Board Meeting 3 12 20 Open Session Item 6

NHS GRAMPIAN

Infrastructure Investment – Robotic Assisted Surgery

1. Actions Recommended

The Board is asked to Delegate authority to the Chief Executive and the Director of Finance to procure two additional surgical robots for use initially in general surgery and orthopaedic surgery and a replacement robot for the urology service in line with the plans outlined in the attached case.

2. Strategic Context

Robotic Assisted Surgery (RAS) allows doctors to perform complex procedures with more precision, flexibility and control than is possible with conventional techniques. Robotic surgery is usually associated with minimally invasive surgery – procedures performed through small (keyhole) incisions. The robotic technology is in the form of a master/slave system such that, the surgeon is able to manipulate instruments attached to the patient from a nearby console with fine dexterity under magnification to make precise incisions inside the patient. The robot is never ever making decisions.

RAS is now being widely used and expected to become the norm, with this, bringing significant and wide ranging benefits. RAS has addressed many of the inherent limitations of the laparoscopic (also known as keyhole) approach thus making it possible to perform complex surgical procedures in hard to reach areas.

In collaboration with the University of Aberdeen, the Health Services Research Unit and our surgical teams and staff, we aim to be a centre of excellence for robotic treatment, training and research. This will not only ensure delivery of innovative and efficient high quality outcome focussed care, but ensure we are employer of choice, supporting our recruitment and retention capabilities and ensuring future service sustainability.

The matters outlined for Board approval in the attached case relate to planned investment in Robotic Technology to support key surgical services, consistent with relevant national, regional and local clinical care and health strategies, in particular:

- A National Clinical Strategy For Scotland
- Realistic Medicine
- Grampian Clinical Strategy 2016 2021
- NHS Grampian Acute Sector Strategic Plan 2020-2023
- National Framework for Robotic Assisted Surgery (May 2020)
- Beating Cancer: Ambition and Action
- Beating Cancer: Ambition and Action in Grampian
- Our Commitment to Research 2019-2023

The investment will deliver the following benefits:

- Improvements in patient experience (person centred),
- Improved access, quality and efficiency of key diagnostic and treatment processes (high quality),
- Improved health equality with better ability to safely offer complex life-saving and Quality of Life operative procedures to higher risk profile patients,
- Reduced length of stay in an acute setting and reduced operating time (sustainable),
- Lower complication and re-operation rates and better long term outcomes (safe), and
- Improved recruitment and retention of key staff (sustainable).

3. Key matters relevant to recommendation

As part of the national programme for delivering the National Framework for Robotic Assisted Surgery, the Scottish Government is supporting investment in the further development of a number of robotic platforms during 2020/21 across various Boards, including NHS Grampian. The attached case covers the plans prepared by various surgical specialities for the next stage in development of Robotic Assisted Surgery (RAS) in Grampian.

These plans require initial investment of £5.7m to support procurement of two additional surgical robots for use initially in general surgery and orthopaedic surgery, a replacement robot for the urology service and some additional sterilisation equipment for the decontamination service to ensure current service levels for the robotic instruments are maintained and to improve overall resilience of the service.

Capital funding is available to support this investment in 2020/21 and the recurring revenue implications are provided for in the Board's five year financial plan.

4. Risk Mitigation

Approval of the recommendations as outlined will assist in mitigating the Board strategic risks:

No. 2515 There is a risk that our infrastructure will not be fit for purpose nor compliant with statutory requirements if we do not have an adequate medical equipment, information technology and backlog maintenance programme and plan for redesign and transformation of services. Failure to progress will result in existing infrastructure not being able to support our objectives for future patient care

No. 2540 There is a risk that innovation and transformation is not appropriately focused on the key change issues and opportunities related to the strategic themes of prevention, self-care, planned care and unscheduled care

5. Responsible Executive Director and contact for further information

If you require any further information in advance of the Board meeting please contact:

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Contact for further information

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Date 26 November 2020

Attached: Business Case for the Development of Robotic Assisted Surgery & Appendices