Service Profiles

Nicky Coombes

SSCRG Programme manager

Profiles - Rationale

- **Service profiles:**
  - Benchmark and assess
  - NHS Trust / multi-disciplinary team (MDT) based
  - Assist clinical teams to reflect on outcomes
  - Assist the commissioners of cancer services to
    - *understand the variation across the MDT's (local service) for both patient experience and patient care.*
  - Indicators included have been
    - *discussed with commissioners and MDT's as being important and form the basis for objective dialogue about clinical practice and service delivery.*

Profiles - Process

- ## Service profiles:

    - First developed for Breast and Colorectal profiles (published Dec 2011, Feb 2013, June 2013)

    - Based on latest nationally available data

        - cancer registration, CWT, NCDR, CPES, HES, Peer Review, National Audit

    - Part generic, part specialist indicators.

    - Indicators incorporate Clinical Lines of Enquiry

Profiles - structure

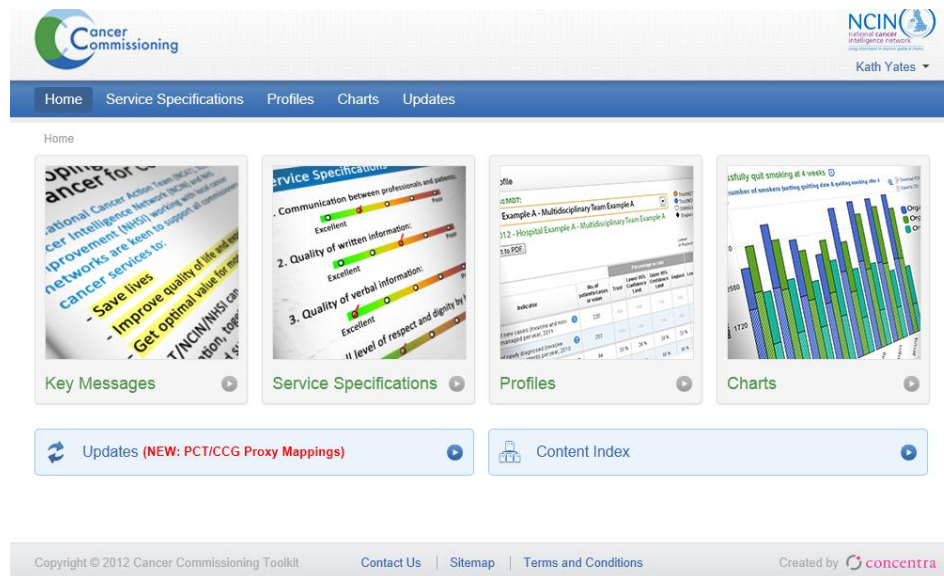NCIN / PHE KIT West Midlands team *(formally West Midlands Cancer Intelligence Unit)* co-production

Hosted in the Cancer Commissioning Toolkit –

Public view

open access

Professional view

access registration required

www.cancertoolkit.co.uk

A PERIODIC TABLE OF VISUALIZATION METHODS

Data Visualization
Visual representations of quantitative data in schematic form (either with or without axes)

Information Visualization
The use of interactive visual representations of data to amplify cognition. This means that the data is transformed into an image, it is mapped to screen space. The image can be changed by users as they proceed working with it

Concept Visualization
Methods to elaborate (mostly) qualitative concepts, ideas, plans, and analyses.

Strategy Visualization
The systematic use of complementary visual representations in the analysis, development, formulation, communication, and implementation of strategies in organizations.

