

ARIS CENTER OF EXCELLENCE IN ROBOTIC SURGERY (COE):

The Center of Excellence in Robotic Surgery program is an ARIS initiative aimed at patient safety and quality improvement available to all robotic surgeons and facilities across the globe. The COE program reflects the specific needs of surgical patients and the unique roles and responsibilities of robotic surgery providers.

Safe patient care is the result of both the individual surgeon and the facility where the surgery is performed. The COE certification is therefore awarded to a facility and its associated surgeons who have successfully completed the designation process, which enables patients to distinguish providers who have met the state-of-the-art requirements with regards to volume, manpower and facility for delivering high-quality perioperative and long-term follow-up care.

Benefits:

- Ensure patient safety
- Improve the quality of the services offered by both Institutions and Surgeons
- Ensure highly efficient and safe patient treatment
- Advise existing robotic institutions to upgrade their status to level of excellence
- A Registry that will guide our decisions and respond to challenges by our colleagues, insurance carriers, health care providers, governments and the public.
- An invaluable resource for research.

COE Eligibility Criteria

Program Requirements:

The primary requirement for applying to COE is that the applicant surgeon should be a member of ARIS. The application facility should have a dedicated robotic surgery department functioning for at least a period of 12 months at the time of application. The department should also have their one years surgical data in to their registry by the time of inspection.

Surgical Experience:

The applicant surgeon / facility has performed at least 50 qualifying robotic surgery procedures including all specialities in the preceding 12 months. Also, each applicant speciality surgeon should have performed at least 10 qualifying surgeries in a calendar year and 50 qualifying robotic surgery procedures in their lifetime. All these procedures should have been entered in the hospital registry. Application failing to comply with the above clause will not be considered for COE. Each applicant facility and surgeon meets surgical outcomes benchmarks for mortalities, complications, readmissions and reoperations.

Qualifying Specialities:

All specialities associated with ARIS or other international and national / regional guidelines which include:

- Urology
- Gynaecology
- General Surgery
- Upper GI surgery
- Hepatobiliary Surgery
- Colorectal Surgery
- Hernia Surgery
- Bariatric surgery
- Thoracic Surgery
- Cardiac Surgery
- ENT Surgery
- Neuro Surgery
- Orthopaedic Surgery
- Paediatric Surgery
- Any other robotic specialty

Outcomes Benchmarks:

Applicant facilities and surgeons are required to meet the following outcomes benchmarks for all robotic surgery procedures performed at the applicant facility

- Mortalities: ≤ 0.4% at 90 days
- Complications: ≤10% at 90 days
- Readmissions: ≤8% at 90 days
- Reoperations: ≤5% at 90 days

The complication include:

- Anastomotic leakage
- Bleeding requiring blood transfusion
- Pneumothorax
- DVT
- Pulmonary embolism
- Respiratory failure
- Cardiac arrest
- Myocardial infarction
- Héart failure
- Liver failure
- Multi organ failure
- Renal failure
- Sepsis and SIRS
- Anaemia
- Bleeding
- Erosion
- Neurological complication
- Intestinal obstruction
- Prosthesis related complications
- Malnutrition and vitamin deficiencies

Programme Director:

The applicant robotic surgeon would be the Programme Director. A minimum of twomember Robotic committee would need to be constituted with the following members:

- Robotic surgeon
- Robotic Anesthetist
- Robotic Nurse
- Robotic Technician
- Robotic Coordinator

Each surgeon with the required surgical experience as per the ARIS requirements will be given a certificate as a speciality Director apart from the Institute's COE

The applicant holds interdisciplinary team meetings at least quarterly to ensure that decisions related to robotic surgery are addressed in a comprehensive manner. The minutes of the meetings need to be recorded and will be checked by the assessor. The Director would be primarily responsible for coordinating the interdisciplinary services and guidelines for robotic surgery.

Consultative Services:

This would comprise of

Full time with 24 hour coverage

- A full time speciality Robotic surgeon who runs the speciality program with clinical quidelines and SOP's
- A Full time dedicated Anaesthesiologist team who supervise anaesthesia on all robotic surgery patients.
- A fully equipped Intensive Care Unit with a full time Critical Care Team who manage
 the patient in the immediate postoperative period and during any sudden emergency,
 respiratory or cardiac arrest through its acute response team.

Full time / On-site within 30 minutes of request;

- Gastroentrologist capable of performing endoscopies to diagnose complications
- Interventional radiologist or other physician capable of performing percutaneous drainage of intra-abdominal abscess.
- Integrated Physician with critical care credentials to manage complications (Cardiologist, Pulmonologist, etc)

The facility should also able to identify the following consultative staff:

- Psychiatry / Mental health
- Infectious diseases
- Intensive care therapy
- Emergency department
- Physiotherapy and Occupational therapy
- Ambulance services
- Full fledged in-house laboratory / blood storage

Equipment And Instruments:

- Availability of Crash Cart in the Recovery room and wards where the patients would be shifted in the postoperative period.
- Specific Operating room tables to accommodate Robotic patients, Robotic specific Surgical instruments.
- Presence of Fibrotic laryngoscope / Bronchoscope in OR for difficult airways.
- Radiologic capabilities like CT scan, Fluoroscopy / Dye study, etc.
- Equipments to manage all post operative emergencies including cardiopulmonary emergencies.
- Full fledged in-house laboratory / blood storage
- Personnel trained in the safe operation of the equipment and capable of moving patients without injury to the patient or themselves.

