

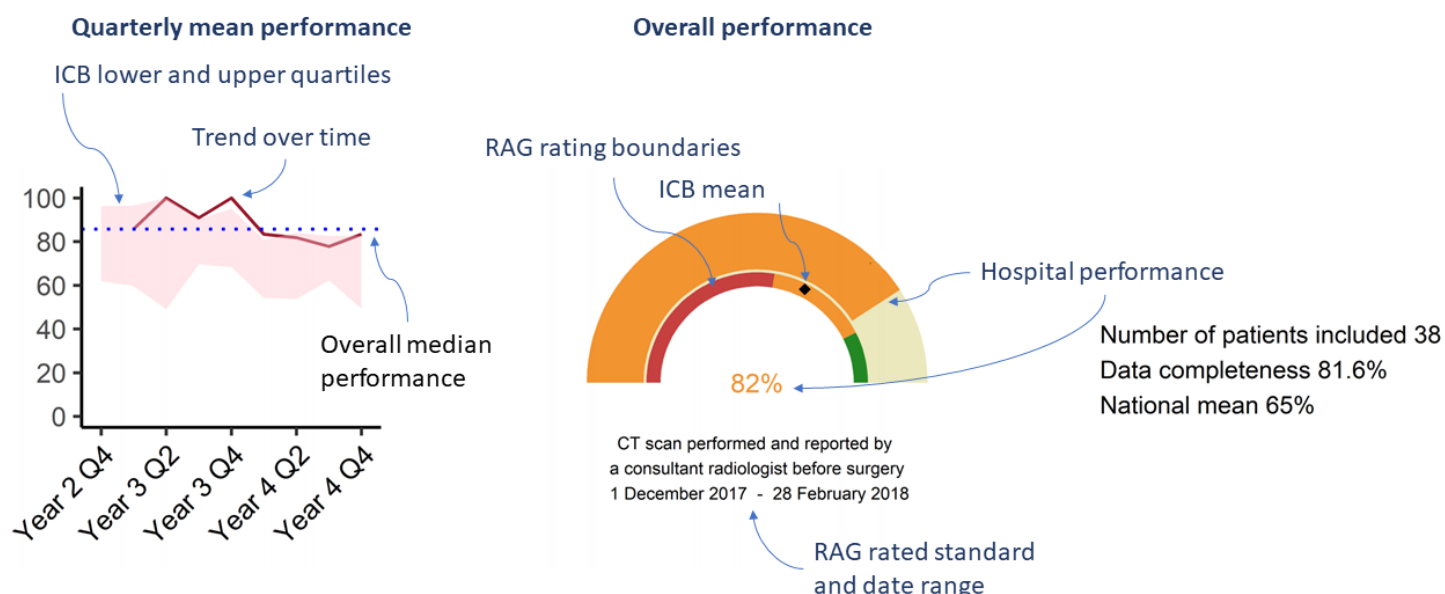
Explanatory Notes

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

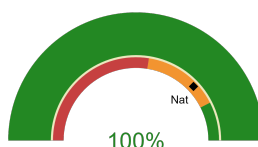


NHS Nottingham And Nottinghamshire Integrated Care Board

2026-27 Reporting Period 4: 01 May 2026 - 31 July 2026

These plots represent patients having an emergency laparotomy during Year 2026-27 Reporting Period 4 of NELA data collection.

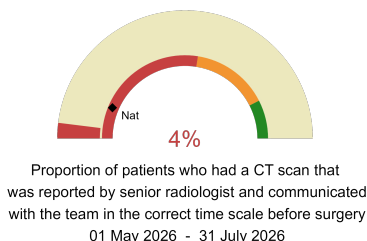
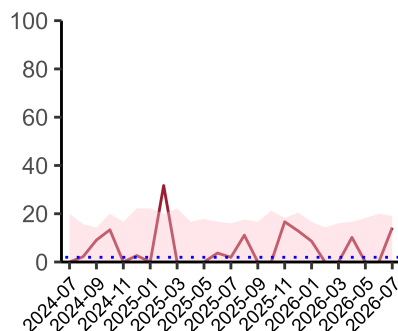
NELA process and outcome measures



Estimated case ascertainment
01 May 2026 - 31 July 2026

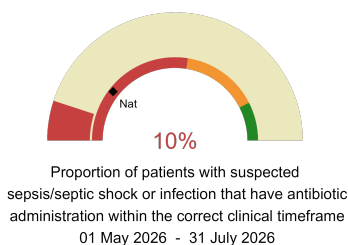
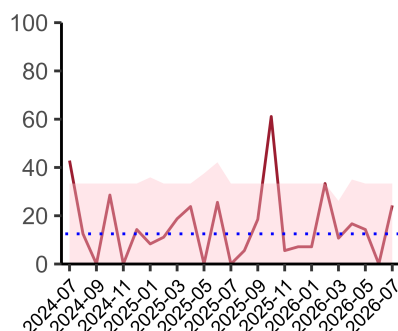
Estimated Case Ascertainment (Based on HES Data)

