

Explanatory Notes

All cases admitted to hospital between 01 November 2024 and 31 January 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'.

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**.

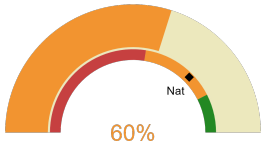


NHS Surrey Heartlands Integrated Care Board

2024-25 Reporting Period 8: 01 November 2024 - 31 January 2025

These plots represent patients having an emergency laparotomy during Year 2024-25 Reporting Period 8 of NELA data collection. This version will be made publicly available via the NELA website. Feedback from participating ICBs and hospitals is welcome.

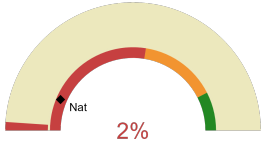
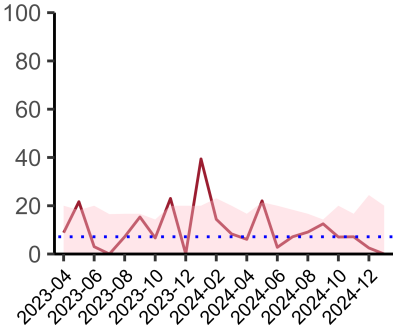
NELA process and outcome measures



Estimated case ascertainment
01 November 2024 - 31 January 2025

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

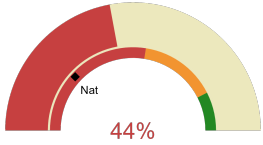
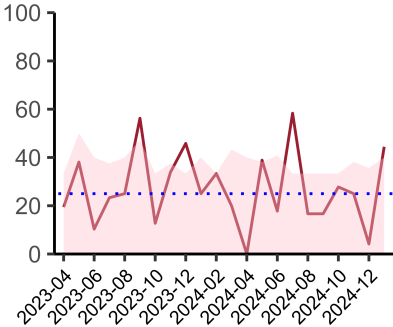
Expected number of cases 125
Total cases entered 100
Cases locked 93
Cases unlocked 7



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 November 2024 - 31 January 2025

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

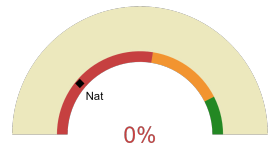
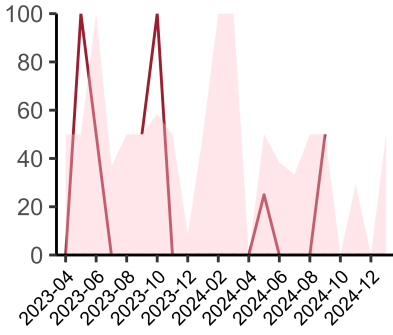
National mean 13%
Number of patients included 73
Data completeness 100%



Proportion of patients with suspected sepsis or infection that have antibiotic administration within the correct clinical timeframe
01 November 2024 - 31 January 2025

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

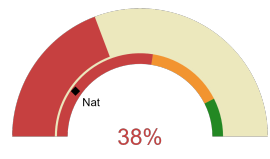
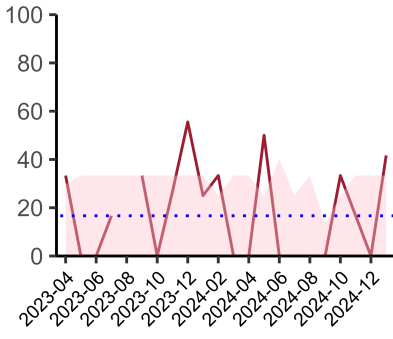
National mean 24%
Number of patients included 35
Data completeness 97%



Proportion of patients with suspected septic shock that have antibiotic administration within the correct clinical timeframe
01 November 2024 - 31 January 2025