Surgeon Dedication And Qualified Call Coverage:

The applicant facility should have policies and guidelines in place that require applicant / all eligible robotic surgeons to have qualified call coverage, and the applicant surgeon certifies that each covering surgeon is capable of identifying and treating robotic surgery complications.

The applicant surgeon / program director spends a significant portion of his efforts in the field of robotic surgery and completes continuing medical education. The applicant surgeon should be a qualified surgeon by the highest certifying authority, is a member of ARIS. The applicant surgeon has privileges as both a robotic and conventional surgeon at the applicant facility. The application facility should have a dedicated department of robotic surgery under which all the protocols, guidelines and SOP's are functioning.

Clinical Pathways And Standardized Operating Procedures:

The applicant formally adopts and implements clinical pathways that facilitate the standardization of perioperative care for the relevant procedure:

- Preoperative multidisciplinary evaluation, education, preparation, admission workup/ evaluation and informed consent of the bariatric surgery candidate.
- Anesthesia, including monitoring and airway management
- Perioperative care, including monitoring and airway management
- Deep vein thrombosis (DVT) prevention.
- Management protocols like Enhanced Recovery After Surgery (ERAS)
- Identification and evaluation of early warning signs of complications
- Preoperative, postoperative and long-term nutrition regimen.
- Pain management.
- Postoperative Follow up including entering data in the ARIS Registry.

Patient Education:

The applicant provides organized and supervised support groups for all patients who may undergo or have undergone robotic surgery.

Continuing Medical Education:

The applicant / facility would be committed to spread the science of safe Robotic surgery. At least two courses/ CME'S would be conducted every year by the facility to impart teaching and training of surgeons in the field of Robotic surgery.

Inspection For Accreditation:

- 1. The application for the accreditation will be filled online through official ARIS website www.aris-international.com. The application will be accompanied with an online payment to the ARIS account for a non-refundable amount of Rs 50,000/- (Fifty Thousand Rupees only). Subsequent to receiving the fees, ARIS President will credential the application and if accepted, appoint one assessor for an online interview / onsite inspection. For online interview, the program director and all specialists fo the applying facility should be available for the zoom meeting. If onsite, the inspector will physically meet all the stakeholders and inspect the facility and the logbook of robotics surgery. The cost of travelling and local hospitality for the assessors will be taken care by application facility. Subsequent to the interview / inspection, if the facility is approved, the accreditation will be valid for a period of 3 years. In case the assessors suggest certain changes/ modifications , the same would need to be completed in a period of one month by the applicant/facility and proof would need to be submitted to the assessors for the final report.
- 2. Facilities already approved by the SRC or other associations as Centre Of Excellence would be exempted from interview / inspection and will be given the accreditation after applying online along with the payment of non-refundable fees of Rs 50,000/= (Fifty Thousand only). However, the application will still be credentialed by ARIS president before approving the COE for these centres.

- 3. Revalidation of the applicant/ facility will take place every three years. Revalidation fees are non-refundable and will be similar to initial fees submitted with online payment to the 'ARIS' account. An online interview / onsite inspection of the facility by a single assessor will be done to complete the process of recertification.
- 4. If the Programme Director leaves the facility, it would cease to exist as a "Centre Of Excellence" unless another program director with similar qualification and an existing COE speciality certification is instated. A fresh application with a new Programme Director would be needed to reapply and meet the desired criteria if a new surgeon is applying for the COE who has not been an existing program director or a COE speciality certificate holder. All applying surgeon including speciality surgeons should be a life member of ARIS.

Certification:

The certification would carry the:

- Seal of the Centre of Excellence.
- Name of the Facility.
- Name of the Programme Director.
- Name of the Speciality consultant (for various speciality applications).
- Duration of the certification.

Advantages of being an ARIS Centre of Excellence:

ARIS believes that even the best can improve. Excellence is not simply an achievement – it is a culture that must be sustained. ARIS is in an unique position to provide the experience it has gained through its expert executive members to those who wish to improve beyond their accreditation. Significant benefits of ARIS COE are as follows:

- 1. COE improves the safety and quality of patient care.
- 2. It improves the brand value of the
- 3. Delegates are allotted only to COE's for clinical attachment.
- 4. It lowers the overall costs associated with successful treatment.
- 5. Data provided by program participants, are used to achieve best treatment outcomes.
- 6. Outstanding safety ratings and a patient-first approach.
- 7. Information enables clinicians, patients, payor and policymakers to make informed decisions to improve health care delivery.

The Accreditation Process in 5 steps:

01	02	03	04	05
REGISTRATION	ACCEPTNCE	INSPECTION	ACCREDITATION	MANITANANCE
Register through www.aris- international.com with required documents to start the process of accreditation	Once fees are paid and terms accepted, ARIS board will cross check and clear the application for interview / inspection	Online / Onsite rigorous evaluation process as per international quality outcome data requirement	Applicant will be notified with in 24 hours after inspection. If not approved, opportunity to correct the deficiencies	Designee evaluated periodically by verifiable compliance with all current requirements and other program criteria.

For further information and queries:

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