amber/red items are delays in national programmes.
- ✓ **Health Quality & Safety** - Thank you for including information about recruitment of regional quality improvement advisors and how existing quality improvement staff are working together to share expertise across programmes. This is really pleasing to hear.

RED – NOT ACHIEVED

Definition: One or more health targets indicators/deliverables/milestones have not been achieved; no adequate resolution plan is in place; there are delays in the implementation of the plan.

(note: there were no areas of work assessed by the MoH as 'red')

* the MoH do not provide assessment and feedback on child health and radiology services, as these are areas of focus chosen by the Midland region.



Introducing...

Dave Catchpole

PMO/Assurance Lead, Regional Information Services, HealthShare

What does your job involve?

Regional IS are the custodians of the information technology services provided to the Midland Region DHBs. The outcome of my role is effectively to reduce the inherent risk involved in 'doing what we do'. This could be through making project management practice more repeatable or by ensuring we are addressing known vulnerabilities in our services – but in reality it's the rest of the team that do all the hard work.

With only a small Regional IS team and no corporate IT team, every day is different, and each one is highly likely to take an unexpected turn sooner or later.

Why did you choose to work in this field?

To be fair, my career chose me, rather than the other way around. I started work as a Systems Analyst for British Aerospace, helping to build, amongst other things, the Harrier 'Jump Jet'. I was quickly and somewhat randomly seconded to a (80's buzzword alert!) 'Natural Work Team' exploring Project Management tools and never really looked back.

What do you like about it?

Variety, problem solving, helping others, the opportunity to grow and continually learn and simply the pleasure of working with a group of colleagues who are so professional and genuinely committed to making a difference across the region.

What are the challenges of your job?

I'm not sure it classes as a challenge, but seeing people's frustrations when trying to make things work across the six separate organisations that make up the Midland Region is certainly right up there. If I could wave a magic wand over just one thing, that would be it.

What do you do when you are not at work?

Something I've learned whilst writing this article is that I am a Toxophilite (no, you don't need to run away) – outside of work, my big passion is archery. I got hooked a couple of years ago when I attended a beginners' course supporting my daughter. I now shoot an Olympic Recurve bow with River Glade Archers, just off Cobham Drive in Hamilton.

Archery is a fantastic sport for 'gear-heads', I can happily spend hours tinkering in the garage, but in reality it's all about the archer, their body control and most importantly their consistency. Archery is a little unusual in that there is no definitively right or wrong way to shoot an arrow; if you can do the 'wrong' thing identically every shot, then it becomes the right thing for you. However, with dozens of different variables, hitting something the size of a compact disc, 70 metres away, across a windy field presents a decent challenge. Easy to pick-up, devilish to master, even the most experienced archer will admit that archery must have been purposefully designed to mess with your mind.



What takes most people by surprise when they pick up a competition bow?

Nobody is ever quite prepared for how difficult it is to simply draw the bow back – it's the archetypal 'how hard can it possibly be' moment. Think of lifting a very well packed, moderately sized suitcase, hold it for 5 to 10 seconds – then repeat 150 times. The second thing that grabs them is quite how easy it is to entirely miss a target the size of your average desk that is only 15 metres away. Having said that, it really does get much easier surprisingly quickly.

How do you get started in archery?

I think there's something like 39 archery clubs around New Zealand, with Target or Field clubs within striking distance of all the HealthShare locations. Most will offer some kind of beginner's sessions and, of course, it doesn't take much to entice me into some archery chat if you want to know more.

Regional Information Services, HealthShare

Regional IS is a small team mainly focused on managing Midland regional IT services and working with the Midland Information Services Leadership Team to define the regional IS strategy. The team supports DHB Chief Information Officers and their teams to enable business and clinical needs to be met.

Joining Dave in the team is Debbie Manktelow, Manager – Regional IS; Steve Remington, Services Architect provides the technical oversight for regional services and their construct; and Jennifer Leong, Regional Service Manager manages the delivery of IT services across the region to ensure they align with regional agreements. Currently vacant is the Enterprise Architect, which develops the regional IS services in conjunction with DHB CIOs and eSPACE that are secure, resilient and in line with business needs; and a Portfolio Coordinator that maintains a portfolio view of IS activities from across the region.



For more information on Regional Information Services contact:

Debbie Manktelow | Manager - Regional Information Services | debbie.manktelow@healthshare.co.nz

BRAVE HEARTS

THE NEW ZEALAND CARDIAC STORY

Brave Hearts exhibit onsite at the
University of Waikato until 29 March 2018

Celebrating the Kiwi Pioneers of Cardiac Medicine

We invite you to visit a new interactive exhibit
profiling pioneering Kiwi heart clinicians and
the bravery of their patients, developed by the
Auckland Medical Museum Trust with support
from the Auckland University of Technology (AUT).

Brave Hearts celebrates the innovation, creativity, and success
of New Zealand medical pioneers who repaired the hearts of
newborns, children, and adults. The exhibit is designed to educate
and inspire people in the science of heart disease and to show the
contribution of New Zealanders past, present and future.

Historical objects and the remarkable stories associated with them
(e.g. the first heart lung bypass machine at Green Lane Hospital,
various pacemakers), will be accessible, many for the first time.
Novel comparative objects include the hearts of reptiles, birds
and animals including the heart of an elephant.