Expected number of cases 104
Total cases entered 139
Cases locked 32
Cases unlocked 107



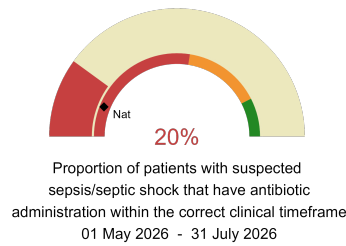
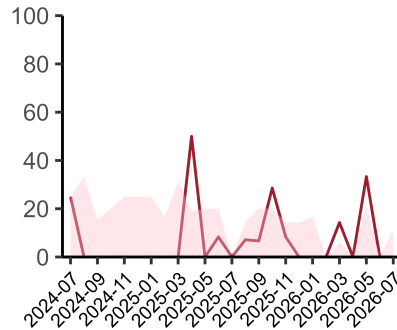
CT reported by a senior radiologist (ST3+) and communicated with the team in the correct time scale before surgery.

National mean 13%
Number of patients included 110
Data completeness 96%



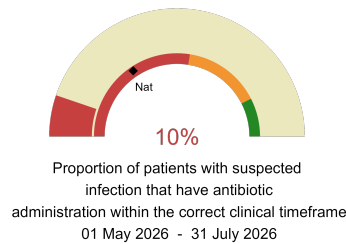
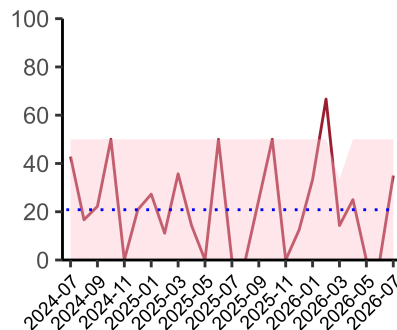
Combined Infection management standard - antibiotic administration within the correct clinical timeframe

National mean 21%
Number of patients included 42
Data completeness 68%



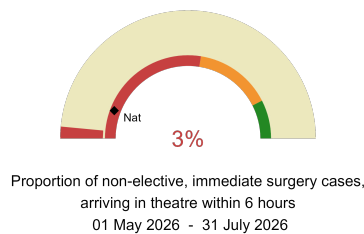
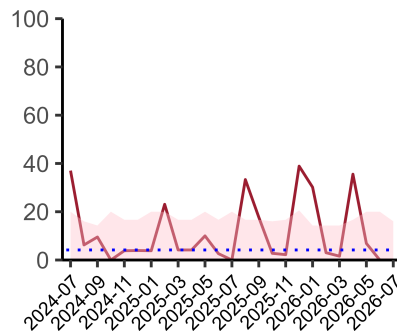
Sepsis/septic shock - antibiotic administration within the correct clinical timeframe

National mean 12%
Number of patients included 21
Data completeness 50%



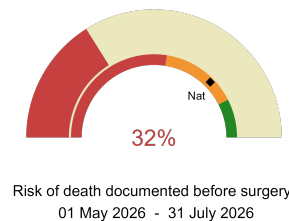
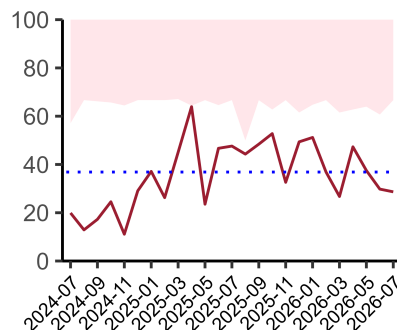
Infection - antibiotic administration within the correct clinical timeframe

National mean 31%
Number of patients included 21
Data completeness 40%



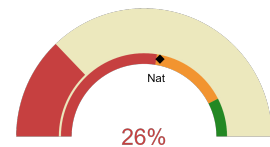
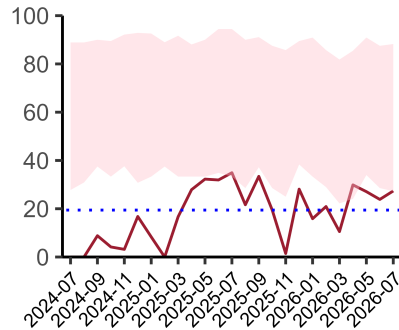
Timeliness - proportion of patients arriving in theatre according to correct clinical timeframe.

