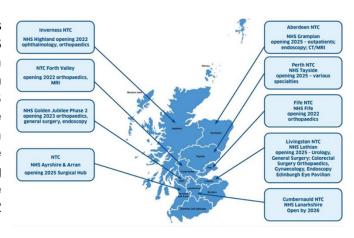
## National Treatment Centre Grampian (NTC-G) Progress Update

## **Background**

The National Treatment Centre Grampian (NTC-G) is one of nine National Treatment Centres across NHS Scotland. Some of these are in their construction stages, and some (including NHS Grampian) are in their planning and Business Case stages. NHS Grampian has an approved Outline Business Case (OBC) and is currently progressing towards completion of a Full Business Case (FBC) for submission to the NHS Grampian Board and Scottish Government during 2022, with an expectation of project completion in late 2025/26, and an operational 'doors open' date in Q2 2026.



The project's strategic assessment involved 22 clinical specialities and assessed: (a) current physical limitations and constraints, (b) clinical benefit delivery, (c) service demand / capacity and (d) transformation opportunities. The process identified investment in key areas that would have the greatest additional impact on planned care services. The subsequent (pre-covid) OBC described plans to build an NTC-G, on the Aberdeen Royal Infirmary (ARI) site (the Reference Site) adjacent to the ARI Phase 1 building (built 1966) and included the following specialities:

- Urology
- Day Surgery (General Surgery, ENT and OMFS)
- Dermatology
- Respiratory
- Endoscopy
- Radiology
- In addition, the OBC identified a need to create an MRI Suite at Dr Gray's Hospital, Elgin.

In May 2021, during the FBC development stage of the project and in response to (a) the COVID pandemic, and (b) market & cost uncertainty, NHS Grampian commenced a focused, <u>clinically led</u> review of scope. Due to the need to engage with a wide range of stakeholders and the associated challenges of the pandemic, conclusion of the development of the FBC has been delayed.

## The Review

The clinically led review has considered the following key elements;

- a. Robustness of the clinical models and speciality groupings, with a focus on flow, quality, safety, workforce.
- b. Consideration of alternatives physical locations for the NTC-G,
- c. The learning from the COVID pandemic and opportunities to better segregate flow and services, and further exploit technological opportunities,
- d. The need to develop sustainable solutions that support recovery, remobilisation and capacity to address health debt exacerbated by the pandemic,
- e. Affordability and overall 'best value' issues associated with technical and IPCT compliance, net zero carbon commitments, etc.

f. Wider estate and infrastructure challenges that need to be addressed as enablers to the NTC-G, particularly relating to Phase 1 at Aberdeen Royal Infirmary.

In relation to the physical location review (2) above, the clinically led review developed a long list and short list of alternative physical sites to be considered as part of an options appraisal process. The short-listed alternative sites are;

- 1. ARI Reference Site (approved OBC)
- 2. ARI Site stand-alone
- 3. ARI Site minimal link to Phase 1 ARI
- 4. Summerfield House Site 2 storeys \*
- 5. Summerfield House Site 3 storeys \*
- 6. Aberdeen City Centre John Lewis Building \*

Following discussion and agreement with Scottish Government, the MRI Suite at Dr Gray's will be progressed as a separate Standard Business Case (SBC) and is expected to come to the NHSG Board in June 2022. If approved, this will allow an accelerated delivery of the MRI at Dr Gray's.

Consideration of the Aberdeen NTC-G options is progressing at three levels

- (i) clinical appraisal (now complete),
- (ii) non-clinical, non-financial appraisal, and
- (iii) financial, best value appraisal.

A stakeholder engagement options workshop to consider (ii) the non-clinical, non-financial appraisal is scheduled for 2<sup>nd</sup> March 2022, after which time it is expected there will be a clear preferred option to take forward to FBC stage.

Gary Mortimer, Senior Responsible Officer Paul Bachoo, Executive Lead and Portfolio Lead

<sup>\*</sup> It should be noted that for the 'off site' options at Summerfield House and John Lewis, only high level provisional assessments have been made. If either of these sites is considered to be the preferred option then further detailed design, public consultation and planning consents will be necessary.

