

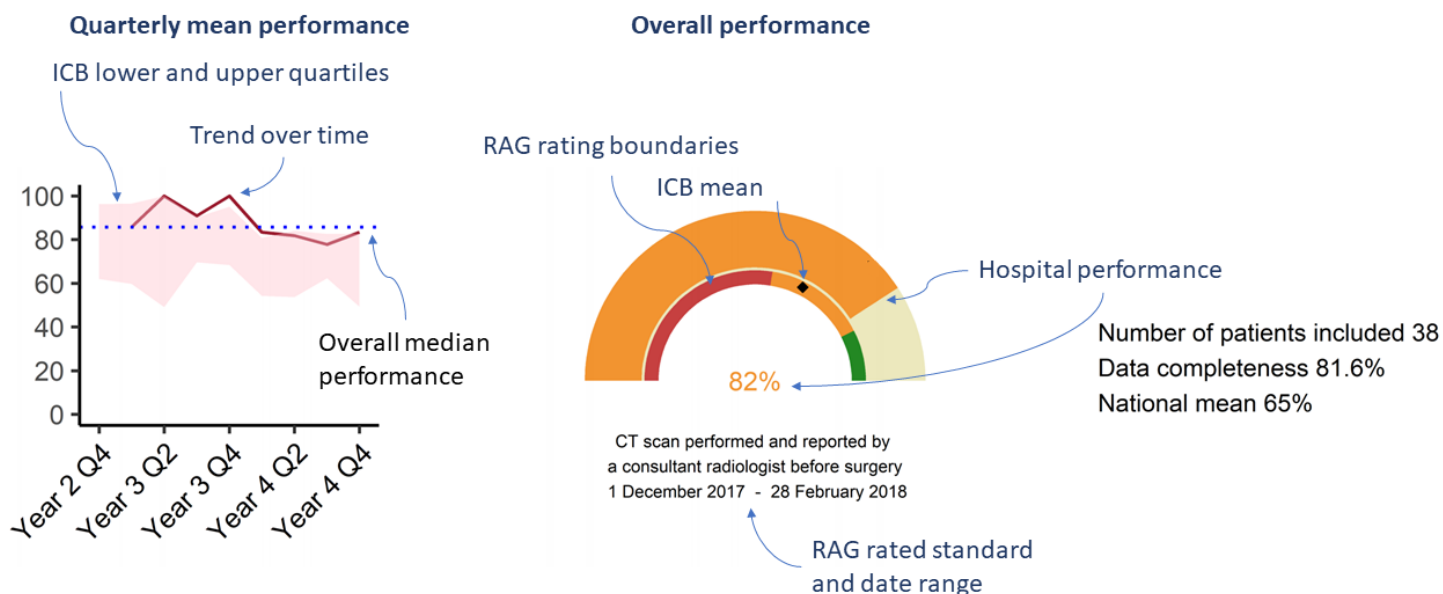
Explanatory Notes

All cases admitted to hospital between 01 March 2026 and 31 May 2026 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**.

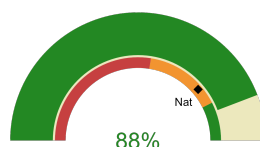


NHS North East And North Cumbria Integrated Care Board

2026-27 Reporting Period 2: 01 March 2026 - 31 May 2026

These plots represent patients having an emergency laparotomy during Year 2026-27 Reporting Period 2 of NELA data collection.

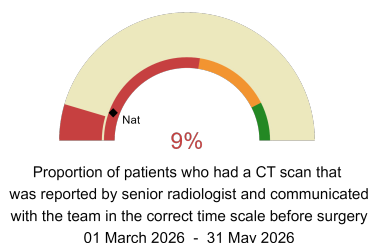
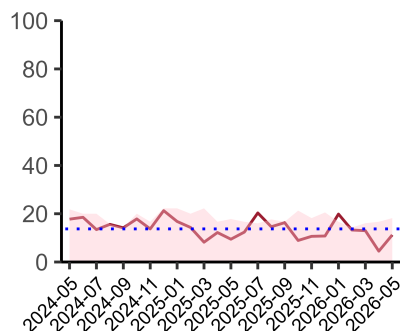
NELA process and outcome measures



Estimated case ascertainment
01 March 2026 - 31 May 2026

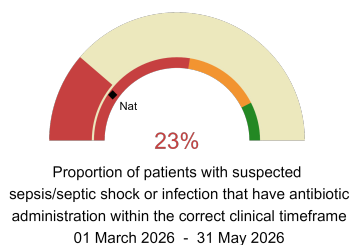
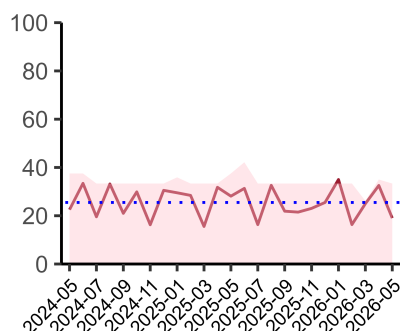
Estimated Case Ascertainment (Based on HES Data)

