

## Media release: Wairarapa Times Age

7 February 2020

### Wairarapa DHB Orthopaedic Surgeon resigns

Konrad Schwanecke has been working with Wairarapa District Health Board for some 18 years, and has been a pivotal contributor to the organisation during that time.

Mr Schwanecke's resignation closely follows the retirement of fellow surgeon, Ian Denholm, last month, effectively halving local surgical capacity and leaving the DHB short in orthopaedic support.

The senior clinical and management team are working on future planning for the service.

"Konrad will be working through his three month notice period, which allows us a good amount of time to manage the service ahead of us and shape what that looks like," said Chief Executive, Dale Oliff.

"We are working closely with our neighbouring DHBs on a management plan for orthopaedic cover while we actively recruit to these positions."

"Succession planning and recruitment is an area we are focusing on with some urgency in this DHB and our priority is always to ensure our patients continue to receive care they require, without undue delay wherever possible."

"On behalf of the organisation, our staff and our patients, I have thanked Konrad for the excellent care he has provided our community, and for his continued advocacy for quality and efficiency in the delivery of care in this DHB," Dale said.

"Konrad will continue to work in his private capacity at Selina Sutherland Hospital, so we are pleased he is not lost to the region."

### Wairarapa's orthopaedic service – what, where and when Chief Medical Officer, Shawn Sturland explains

Wairarapa DHB's orthopaedic service is usually provided by four resident surgeons and some locum cover, rostered to provide 24/7 care.

Until last month, the DHB was recruiting for one vacant surgical position, with recent success. An accepted offer is now just awaiting registration and immigration red tape and the new surgeon is due to start soon. But celebrating that success was short-lived when in January the retirement of

one and resignation of another surgeon meant the DHB is soon to be down to just one of four, with one still on the way and two more gaps to fill.

The management team is working hard to ensure the community's needs can be met despite the local capacity gap.

"We are pleased to have been graced with a healthy notice period from our resigning surgeon, which gives us some room to move," Chief Medical Officer, Shawn Sturland said.

"But we are looking at a period ahead where we will not have a full quorum of orthopaedic surgical cover at this hospital and we will need to either buy in the service or move some of our orthopaedic care out to our neighbouring DHBs until we can successfully recruit."

Recruiting is not as easy as one might think. There are challenges with attracting surgeons and specialists to rurally located hospitals, and Wairarapa DHB is no exception.

"The challenges in employing specialist positions are felt nation-wide," Sturland says. "We compete on a global stage in healthcare and that can test us. But Wairarapa is a unique and particularly desirable location, and we do make sure we celebrate that when we go to market."

The DHB is not sitting still while it advertises vacancies. Discussions with neighbouring DHBs are well advanced, and Sturland is confident a solution will be found to ensure Wairarapa patients needing immediate orthopaedic care will be catered for.

"When we do not have enough specialist coverage to safely fill rosters, the gaps mean we have to either not operate, or we have to arrange surgery elsewhere," he explains.

"We always prefer to care for our people close to home, but if that is not in a patient's best interests, for example if they would have to wait an undue period of time for surgery locally as we don't have theatre capacity, then we would organise to transfer their surgery to a hospital nearby."

"We don't want to disrupt our service or disadvantage our patients, but we do have a duty to our community and our priority is always to provide timely, quality care."

"If that means we have to assist people to have their surgery elsewhere until we have a fully operational orthopaedic service locally, then that is what we will do," Sturland says.

## **Wairarapa's orthopaedic surgical demand**

Wairarapa DHB has around 900 orthopaedic ward admissions per year. Orthopaedic patients' surgical needs differ and can be best classified into three separate service areas; planned care, acute care, and acute arranged care. Planned care is where people are admitted from a waitlist, with their surgery booked ahead. Acute care is where people are admitted directly, following a trauma injury. Acute arranged care is where trauma has occurred requiring surgery, and the patient is admitted within seven days of initial assessment.

**Wairarapa's annual orthopaedic demand, based on previous 12 months of service:**



Wairarapa DHB will be communicating with any booked orthopaedic patients, or patients waiting for surgery information, to keep them informed of any changes to expected care.

*Wairarapa DHB is committed to open communication and will be keeping the community informed of issues of interest as they arise. Queries, comments and concerns are invited by email to [communications@wairarapa.dhb.org.nz](mailto:communications@wairarapa.dhb.org.nz)*

Orthopaedic surgery is the branch of surgery concerned with the musculoskeletal system – bones, cartilage, tendons, connective tissue and joints. Orthopaedic surgeons generally treat trauma (from injury and accident), degeneration and birth defects.

**Ends.**

**For more information:**

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