

Explanatory Notes

All cases admitted to hospital between 01 April 2025 and 30 June 2025 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'.

For this report runcharts are compared to national quartiles.

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

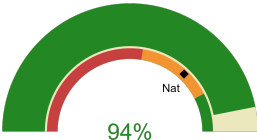


NHS North East And North Cumbria Integrated Care Board

2025-26 Reporting Period 3: 01 April 2025 - 30 June 2025

These plots represent patients having an emergency laparotomy during Year 2025-26 Reporting Period 3 of NELA data collection.

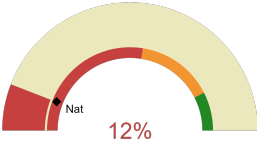
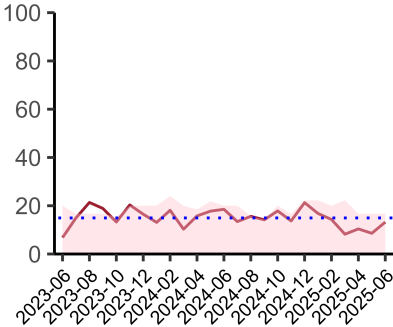
NELA process and outcome measures



Estimated case ascertainment
01 April 2025 - 30 June 2025

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

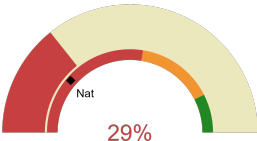
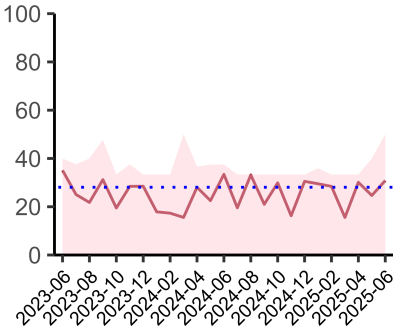
Expected number of cases 438
Total cases entered 465
Cases locked 354
Cases unlocked 111



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 April 2025 - 30 June 2025

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

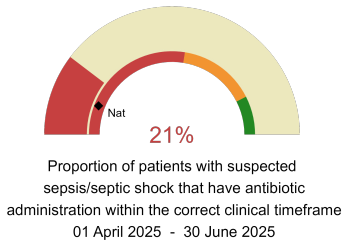
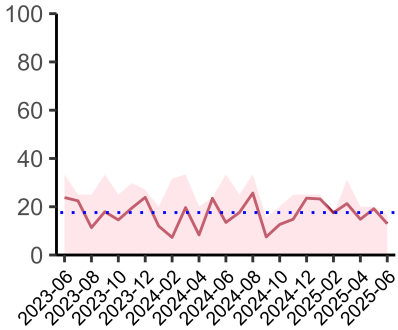
National mean 12%
Number of patients included 301
Data completeness 98%



Proportion of patients with suspected sepsis/septic shock or infection that have antibiotic administration within the correct clinical timeframe
01 April 2025 - 30 June 2025

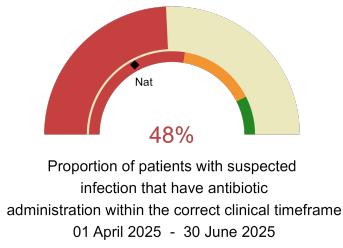
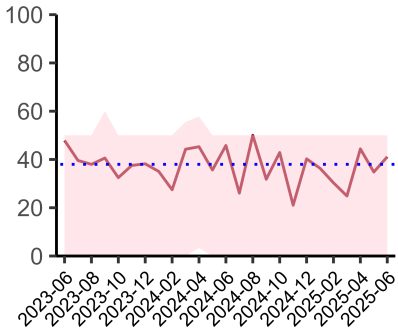
Combined Infection management standard - antibiotic administration within the correct clinical timeframe

