

National Impact of the National Emergency Laparotomy Audit (NELA)

NELA aims to enable the improvement of the quality of care for patients undergoing emergency laparotomy through the provision of high quality comparative data from all providers of emergency laparotomy in England and Wales. To do this, NELA continuously audits care against a set of key standards, including outcome measures, processes of care, and timeliness of care. Audit results are published in quarterly and annual reports. NELA have recently published their seventh annual report.

To improve quality, NELA have:

- Appointed a quality improvement (QI) clinical lead to lead on QI initiatives within the audit
- Refined the real-time data outputs and displays available on web-based QI dashboards to support local quality improvement and quality governance
- Refined the dataset based on stakeholder feedback to promote improvement in priority areas, including sepsis and care of the elderly
- Highlighted data-driven quality improvement opportunities in annual reports
- Implemented a programme of national QI webinars, each with at least 75 attendees
- Collaborated with other regulators and national improvement initiatives, including CQC, GIRFT, AHSNs, and others, to ensure that NELA data is available to a wide range of stakeholders and decision makers

Impact on Outcome Measures since Year 1 (2013/14) of NELA:



30-day mortality decreased from 11.8% to 8.7%



Decrease in average length of stay by **4 days** (19.2 to 15.1 days)

Impact on Processes of Care since Year 4* (2016/17) of NELA:

Year 4

Now

Documented pre-operative risk

75.4%

85%

Consultant surgeon AND consultant anaesthetist present in theatre for high risk cases

82.3%

90.1%

Post-operative critical care provision for high risk cases

80.1%

82.3%

NELA has resulted in improved care for emergency laparotomy patients as highlighted above. Due in part to the QI initiatives NELA have implemented, noted above, fewer patients have died following surgery and patients spend less time in hospital. Looking forward, NELA aims to drive improvement in areas that have been more challenging to improve, such as reducing variation in processes of care and outcomes in different hospitals, management of infection, and the provision of multidisciplinary care for frail elderly patients who have undergone emergency laparotomy.

*Year 4 selected for comparison due to differences in question composition in earlier years limiting direct comparison