Emergency Laparotomy Programme (ELP)

What is the innovation?
Bringing together emergency surgery teams from local hospitals to improve patient outcomes after emergency abdominal (laparotomy) surgery through sharing best practice and quality improvement methodology.

Why are we doing it?
Building on the success of the original collaborative that reduced patient mortality rates by 11%, and hospital stays by an average of 1.3 days to target quality improvement projects at individual acute hospitals.

88%
Wessex hospitals collaborating as part of the Emergency Laparotomy Programme aimed at reducing length of stay and mortality after emergency laparotomy.

- 8 out of 9 acute hospitals in Wessex signed up to participate in new Emergency Laparotomy Programme.
- Wessex-wide ideal patient pathway for Emergency Laparotomy agreed.
- Recruitment of clinical lead for programme.
- 50% improvement in number of trusts submitting regular, high quality data on emergency laparotomy to National Emergency laparotomy Audit (NELA).
- 8 acute hospitals have agreed quality improvement pledges.
- First Emergency Laparotomy Programme meeting attended by over 20 delegates from Wessex acute hospitals.

@WessexAHSN
wessexahsn.org.uk
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Plans for 2019-20:

- Provide individual hospital-level quality improvement support by programme team at AHSN
- Facilitate quarterly Emergency Laparotomy Programme meetings focused on improving data collection and quality, quality improvement projects focusing on reducing length of stay and mortality as well as peer support and networking opportunities
- Lead on project with selected acute hospitals to embed the Enhanced Recovery principles of Eat, Drink and Move into recovery from emergency surgery
- Aim to support all hospitals to:
  - regularly submit data to NELA
  - successfully implement the Best Practice Tariff for emergency laparotomy
  - work individually on appropriate quality improvement projects

Want to find out more?
@ELCSavingLives
emergencylaparotomy.org.uk