Metaphor Visualization
Visual Metaphors position information graphically to organize and structure information. They also convey an insight about the represented information through the key characteristics of the metaphor that is employed

Compound Visualization
The complementary use of different graphic representation formats in one single schema or frame

																			G graphic facilitation
C continuum																			
Tb table	Ca cartesian coordinates												Me meeting trace	Mm metro map	Tm temple	St story template	Tr tree		Ct cartoon
Pi pie chart	L line chart												Co communication diagram	Fp flight plan	Cs concept sceleton	Br bridge	Fu funnel		Ri rich picture
B bar chart	Ac area chart	R radar chart cobweb	Pa parallel coordinates	Hy hyperbolic tree	Cy cycle diagram	T timeline	Ve venn diagram	Mi mindmap	Sq square of oppositions	Cc concentric circles	Ar argument slide	Sw swim lane diagram	Gc gantt chart	Pm perspectives diagram	D dilemma diagram	Pr parameter ruler	Kn knowledge map
Hi histogram	Sc scatterplot	Sa sankey diagram	In information lense	E entity relationship diagram	Pt petri net	Fl flow chart	Cl clustering	Lc layer chart	Py minto pyramid technique	Ce cause-effect chains	Tl toulmin map	Dt decision tree	Cp cpm critical path method	Cf concept fan	Co concept map	Ic iceberg	Lm learning map
Tk tukey box plot	Sp spectogram	Da data map	Tp treemap	Cn cone tree	Sy system dyn./ simulation	Df data flow diagram	Se semantic network	So soft system modeling	Sn synergy map	Fo force field diagram	Ib ibis argumentation map	Pr process event chains	Pe pert chart	Ev evocative knowledge map	V Vee diagram	Hh heaven 'n' hell chart	I infomural

Note: Depending on your location and connection speed it can take some time to load a pop-up picture.

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version 1.5

Cy Process Visualization

Hy Structure Visualization

☼ Overview

◻ Detail

◎ Detail AND Overview

< > Divergent thinking

> < Convergent thinking

Su supply demand curve	Pc performance charting	St strategy map	Oc organisation chart	Ho house of quality	Fd feedback diagram	Ft failure tree	Mq magic quadrant	Ld life-cycle diagram	Po porter's five forces	S s-cycle	Sm stakeholder map	Is ishikawa diagram	Tc technology roadmap
Ed edgeworth box	Pf portfolio diagram	Sg strategic game board	Mz mintzberg's organigraph	Z zwicky's morphological box	Ad affinity diagram	De decision discovery diagram	Bm bcg matrix	Stc strategy canvas	Vc value chain	Hy hype-cycle	Sr stakeholder rating map	Ta taps	Sd spray diagram

http://www.visual-literacy.org/periodic_table/periodic_table.html

For example...