National mean 11%
Number of patients included 76
Data completeness 100%



Risk documented before surgery

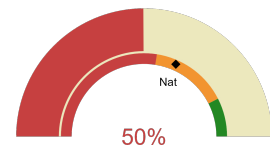
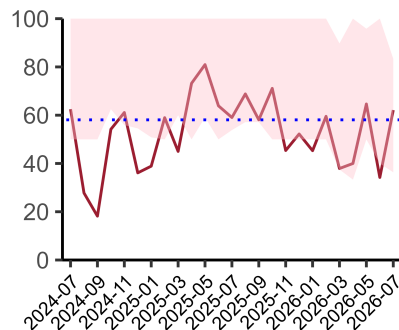
National mean 75%
Number of patients included 139
Data completeness 100%



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

Risk documented after surgery

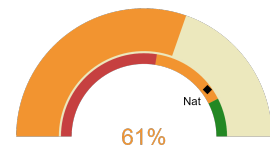
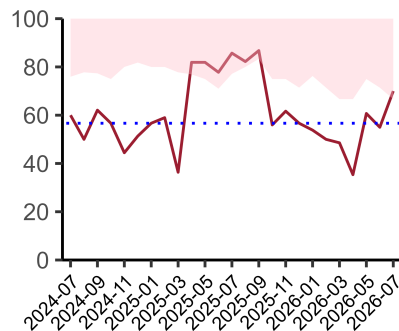
National mean 56%
Number of patients included 139
Data completeness 100%



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 May 2026 - 31 July 2026

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

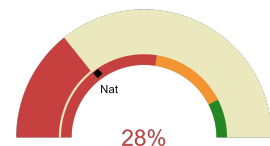
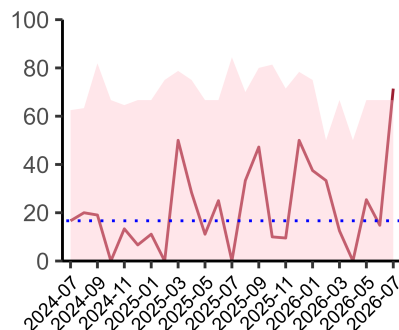
National mean 63%
Number of patients included 87
Data completeness 100%



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

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

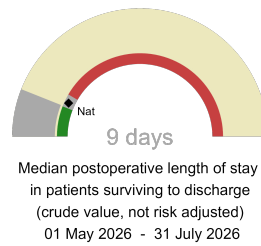
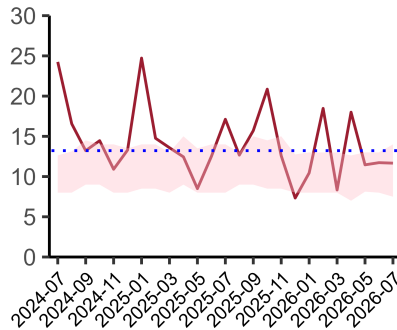
National mean 80%
Number of patients included 88
Data completeness 76%



Perioperative assessment by a care of the older
person specialist
01 May 2026 - 31 July 2026

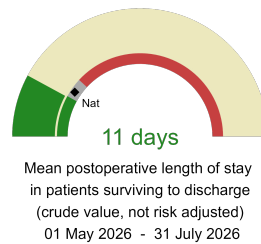
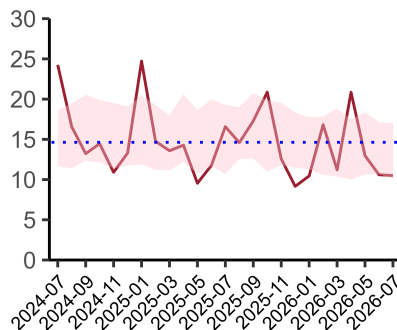
Perioperative Assessment by a member of the geriatrician- led multidisciplinary team for patient aged 65 or over and frail (CFS ≥ 5) or 80+

National mean 30%
Number of patients included 39
Data completeness 81%



Median postoperative Length of Stay

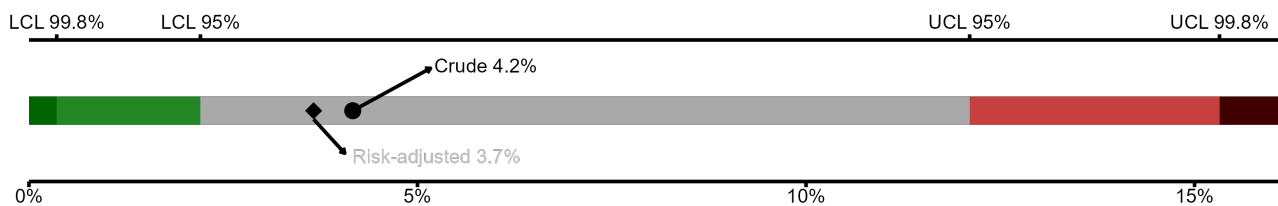
National median 10 days
Number of patients included 115
Data completeness 96%



Mean postoperative Length of Stay

National mean 14 days
Number of patients included 115
Data completeness 96%

Risk-Adjusted Mortality



Number of patients included 120 | 30-day risk-adjusted mortality rate 3.7% | National 30-day mortality rate 6.8%

Integrated Care Board

NHS Nottingham And Nottinghamshire Integrated Care Board ICB comprises Kings Mill Hospital, Nottingham City Hospital, Queens Medical Centre - Nottingham.