

Explanatory Notes

All cases admitted to hospital between 01 October 2024 and 31 December 2024 have been included. Only cases where the necessary data are available have been included in the denominator for each individual analysis.

The results for process measures for which fewer than 10 cases have available data will not be reported. Instead value will be marked as 'Insufficient data'.

At ICB level, runcharts are compared to national quartiles.

For better insight to how these standards have been structured, please refer to the **NELA standards document**.

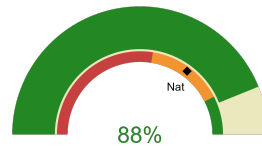


NHS North East And North Cumbria Integrated Care Board

2024-25 Reporting Period 7: 01 October 2024 - 31 December 2024

These plots represent patients having an emergency laparotomy during Year 2024-25 Reporting Period 7 of NELA data collection. This version will be made publicly available via the NELA website. Feedback from participating ICBs and hospitals is welcome.

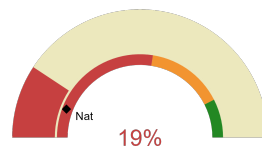
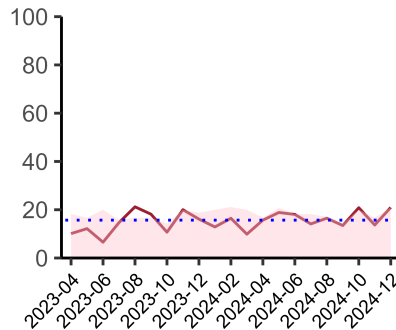
NELA process and outcome measures



Estimated case ascertainment
01 October 2024 - 31 December 2024

**Estimated Case Ascertainment
(Based on HES Data)**

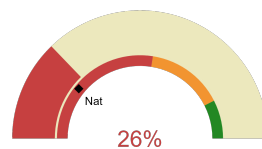
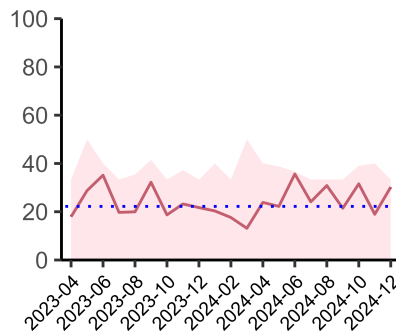
Expected number of cases 438
Total cases entered 466
Cases locked 338
Cases unlocked 128



Proportion of patients who had a CT scan that was reported by senior radiologist and communicated with the team in the correct time scale before surgery
01 October 2024 - 31 December 2024

CT reported by a senior radiologist (ST3+) and communicated with the team in the correct time scale before surgery.

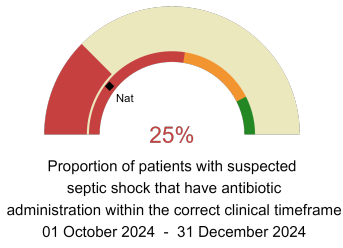
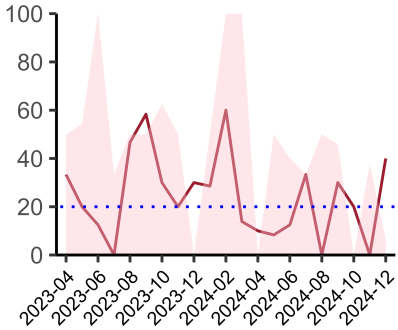
National mean 12%
Number of patients included 309
Data completeness 100%



Proportion of patients with suspected sepsis or infection that have antibiotic administration within the correct clinical timeframe
01 October 2024 - 31 December 2024

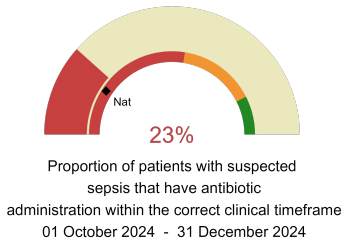
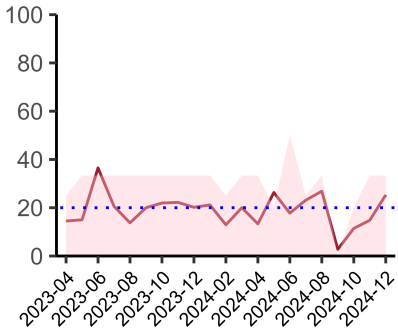
Combined Infection management standard - antibiotic administration within the correct clinical timeframe