Statistical process control

Tartan rugs

Funnel plots

Interactive dashboards

Profiles…

Section	#	Indicator	No. of patients/ cases or value	Percentage or rate				Trust rate or percentage compared to England				Source	Period
				Trust	Lower 95% confidence limit	Upper 95% confidence limit	England	Low-est	Range	High-est		
Size	1	Number of newly diagnosed lung cancer patients per year, 2010 [experimental] (1)	304				207	41		588	NCDR	2010
	2	Number of NLCA patients - lung cancer	329				191	1		585	NLCA	2011
	3	Number of NLCA patients - mesothelioma	11				10	0		31	NLCA	2011
Demographics (based on newly diagnosed patients, 2010)	4	Patients (from #1) aged 70+	188	62%	56%	67%	61%	39%		75%	NCDR	2010
	5	Patients (from #1) with recorded ethnicity	295	97%	94%	98%	93%	66%		100%	NCDR	2010
	6	Patients (from #5) with recorded ethnicity which is not White-British	3	1%	0%	3%	7%	0%		46%	NCDR	2010
	7	Patients (from #1) who are Income Deprived (2)		29%			16%	7%		34%	NCDR	2010
	8	Male patients (from #1)	161	53%	47%	58%	55%	43%		72%	NCDR	2010
	9	Number and proportion of patients (from #2) with a stage assigned	326	99%	97%	100%	92%	36%		100%	NLCA	2011
	10	Number and proportion of patients, excluding SCLC, with stage I or II assigned	83	29%	24%	35%	24%	10%		68%	NLCA	2011
	11	Number and proportion of patients, excluding SCLC, with a stage IIIA assigned	36	13%	9%	17%	14%	4%		30%	NLCA	2011
	12	Number and proportion of patients, excluding SCLC, with a stage IIIB and IV assigned	167	58%	53%	64%	62%	13%		80%	NLCA	2011
	13	Proportion of patients (from #2) with a Performance Status assigned	286	87%	83%	90%	89%	2%		100%	NLCA	2011
Specialist Team	14	Peer review: Does the specialist team have full membership? (3)	SA	Yes							NCPR	2010/11
	15	Peer review: Proportion of peer review indicators met	SA	85%			89%				NCPR	2010/11
	16	Peer review: are there immediate risks? (4)	SA	No							NCPR	2010/11
	17	Peer review: are there serious concerns? (4)	SA	No							NCPR	2010/11
	18	Number and proportion of patients (from #2) seen by CNS (5)	206	63%	57%	68%	79%	0%		100%	NLCA	2011
Throughput and pathology	19	Number of urgent GP referrals for suspected cancer	406				293	0		853	CWT	2010/11
	20	Number and proportion of patients (from #2) with confirmed NSCLC	184	56%	52%	60%	62%	0%		93%	NLCA	2011
	21	Number and proportion of patients (from #2) with confirmed SCLC	40	12%	9%	16%	12%	0%		100%	NLCA	2011
	22	Number and proportion of patients (from #2) with confirmed NSCLC who are diagnosed NOS	21	11%	8%	17%	19%	0%		79%	NLCA	2011
	23	Number and proportion of patients (from #2) with histological confirmation of diagnosis	228	69%	64%	74%	77%	52%		100%	NLCA	2011
	24	Estimated proportion of tumours with emergency presentations [experimental]	94	47%	40%	54%	37%	2%		97%	HES	2011
Waiting times	25	Q2 2012/13: Urgent GP referral for suspected cancer seen within 2 weeks	135	96%	92%	98%	97%	88%		100%	CWT	2012/13 Q2
	26	Q2 2012/13: Treatment within 62 days of urgent GP referral for suspected cancer	15	73%	52%	87%	80%	0%		100%	CWT	2012/13 Q2
	27	Urgent GP referrals for suspected cancer diagnosed with cancer [experimental]	103	25%	21%	30%	24%	4%		46%	CWT	2011/12
	28	Cases treated that are urgent GP referrals with suspected cancer [experimental]	34	25%	19%	33%	39%	0%		76%	CWT	2011/12
	29	Q2 2012/13: First treatment began within 31 days of decision to treat	14	100%	78%	100%	99%	91%		100%	CWT	2012/13 Q2
Practice	30	No. and proportion of patients (from #2) receiving surgery, chemotherapy and/or radiotherapy	174	53%	47%	58%	60%	36%		100%	NLCA	2011
	31	No. and proportion resected of patients (from #2) excluding confirmed SCLC	50	17%	13%	22%	16%	0%		38%	NLCA	2011
	32	No. and proportion resected of patients (from #2) with confirmed NSCLC	48	26%	20%	33%	21%	0%		45%	NLCA	2011
	33	No. and proportion resected of patients (from #2), excluding confirmed SCLC ,with stage I and II disease	40	48%	38%	59%	53%	0%		100%	NLCA	2011
	34	No. and proportion of patients (from #2) with confirmed SCLC receiving chemotherapy	27	68%	52%	80%	68%	0%		100%	NLCA	2011
	35	No. and prop. of patients (from #2) with stage IIIB/IV, PS 0-1 excl. conf. SCLC, receiving chemotherapy	28	58%	44%	71%	55%	0%		100%	NLCA	2011
Outcomes and Recovery	36	First outpatient appointments and proportion of all outpatient appointments	23,053	41%	41%	41%	32%	15%		68%	PBR SUS	2011/12
	37	NLCA: Median survival in days and adjusted hazard ratio for mortality	176	0.95	0.82	1.11	1.0	0.57		1.49	NLCA	2011
	38	NLCA: Proportion of patients surviving at one year and adjusted odds ratio of surviving 1 year	34%	1.43	0.97	2.11	1.0	0.40		2.67	NLCA	2011
Patient Experience - CPES (8)	39	Patients surveyed & % reporting always being treated with respect & dignity (6)	13	n/a			83%	66%		100%	CPES	2011/12
	40	Number of survey questions and % of those questions scoring red and green (7) — % Red	0	n/a				0%		78%	CPES	2011/12
	41	Number of survey questions and % of those questions scoring red and green (7) — % Green		n/a				0%		69%	CPES	2011/12

