The UKRI Trustworthy Autonomous Systems Hub

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CONTRIBUTION TO HEALTH AND WELLBEING













Key Message

Working towards correct attribution to responsibility in complex and dynamic autonomous health and wellbeing systems

DAISY

Diagnostic **AI Sy**stem for Robot-Assisted A&E Triage This project aims to prototype a robot-assisted **A&E triage solution for reducing patient** waiting time and doctor workload.

Empowering Future Care Workforces

Scoping Capabilities to Leverage Assistive Robotics through Co-Design This project aims to understand how health and social care professionals can benefit from using assistive robotics on their own terms. And in ways that are safe, trustworthy, and meet the legal and ethical standards of their professions

Reimagining TAS with Disabled Young People

This project brings together **Disabled Young People (DYP), social and computer science researchers and school and industry partners**. We centralise the expertise and aspirations of DYP around questions of trust, resilience and capacity in relation to autonomous systems; thus embedding inclusion, equity, responsible research and innovation in studies of TAS.

LEAD CONTACT: Dr Cian O'Donovan, Senior Research Fellow, University College London



Lauren White Research Associate iHuman/Education, University of Sheffield







Trustworthy Autonomous Recommender Systems on Music Streaming Platforms

Even if Recommender Systems (RS) are intended to be consumercentric, they tend to exhibit inherent biases in the recommendations made. This project will look at how these biases in the RS impact market competition between suppliers of products on the RS platform.

Intersectional Approaches to Design and Deployment of Trustworthy Autonomous Systems

Exploring how intersectional approaches can inform the design and deployment of TAS toward the creation of an inclusive, fair and just world. We focus on the health and maritime sectors to address a range of individual, technical, systemic, place-based, professional, cultural and institutional issues from an intersectional perspective.

Virtually There

Exploring Presence, <u>Ethics</u> and Aesthetics in Immersive Semi-Autonomous Teleoperation for Hazardous Environments.





LEAD CONTACTS: Peter Ormosi, Professor of Competition Economics, University of East Anglia

University of East Anglia
Rahul Savani
Professor of Computer Science



Rahul Savani Professor of Computer Science, University of Liverpool



LEAD CONTACT: Caitlin Bentley, Lecturer in Al-enabled Information Systems, University of Sheffield

Trustworthy Autonomous Systems to Support Value-based Healthcare Experiences

Exploring how <u>trustworthy autonomous systems embedded in devices in</u> <u>the home</u> can support decision-making about health and wellbeing.



LEAD CONTACT: Liz Dowthwaite Research Fellow, University of Nottingham

Trustworthy Human-robot Teams

Exploring different aspects related to trust within and towards human-robot teams in two essential tasks: **surgery and cleaning**.



LEAD CONTACT: Nicholas Watson Associate Professor, University of Nottingham

SafeSpaces NLP

Behaviour classification NLP in a socio-technical AI setting for <u>online</u> <u>harmful behaviours for children and young people</u>



LEAD CONTACT: Stuart Middleton Lecturer in Computer Science, University of Southampton

Codesigning Trustworthy Autonomous Diabetes Systems (Cotads)

Designing algorithms for diabetes management during life transitions using co-design, provenance and explainable AI. This project aims to Increase trust and understanding by **bringing together clinicians, data scientists, and people with type-1 diabetes.**

A Participatory Approach To The Ethical Assurance Of Digital Mental Healthcare

Developing a novel approach to assurance through participatory methodology, to underwrite the responsible design, development, and deployment of autonomous and <u>intelligent systems in digital mental</u> <u>healthcare.</u>

Trustworthy Light-based Robotic Devices For Autonomous Wound Healing

Demonstrating **wound healing** in the laboratory and defining an envelope of operation that balances risks and benefits of machine learning and **autonomous control**.





LEAD CONTACT: Michael Boniface

Professorial Fellow of Information Systems, Director of the IT Innovation Centre, University of Southampton



LEAD CONTACT: Christopher Burr Ethics Fellow, Alan Turing Institute



LEAD CONTACT:

Sabine Hauert Associate Professor of Swarm Engineering Bristol Robotics Laboratory, University of Bristol

Welcome to the cutting-edge world of AI-led robot surgeons

28.4m

Surgeries that could be cancelled this year globally as a result of Covid-19. Robot surgeons would help to address this

'To tell a patient that I will press a button and everything will be done by a robot, while I have coffee, may not be acceptable to many' Trustworthy Autonomous Systems, EPSRC UKRI Conor et al, Nature Reviews 2020



Levels of Autonomy

Level	Autonomy	Description	Examples	
0	No Autonomy	No autonomy	AESOP (1994)	
1	Robot Assistance	Robot = guidance/assistance during task Human = continuous control	da Vinci Systems (2000)	
2	Task Autonomy	Robot = task-specific as directed Human = discrete (not continuous control)	PROBOT (1997)	Da Vinci Xi (Intuitive Surgical)
3	Conditional Autonomy	Robot = generates task-strategies, can perform task without close oversight Human = selects strategies and/or approves autonomously selected strategy.	AquaBeam (2019)	
4	High Autonomy	Robot = can make medical decisions Human = direct supervision		
5	Full Autonomy	Robot = robot surgeon that can perform an entire operation independently		AquaBeam (PROCEPT BioRobotics

 Table 1 A Table Summarising an Automation Classification used in Surgical Robotics, including Definitions and Example Systems.

 Adapted from Connor et al. (2020), Lane (2018) and Zaman et al. (2021)

8

STAR ROBOT SCIENCE TM, 2016

nature medicine

Consensus Statement

https://doi.org/10.1038/s41591-023-02732-7

The IDEAL framework for surgical robotics: development, comparative evaluation and long-term monitoring

Marcus H et al. Nature Med 2024



Stage 1 Idea Example: The Maestro System (Moon Surgical) for laparoscopic surgery



Development Example: The VELYS (Johnson & Johnson) for use in arthroplasty





Stage 2b Exploration Example: The Versius System (Cambridge Medical Robotics)



Stage 3 Assessment Example: The Mako Robotic Arm (Stryker) for use in arthroplasty





Stage 4 Long-term monitoring Example: The da Vinci system (Intuitive) – spans phase 3 and 4 (depending on indication)