National mean 22%
Number of patients included 164
Data completeness 89%



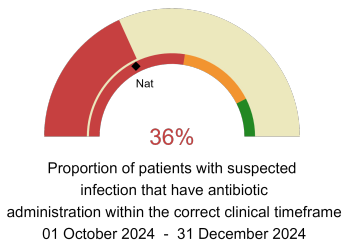
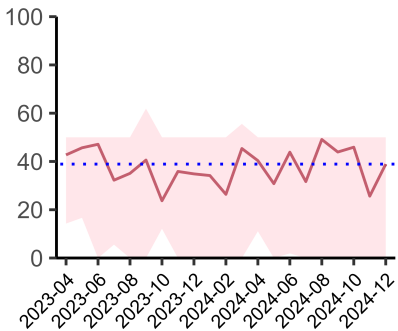
Septic Shock - antibiotic administration within the correct clinical timeframe

National mean 21%
Number of patients included 19
Data completeness 68%



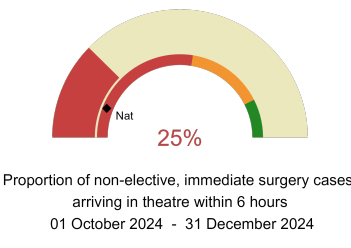
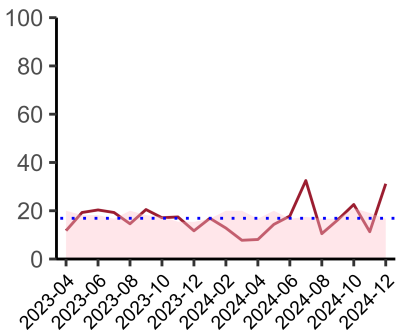
Sepsis - antibiotic administration within the correct clinical timeframe

National mean 19%
Number of patients included 75
Data completeness 83%



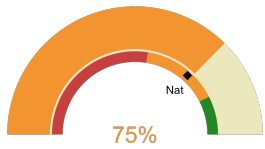
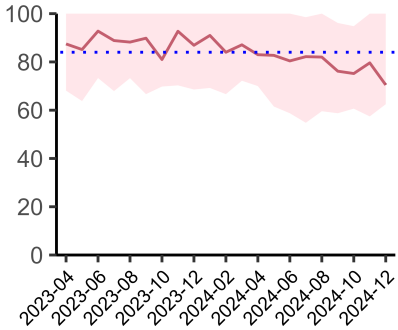
Infection - antibiotic administration within the correct clinical timeframe

National mean 35%
Number of patients included 136
Data completeness 88%



Timeliness - proportion of patients arriving in theatre according to correct clinical timeframe.

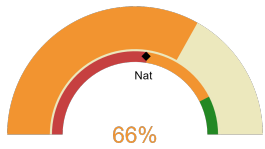
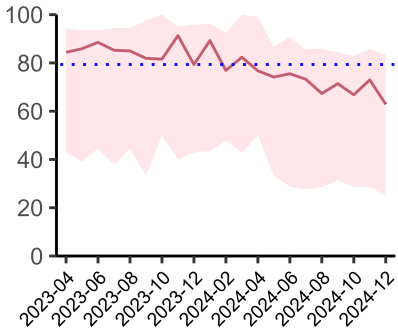
National mean 12%
Number of patients included 225
Data completeness 100%



Risk of death documented before surgery
01 October 2024 - 31 December 2024

Risk documented before surgery

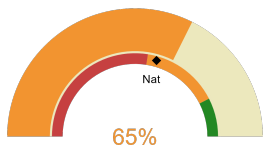
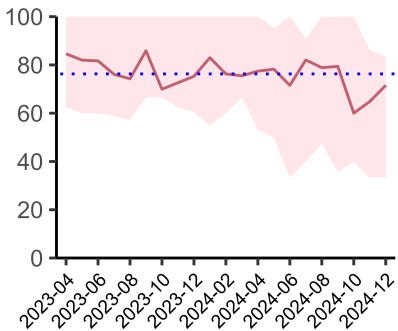
National mean 73%
Number of patients included 466
Data completeness 100%



