

## Trust Board Briefing Paper

**Date of Meeting:** 28 October 2021

**Subject:** Additional Inpatient Theatre at Antrim Hospital

**Presented by:** Neil Martin, Divisional Director of Strategic Development & Business Service

**Purpose:**

To provide a summary of the Capital Business Case for Trust Board Approval.

**Background:**

The purpose of this business case is to urgently seek capital and revenue funding to address existing inpatient theatre pressures relating to both elective and non-elective surgery. The construction and commissioning of an inpatient theatre with supporting services will increase overall inpatient theatre capacity in Antrim Hospital. This is the first phase of capital works within the Trust's overall theatre requirements and was an interim scheme identified as a priority on the Draft 10 Year Capital Plan (September 2019), as such it is fully aligned to regional strategic priorities.

**Options:**

Three out of a long-list of six options were shortlisted (including a "Do Nothing" Option) for further review and consideration within the capital business case for an additional inpatient theatre on Antrim Hospital site.

The preferred option is **Option 3** - To create a new inpatient theatre by constructing a new traditional three-storey building at the rear of Antrim Hospital connected to the existing hospital street immediately facing the entrance into theatre block. The inpatient theatre would be located on the top floor, with ancillary and clinical support accommodation occupying the second floor and the lower floor remaining vacant.

**Benefits:**

This proposal will provide one additional inpatient Theatre on the Antrim Hospital site, helping address existing pressures relating to elective and non- elective surgery. It will result in the capacity to deliver 96 breast procedures, 312 EmSu procedures and an additional 105 procedures efficiency gain, totalling 513 additional inpatient theatre procedures.

The traditional build theatre will meet the requirements of the HBN 26 – Volume 1 Background: general functional and design considerations inpatient operating facilities (January, 2004) standards and will provide all of the supporting facilities required to run a standalone inpatient theatre.

**Capital Costs:**

The capital costs are currently £8.747m, which includes £5.663m construction costs. This does not include any costs for additional footprint on A Floor which may be required if the Interim Maternity Scheme proceeds.

**Revenue Costs:**

The additional recurrent revenue requirement for the preferred option is £1.581m. This does not include any costs associated with the inpatient stay or the cost of consultant surgeon undertaking the procedure as the consultant surgeon's time, in both specialties, is already funded. Appendix 1 provides a breakdown and rationale for the revenue costs.

**Programme:**

The scheme will be completed within 47 months of OBC approval and funding being released. This includes 21 months for design, 24 months for construction and 2 months for commissioning. This is not an accelerated programme as discussed under the Interim Maternity Scheme.

**Conclusion/ Action Required:**

For Approval by Trust Board.

**Finance Briefing Note Re Additional Theatre Revenue Costs**

The additional revenue requirement of £1.581m for the preferred option is summarised in the table below. The cost does not include any costs associated with the inpatient stay or the cost of surgeon undertaking the procedure (the surgeons time in both specialties is already funded)

	<b>Option 3</b>
Medical Staff	251,220
Nursing Staff	429,337
Theatre Non Pay Costs	390,326
Administration Costs	73,321
Pharmacy	5,604
Diagnostics	149,839
HSDU	8,168
Support Services	77,826
Utilities	135,036
Equipment Maintenance	60,503
<b>Total Costs</b>	<b>1,581,179</b>

The proposal provides theatre capacity for 10 sessions per week

The revenue costs calculated are for the provision of an additional 5 theatre sessions which are to deliver theatre capacity for

- 2 Breast Surgery Sessions 42 weeks per annum 96 procedures per annum
- 3 General Surgery Sessions ( EMSU ) 3 sessions per 2week 52 weeks per Annum - 312 procedures per annum

The other 5 sessions will be transferring from the existing theatres which have been delivered via the seamless working day. By relocating 5 inpatient sessions to the new additional inpatient theatre and returning to the conventional sessional day there will be on average an additional 2 procedures every 4 weeks per relocated session. With 5 relocated sessions that equates to 1 additional procedures per 4 weeks and so per 42 week year that equates to an additional 105 procedures per annum. Costs for these 105 procedures have been included on a marginal cost basis.

Earlier in the year the HSCB benchmarked the proposed costs against Specialty and HRG costs and have indicated (this was before the 105 additional procedures were included) that based on a 70 % marginal cost – the cost of the additional activity was between £397K and £266k more expensive than they would have anticipated. However the HRG Costs and Specialty costs include the costs of the in-patient stay so the cost differential would actually be higher.

There are, however, a number of factors that contribute to the higher than anticipated cost basis.

- The location of the new theatre is remote from the existing theatres, and it has its own separate recovery area so a full complement of recovery staff are required for

the transferred sessions. The location of the preferred option also means that an additional theatre booking clerk and theatre porter is required.

- In addition to the appointment of a 1.00 wte Consultant, the new theatre will require the appointment of a specialty doctor which will allow for the more efficient use of theatre and mitigates the risk of having a new theatre that is not within the main theatre complex and provides cover for a separate recovery area.
- The low volume of procedures to be carried out in the additional sessions impacts , some of the breast surgery to be undertaken requires an all-day list for a single procedure and in addition the costs for the theatre consumables for the breast reconstruction is £6,100 per case.
- The building to be constructed is a 3 storey building with a floor remaining as a shell space – and whilst a reduced cost per m<sup>2</sup> has been used in respect of building & engineering maintenance costs & HLP costs the rates cost for the entire building ,the empty floor is not delivering additional patient activity.