

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**.

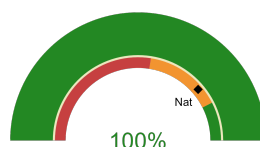


NHS Staffordshire And Stoke-On-Trent Integrated Care Board

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.

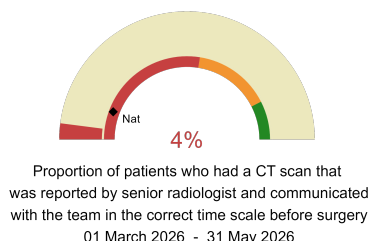
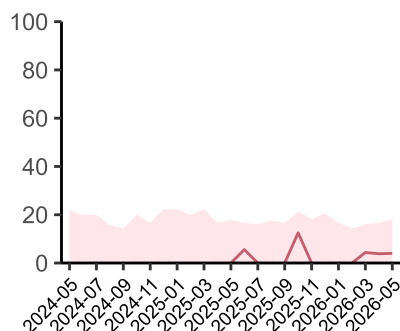
NELA process and outcome measures



Estimated case ascertainment
01 March 2026 - 31 May 2026

Estimated Case Ascertainment (Based on HES Data)

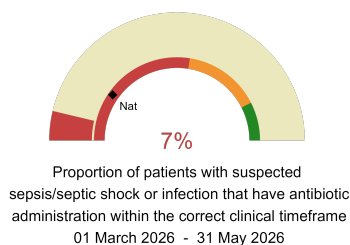
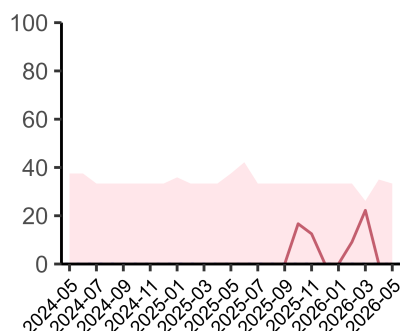
Expected number of cases 57
Total cases entered 116
Cases locked 116
Cases unlocked 0



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 March 2026 - 31 May 2026

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

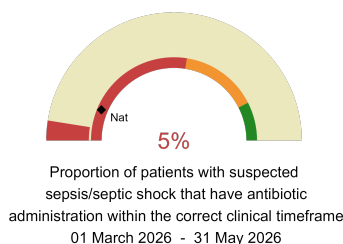
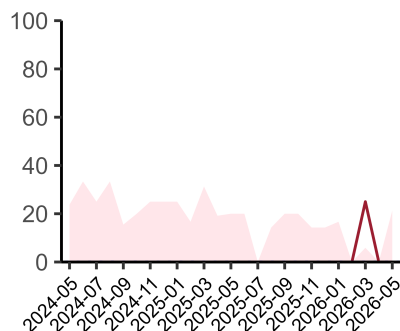
National mean 11%
Number of patients included 74
Data completeness 99%



Proportion of patients with suspected
sepsis/septic shock or infection that have antibiotic
administration within the correct clinical timeframe
01 March 2026 - 31 May 2026

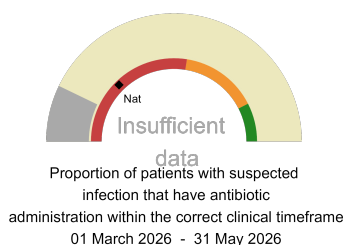
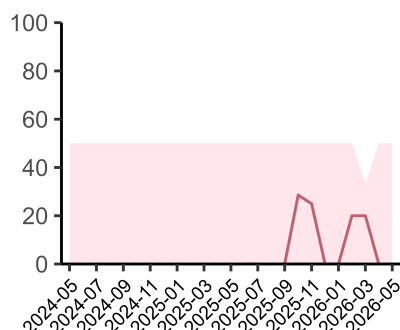
Combined Infection management standard - antibiotic administration within the correct clinical timeframe