Septic Shock - antibiotic administration within the correct clinical timeframe

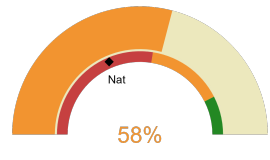
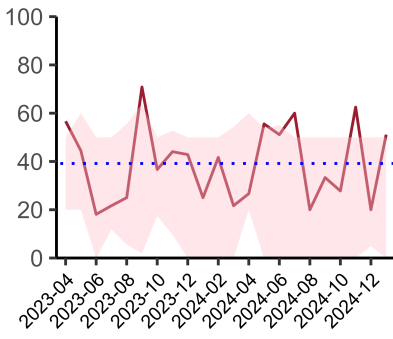
National mean 22%
Number of patients included 13
Data completeness 88%



Proportion of patients with suspected sepsis that have antibiotic administration within the correct clinical timeframe
01 November 2024 - 31 January 2025

Sepsis - antibiotic administration within the correct clinical timeframe

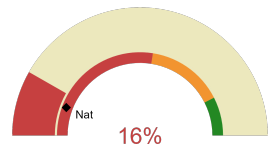
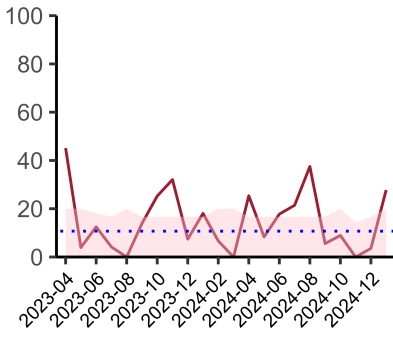
National mean 19%
Number of patients included 18
Data completeness 94%



Proportion of patients with suspected infection that have antibiotic administration within the correct clinical timeframe
01 November 2024 - 31 January 2025

Infection - antibiotic administration within the correct clinical timeframe

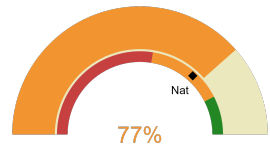
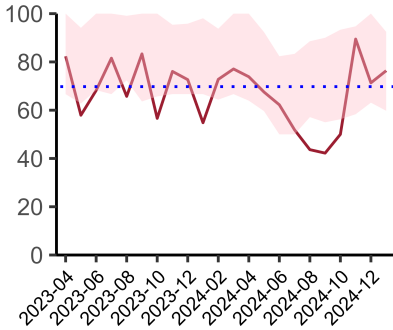
National mean 37%
Number of patients included 28
Data completeness 95%



Proportion of non-elective, immediate surgery cases, arriving in theatre within 6 hours
01 November 2024 - 31 January 2025

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

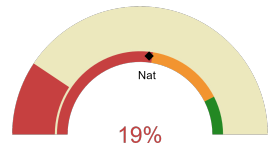
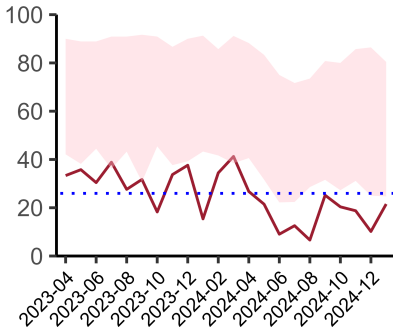
National mean 12%
Number of patients included 48
Data completeness 100%



Risk of death documented before surgery
01 November 2024 - 31 January 2025

Risk documented before surgery

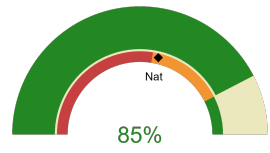
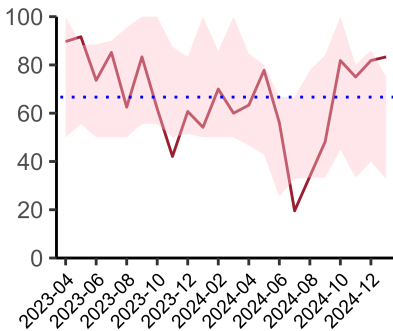
National mean 73%
Number of patients included 100
Data completeness 100%