Profiles… rationale

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	11	Number a									NLCA	2011
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Specialist Team	14	Peer revie									NCPR	2010/11
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	23	Number a									NLCA	2011
	24	Estimated									HES	2011
Waiting times	25	Q2 2012/									CWT	2012/13 Q2
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	41	% Green		n/a				0%		69%	CPES	2011/12

- **Assess and benchmark a wide range of information at organisation level**

- **Allows a 'at a glance' assessment of an organisation**

Profile anatomy

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Specialist Team	14	Peer review: Doe...									NCPR	2010/11
	15	Peer review: Pro...										
	16	Peer review: are...										
	17	Peer review: are...										
	18	Number and prop...										
Throughput and pathology	19	Number of urgen...										
	20	Number and prop...										
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	33	No. and proportion resected of patients (from #2), excluding confirmed SCLC ,with stage I and II disease	40	48%	38%	59%	53%	0%		100%	NLCA	2011
	34	No. and proportion of patients (from #2) with confirmed SCLC receiving chemotherapy	27	68%	52%	80%	68%	0%		100%	NLCA	2011
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Patient Experience - CPES (8)	39	Patients surveyed & % reporting always being treated with respect & dignity (6)	13	n/a			83%	66%		100%	CPES	2011/12
	40	Number of survey questions and % of those questions scoring red and green (7) — % Red	0	n/a				0%		78%	CPES	2011/12
	41	— % Green		n/a				0%		69%	CPES	2011/12

Overlay labels: **Indicator descriptions (41)** · **Numbers, rates, and comparators** · **Spine chart & range of data** · **Sources & Dates**

Profile anatomy

Section	#	Indicator	No. of patients/ cases or value	Percentage or rate				Trust rate or percentage compared to England				Source	Period
				Trust	Lower 95% confidence limit	Upper 95% confidence limit	England	Low-est	Range		High-est		
Size – no. patients diagnosed													
Size	1	Number of newly diagnosed lung cancer patients per year, 2010 [									588	NCDR	2010
	2	Number of NLCA patients - lung cancer									585	NLCA	2011
	3	Number of NLCA patients - mesothelioma									31	NLCA	2011
Patient demographics (including stage/PS)													
Demographics (based on newly diagnosed patients, 2010)	4	Patients (from #1) aged 70+		62%	56%	67%	61%	55%			75%	NCDR	2010
	5	Patients (from #1) with recorded ethnicity	295	97%	94%	98%	93%	66%			100%	NCDR	2010
	6	Patients (from #5) with recorded ethnicity which is not White-British						0%			46%	NCDR	2010
	7	Patients (from #1) who are Income Deprived (2)						7%			34%	NCDR	2010
	8	Male patients (from #1)						43%			72%	NCDR	2010
	9	Number and proportion of patients (from #2) with a stage assigned						36%			100%	NLCA	2011
	10	Number and proportion of patients, excluding SCLC, with stage I or II assigned						10%			68%	NLCA	2011
	11	Number and proportion of patients, excluding SCLC, with a stage IIIA assigned						4%			30%	NLCA	2011
	12	Number and proportion of patients, excluding SCLC, with a stage IIIB and IV assigned	167	58%	53%	64%	62%	13%			80%	NLCA	2011
	13	Proportion of patients (from #2) with a Performance Status assigned	286	87%	83%	90%	89%	2%			100%	NLCA	2011
Specialist team – Peer Review concerns and CNS coverage													
Specialist Team	14	Peer review: Does the specialist team have full membership? (3)	SA	Yes								NCPR	2010/11
	15	Pe										NCPR	2010/11
	16	Pe										NCPR	2010/11
	17	Pe										NCPR	2010/11
	18	Number and proportion of patients (from #2) seen by CNS (5)	206	63%	57%	68%	79%	0%			100%	NLCA	2011
Throughput and pathology – patient breakdown													
Throughput and pathology	19	Number of urgent GP referrals for suspected cancer	406				293	0			853	CWT	2010/11
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	24	Estimated proportion of tumours with emergency presentations [experimental]	94	47%	40%	54%	37%	2%			97%	HES	2011
Waiting times performance and conversion/detection rates													
Waiting times	25	Q2 2012/13: Urgent GP referral for suspected cancer seen within 2 weeks	135	96%	92%	98%	97%	88%			100%	CWT	2012/13 Q2
	26	Q2 20										CWT	2012/13 Q2
	27	Urgen										CWT	2011/12
	28	Cases										CWT	2011/12
	29	Q2 2012/13: First treatment began within 31 days of decision to treat	14	100%	78%	100%	99%	91%			100%	CWT	2012/13 Q2
Clinical practice													
Practice	30	No. and proportion of patients (from #2) receiving surgery, chemotherapy and/or radiotherapy	174	53%	47%	58%	60%	36%			100%	NLCA	2011
	31	No. and proportion resected of patients (from #2) excluding confirmed SCLC					%	16%	0%		38%	NLCA	2011
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	33	No. and proportion resected of patients (from #2), excluding confirmed SCLC ,with stage I and					%	53%	0%		100%	NLCA	2011
	34	No. and proportion of patients (from #2) with confirmed SCLC receiving chemotherapy					%	68%	0%		100%	NLCA	2011
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Outcomes and recovery													
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Patient Experience													
Patient Experience - CPES (8)	39	Patients surveyed & % reporting always being treated with respect & dignity (6)					83%	66%			100%	CPES	2011/12
	40	Number of survey questions and % of those questions scoring red and green (7)						0%			78%	CPES	2011/12
	41							0%			60%	CPES	2011/12