National mean 20%
Number of patients included 27
Data completeness 100%



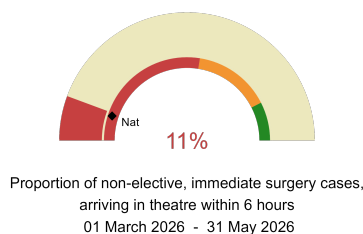
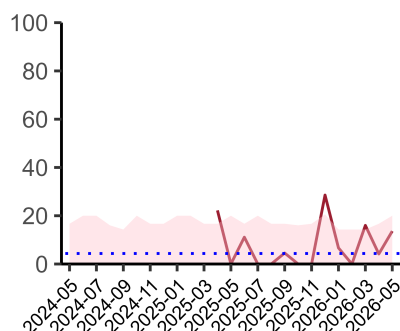
Sepsis/septic shock - antibiotic administration within the correct clinical timeframe

National mean 13%
Number of patients included 20
Data completeness 100%



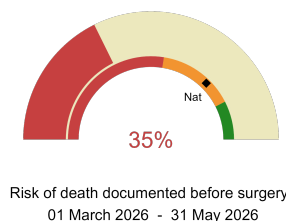
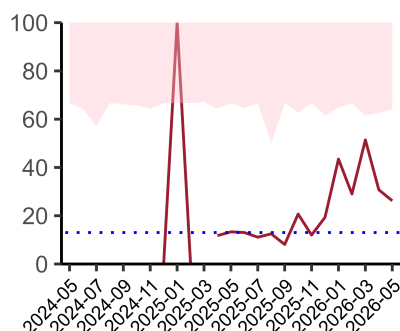
Infection - antibiotic administration within the correct clinical timeframe

National mean 25%
Number of patients included 7
Data completeness 26%



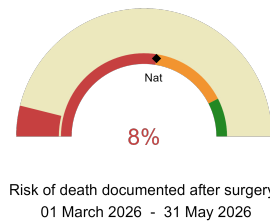
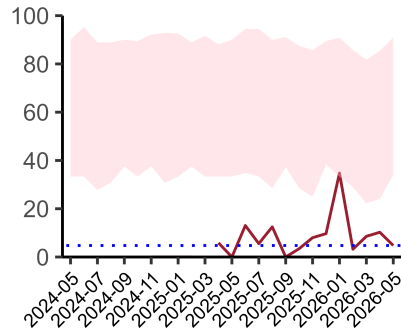
Timeliness - proportion of patients arriving in theatre according to correct clinical timeframe.

National mean 10%
Number of patients included 71
Data completeness 100%



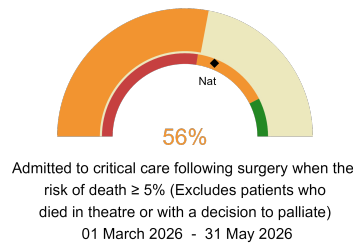
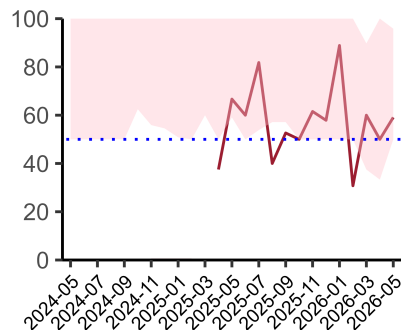
Risk documented before surgery

National mean 75%
Number of patients included 116
Data completeness 100%



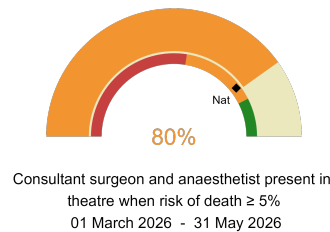
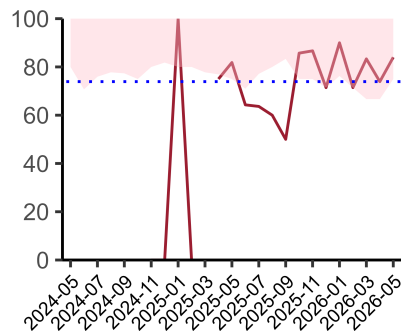
Risk documented after surgery