Expected number of cases 436
Total cases entered 435
Cases locked 254
Cases unlocked 181



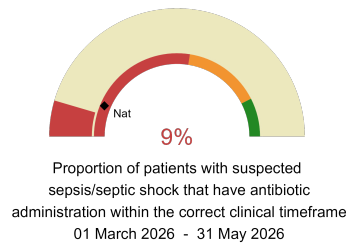
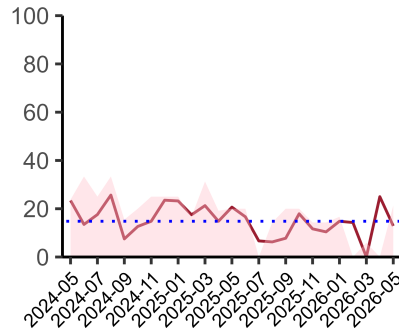
CT reported by a senior radiologist (ST3+) and communicated with the team in the correct time scale before surgery.

National mean 11%
Number of patients included 275
Data completeness 95%



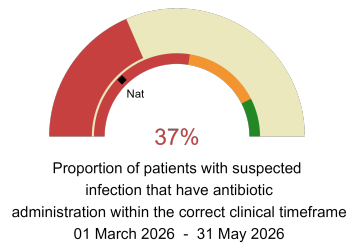
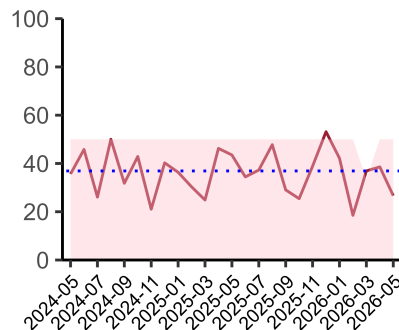
Combined Infection management standard - antibiotic administration within the correct clinical timeframe

National mean 20%
Number of patients included 110
Data completeness 75%



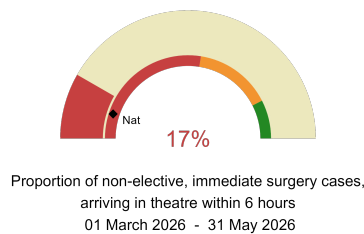
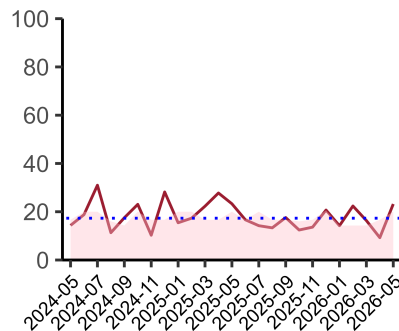
Sepsis/septic shock - antibiotic administration within the correct clinical timeframe

National mean 13%
Number of patients included 52
Data completeness 65%



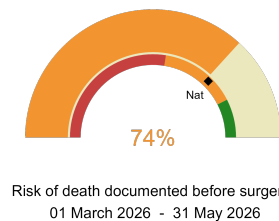
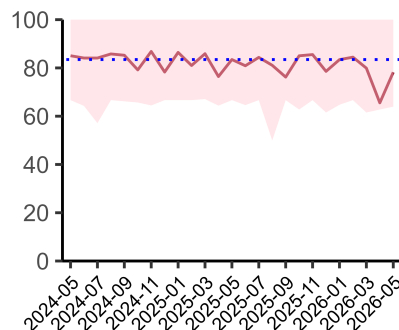
Infection - antibiotic administration within the correct clinical timeframe

National mean 25%
Number of patients included 58
Data completeness 33%



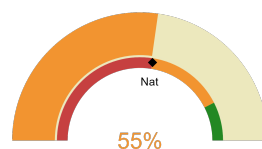
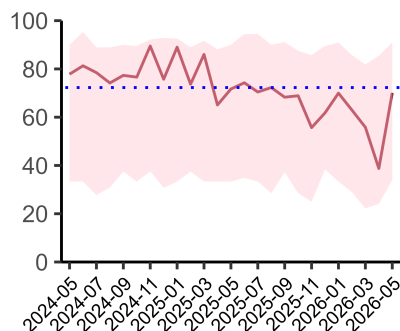
Timeliness - proportion of patients arriving in theatre according to correct clinical timeframe.