ONSITE Monday 26 February to Thursday 29 March 2018

OPEN Tuesday and Friday, 10am – 12noon

LOCATION Gate 1, University of Waikato, Knighton Road, Hamilton
(Exhibit location map available waikato.ac.nz/go/brave-hearts)

COST Free

FOR FURTHER INFORMATION

Please contact bravehearts@waikato.ac.nz

Hosted by:



Supported by:



Developed by:



HealthShare Culture Committee Vibe

Part of the purpose of having a Culture Committee in the HealthShare organisation is to “promote an efficient, effective, and safe working environment”. Each meeting has a health and safety component when we discuss incidents and mitigations.

Late last year one of our employees had an incident whilst carrying multiple bags of equipment and resources for a regional meeting. Rodney Jones has very kindly demonstrated how the carrier bags we subsequently purchased can be used to transport the laptops, projectors, paperwork, posters, packed lunch, and any other bits and bobs in a safe manner.

There are two cases – the large case pictured can be found at the 16 Clarence Street office, and a medium size case is at the Tauranga office in 11th Avenue. There is also an expandable, hard-sided poster tube, with carrying strap, that will fit up to A0 paper at the Cancer Network office in Pembroke Street, Hamilton.



?

Are you going to a meeting with lots of ‘stuff’? Pack it all in one of the cases and travel with ease.



For more information contact:

Jeweleigh Bates | Chair – Culture Committee | jeweleigh.bates@healthshare.co.nz

Child health data report coming soon...

The **Midland Child Health Action Group** is pleased to announce that it will soon be releasing its full quarterly data report.

This comprehensive report is designed for DHB, community and Non-Governmental Organisation (NGO) staff working in child health to see at a glance how their district is performing, and enables comparison with national rates and trends.

One of the report's features is the **equity reporting** showing the absolute and relative gaps between Māori and non-Māori rates.

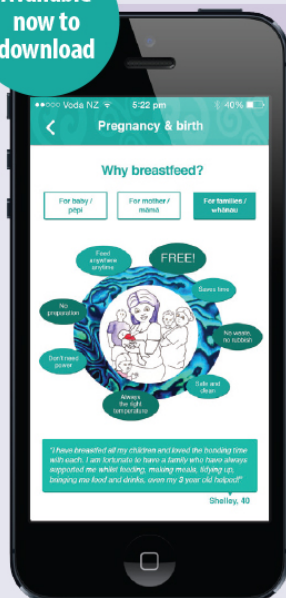
Keep an eye out for a roadshow coming to your area soon!



Get Your FREE Breastfeeding App

Midland celebrates 15,000+ app downloads across New Zealand... and beyond!

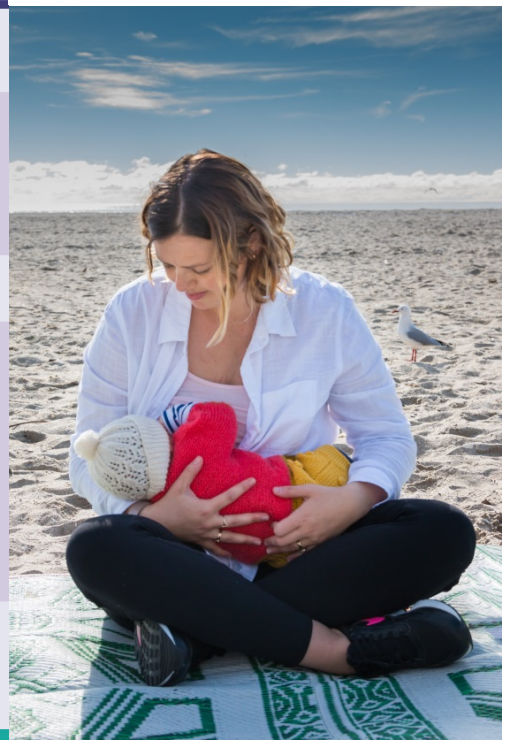
Available now to download



Search Google Play or iTunes stores for 'BreastFedNZ'

Download the **BreastFedNZ** app to find breastfeeding help, information and support.

 BreastFedNZ  www.breastfednz.co.nz



A wedding in India

During the month of February three HealthShare staff, Akatu Marsters, Philippa Edwards, Suzanne Andrew, and Millie Ruaporo (Akatu's sister), travelled to Kanpur, India, to attend the Marwari wedding of Andrew Holmes of Auckland and Pragya (Ashley) Bajaj, the previous PRIMHD Decision Support Coordinator for the Midland Mental Health & Addiction team.



A Marwari wedding is celebrated with a lot of enthusiasm, exuberance and is a very grand and colourful affair. Included in the celebrations were pre-wedding rituals which began on 17 February, to the wedding ceremony on the 19th.

Experiencing Pragya's wedding rituals in India will remain very special; including the Mehendi or henna ritual, the turmeric ceremony for the bride and groom, Andrew's arrival on a white horse to the music of a loud tin band and dancing, the magical experience of Russian and Ukrainian musicians, and an abundance of flowers, colourful textiles, jewels, and fabulous food.

The wedding was followed by a few days sightseeing in the northern Indian state of Rajasthan, bordering Pakistan. The itinerary was action packed with palaces, forts, temples and monuments in the cities of Agra, Jaipur, Jodhpur and Udaipur.

Highlights included a visit to the impressive Taj Mahal, the pink sandstone Agra Fort, the 15th century Mehrangarh Fort in Jodhpur, camel riding in Chokhi Dhani Village, and an intrepid visit to our guide, Mr Rohi's family home in Jodhpur's 'Blue City', to share lunch.

Pragya and Andrew will make their new home in Auckland.