National mean 55%
Number of patients included 116
Data completeness 100%



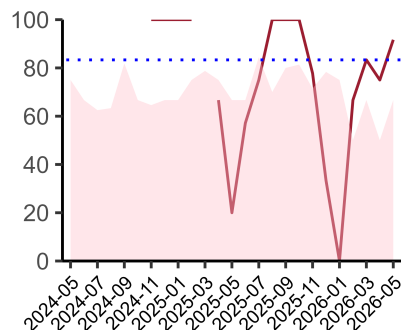
Admitted to Critical Care (risk of death $\geq 5\%$)

National mean 62%
Number of patients included 59
Data completeness 100%



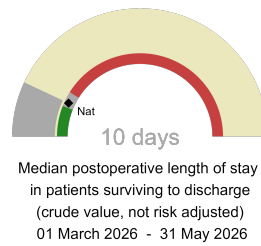
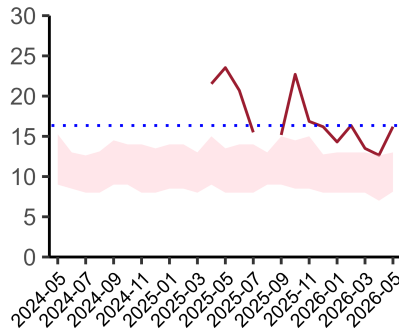
Consultant Anaesthetist & Consultant Surgeon in theatre (risk of death $\geq 5\%$)

National mean 79%
Number of patients included 66
Data completeness 59%



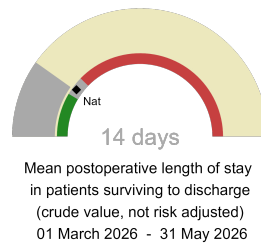
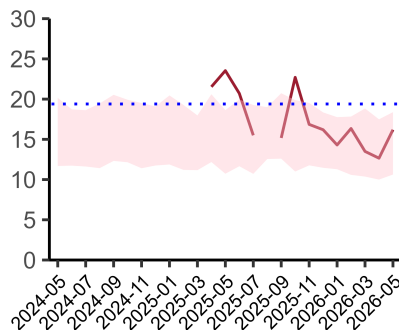
Perioperative Assessment by a member of the geriatrician- led multidisciplinary team for patient aged 65 or over and frail (CFS ≥ 5) or 80+

National mean 29%
Number of patients included 26
Data completeness 100%



Median postoperative Length of Stay

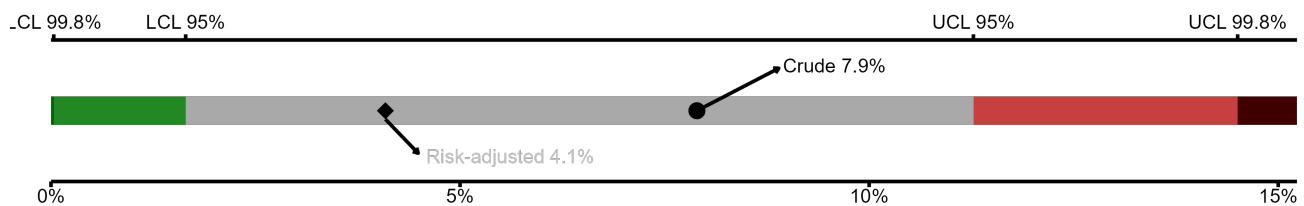
National median 10 days
Number of patients included 105
Data completeness 98%



Mean postoperative Length of Stay

National mean 15 days
Number of patients included 105
Data completeness 98%

Risk-Adjusted Mortality



Number of patients included 114 | 30-day risk-adjusted mortality rate 4.1% | National 30-day mortality rate 6.1%

Integrated Care Board

NHS Staffordshire And Stoke-On-Trent Integrated Care Board ICB comprises Royal Stoke University Hospital.