National mean 23%
Number of patients included 167
Data completeness 87%



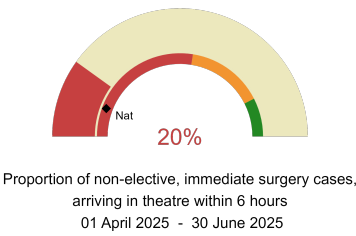
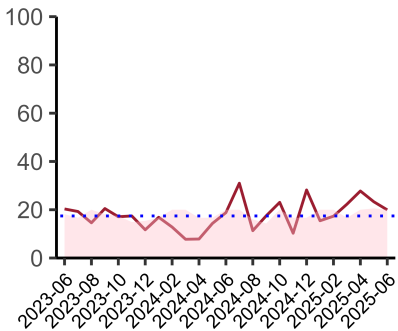
Sepsis/septic shock - antibiotic administration within the correct clinical timeframe

National mean 12%
Number of patients included 78
Data completeness 84%



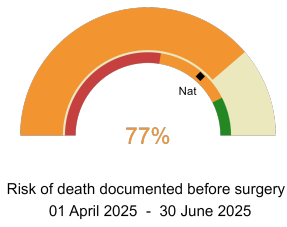
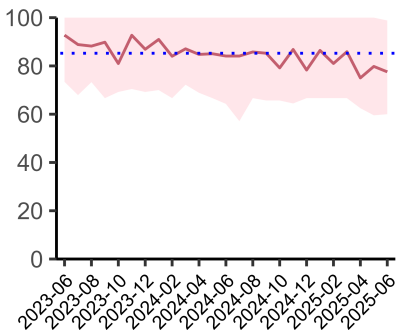
Infection - antibiotic administration within the correct clinical timeframe

National mean 34%
Number of patients included 89
Data completeness 45%



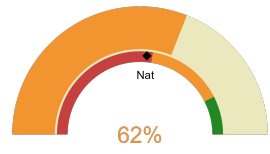
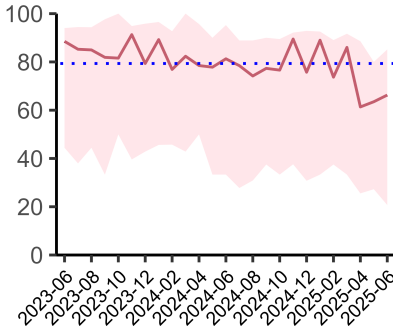
Timeliness - proportion of patients arriving in theatre according to correct clinical timeframe.

National mean 12%
Number of patients included 220
Data completeness 100%



Risk documented before surgery

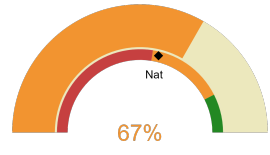
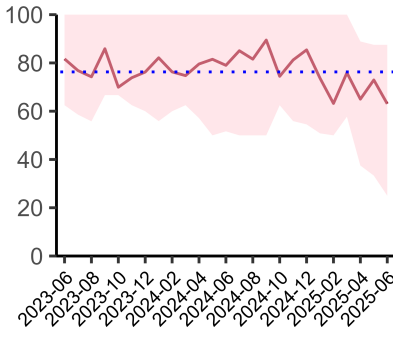
National mean 73%
Number of patients included 465
Data completeness 100%



Risk of death documented after surgery
01 April 2025 - 30 June 2025

Risk documented after surgery

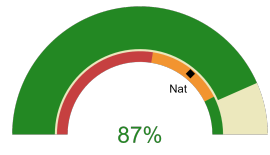
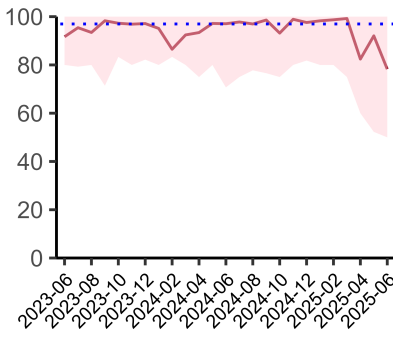
National mean 53%
Number of patients included 465
Data completeness 100%



Admitted to critical care following surgery when the risk of death ≥ 5% (Excludes patients who died in theatre or with a decision to palliate)
01 April 2025 - 30 June 2025