Risk of death documented after surgery
01 October 2024 - 31 December 2024

Risk documented after surgery

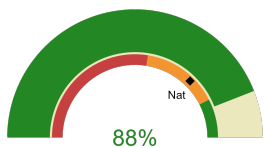
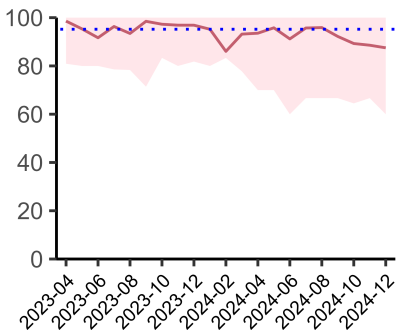
National mean 55%
Number of patients included 466
Data completeness 100%



Admitted to critical care following surgery when the risk of death \geq 5% (Excludes patients who died in theatre or with a decision to palliate)
01 October 2024 - 31 December 2024

Admitted to Critical Care (risk of death \geq 5%)

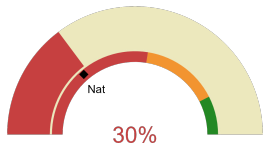
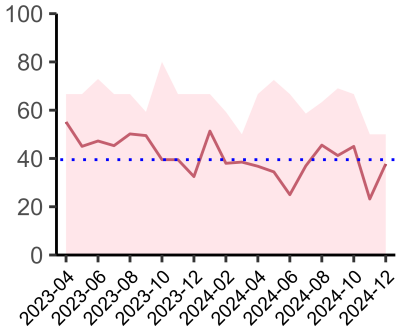
National mean 59%
Number of patients included 294
Data completeness 100%



Consultant surgeon and anaesthetist present in theatre when risk of death \geq 5%
01 October 2024 - 31 December 2024

Consultant Anaesthetist & Consultant Surgeon in theatre (risk of death \geq 5%)

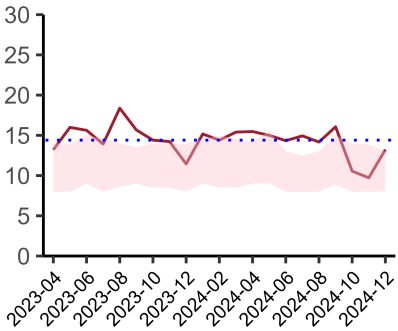
National mean 75%
Number of patients included 403
Data completeness 99%



Perioperative assessment by a care of the older person specialist
01 October 2024 - 31 December 2024

Perioperative Assessment by a member of the geriatrician-led multidisciplinary team for patient aged 65 or over and frail (CFS ≥ 5) or 80+

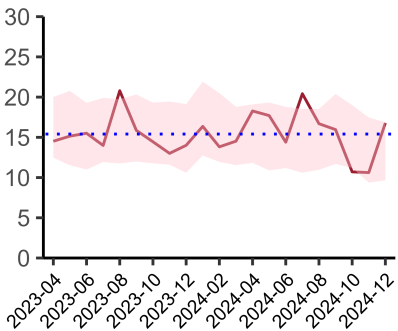
National mean 27%
Number of patients included 128
Data completeness 82%



Median postoperative length of stay in patients surviving to discharge (crude value, not risk adjusted)
01 October 2024 - 31 December 2024

Median postoperative Length of Stay

National median 10 days
Number of patients included 334
Data completeness 100%



Mean postoperative length of stay in patients surviving to discharge (crude value, not risk adjusted)
01 October 2024 - 31 December 2024

Mean postoperative Length of Stay

National mean 14 days
Number of patients included 334
Data completeness 100%

Integrated Care Board

NHS North East And North Cumbria Integrated Care Board ICB comprises Queen Elizabeth Hospital - Gateshead, The James Cook University Hospital, South Tyneside District Hospital, Royal Victoria Infirmary, Freeman Hospital, Northumbria Specialist Emergency Care Hospital, Sunderland Royal Hospital, University Hospital North Durham, Darlington Memorial Hospital, University Hospital of North Tees, Cumberland Infirmary.