Risk of death documented after surgery
01 November 2024 - 31 January 2025

Risk documented after surgery

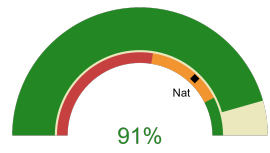
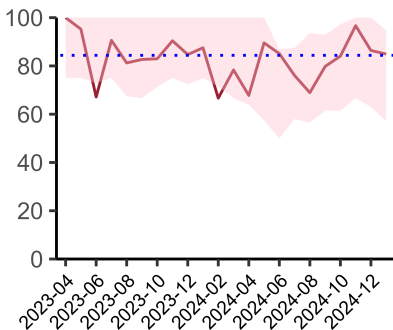
National mean 54%
Number of patients included 100
Data completeness 100%



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 November 2024 - 31 January 2025

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

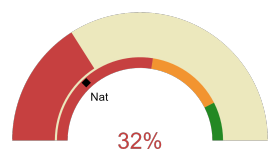
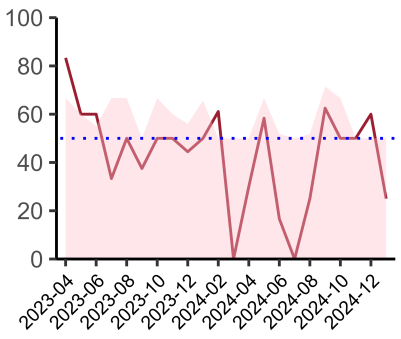
National mean 57%
Number of patients included 56
Data completeness 100%



Consultant surgeon and anaesthetist present in theatre when risk of death ≥ 5%
01 November 2024 - 31 January 2025

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

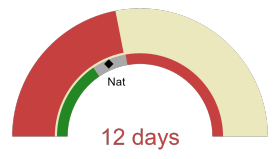
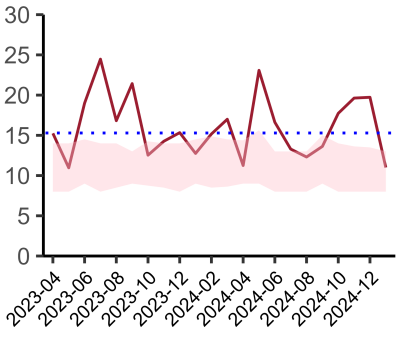
National mean 74%
Number of patients included 83
Data completeness 91%



Perioperative assessment by a care of the older person specialist
01 November 2024 - 31 January 2025

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

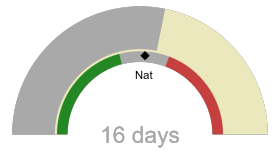
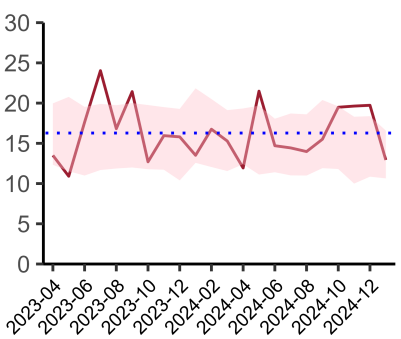
National mean 26%
Number of patients included 28
Data completeness 96%



Median postoperative length of stay in patients surviving to discharge (crude value, not risk adjusted)
01 November 2024 - 31 January 2025

Median postoperative Length of Stay

National median 10 days
Number of patients included 87
Data completeness 99%



Mean postoperative length of stay in patients surviving to discharge (crude value, not risk adjusted)
01 November 2024 - 31 January 2025

Mean postoperative Length of Stay

National mean 14 days
Number of patients included 87
Data completeness 99%

Integrated Care Board

NHS Surrey Heartlands Integrated Care Board ICB comprises St Peter’s Hospital, East Surrey Hospital, Royal Surrey County Hospital.