Admitted to Critical Care (risk of death ≥ 5%)

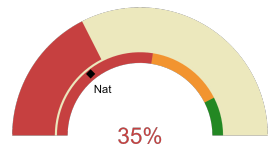
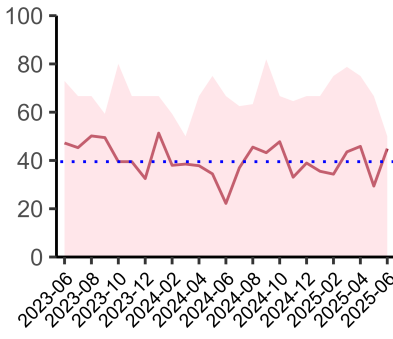
National mean 58%
Number of patients included 260
Data completeness 100%



Consultant surgeon and anaesthetist present in theatre when risk of death ≥ 5%
01 April 2025 - 30 June 2025

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

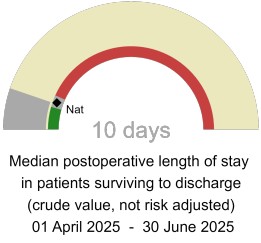
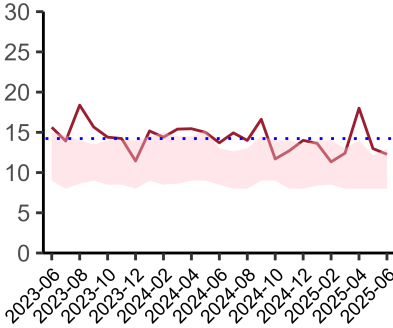
National mean 72%
Number of patients included 255
Data completeness 82%



Perioperative assessment by a care of the older person specialist
01 April 2025 - 30 June 2025

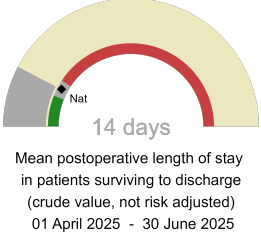
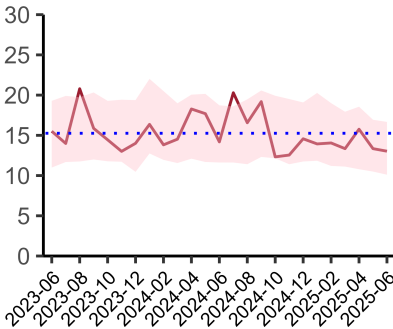
Perioperative Assessment by a member of the geriatrician-led multidisciplinary team for patient aged 65 or over and frail (CFS ≥ 5) or 80+

National mean 28%
Number of patients included 123
Data completeness 93%



Median postoperative Length of Stay

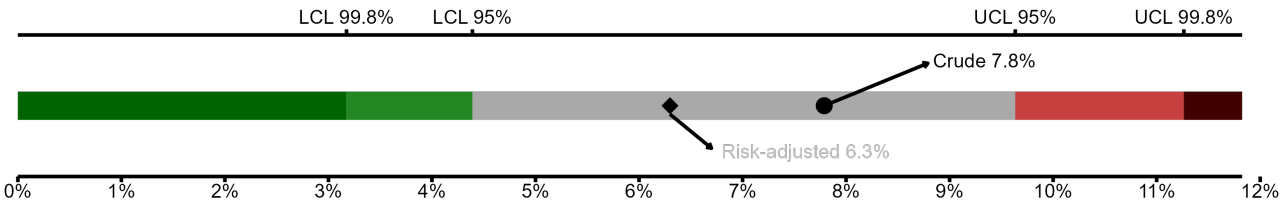
National median 10 days
Number of patients included 365
Data completeness 100%



Mean postoperative Length of Stay

National mean 14 days
Number of patients included 365
Data completeness 100%

Risk-Adjusted Mortality



Number of patients included 398 | 30-day risk-adjusted mortality rate 6.3% | National 30-day mortality rate 6.9%

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.