National mean 10%
Number of patients included 212
Data completeness 100%



Risk documented before surgery

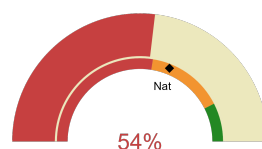
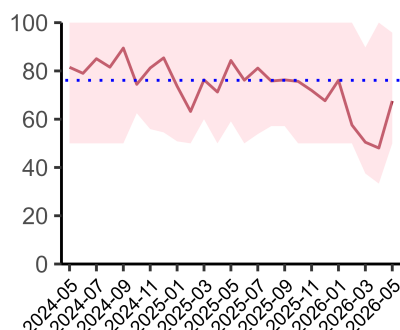
National mean 75%
Number of patients included 435
Data completeness 100%



Risk of death documented after surgery
01 March 2026 - 31 May 2026

Risk documented after surgery

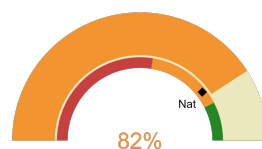
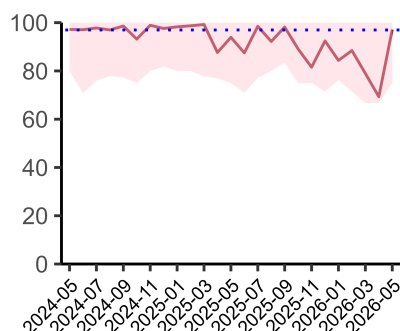
National mean 55%
Number of patients included 435
Data completeness 100%



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 March 2026 - 31 May 2026

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

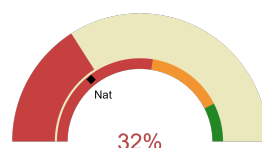
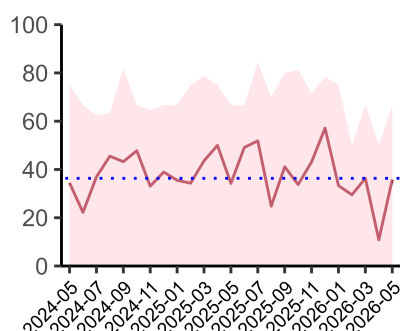
National mean 62%
Number of patients included 251
Data completeness 100%



Consultant surgeon and anaesthetist present in
theatre when risk of death $\geq 5\%$
01 March 2026 - 31 May 2026

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

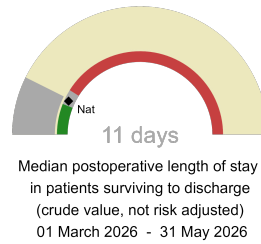
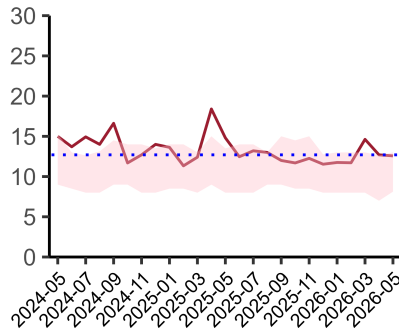
National mean 79%
Number of patients included 225
Data completeness 80%



Perioperative assessment by a member of the geriatrician-
led multidisciplinary team
01 March 2026 - 31 May 2026

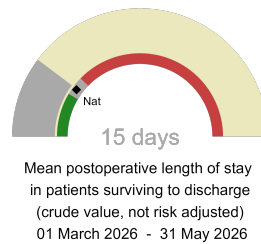
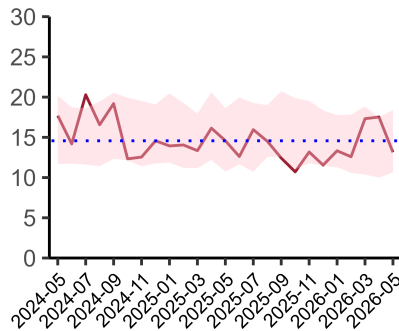
Perioperative Assessment by a member of the geriatrician- led multidisciplinary team for patient aged 65 or over and frail (CFS ≥ 5) or 80+

National mean 29%
Number of patients included 95
Data completeness 74%



Median postoperative Length of Stay

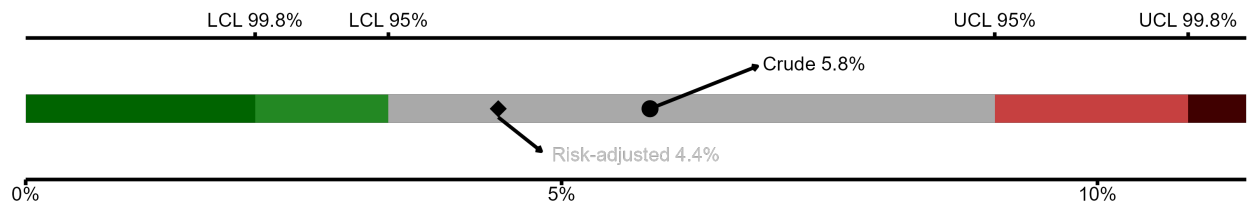
National median 10 days
Number of patients included 290
Data completeness 95%



Mean postoperative Length of Stay

National mean 15 days
Number of patients included 290
Data completeness 95%

Risk-Adjusted Mortality



Number of patients included 309 | 30-day risk-adjusted mortality rate 4.4% | National 30-day mortality rate 6.1%

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.