Profiles – detail (1)

Size	G1	Number of new cases (invasive and non-invasive) managed per year, 2012
	G2	Number of newly diagnosed (invasive and non-invasive) patients per year, 2011
Demographics (based on newly diagnosed patients, 2010)	G2	Patients (from #G2) aged 70+
	G4	Patients (from #G2) with recorded ethnicity
	G5	Patients (from #G4) with recorded ethnicity which is not White-British
	G6	Patients (from #G2) who are Income Deprived (1)
	G7	Male patients (from #G2)
	BR1	Patients (invasive from #G2) with a nationally registered Nottingham Prognostic Index
	BR2	Patients (from #BR1) with nationally registered NPI in excellent or good prognostic groups
	G8	Patients with Charlson co-morbidity >0 (to be included in later profile)

Profiles - detail 2

Specialist Team	G8	Peer review: does the specialist team have full membership? (2)
	G9	Peer review: proportion of peer review indicators met
	G10	Peer review: are there immediate risks? (3)
	G11	Peer review: are there serious concerns? (3)
	G12	CPES (4): Patients surveyed and % reporting being given name of a CNS (5,6)
	BR4	Surgeons not managing 30+ cases per year
Throughput	G13	Number of urgent GP referrals for suspected cancer
	BR5	Cases (from #G2) managed at this trust with invasive cancer
	BR6	Cases (from #G2) managed at this trust with non-invasive cancer
	G14	Estimated proportion of tumours with emergency presentations [experimental]
	BR7	Newly diagnosed patients (from #G2) referred via the screening service
Waiting times	G15	Q2 2012/13: Urgent GP referral for suspected cancer seen within 2 weeks
	G16	Q2 2012/13: Treatment within 62 days of urgent GP referral for suspected cancer
	G17	Urgent GP referrals for suspected cancer diagnosed with cancer [experimental]
	G18	Cases treated that are urgent GP referrals with suspected cancer [experimental]
	G19	Q2 2012/13: First treatment began within 31 days of decision to treat
	GN1 (previously BR8)	Q2 2012/13: Urgent breast symptom referrals (cancer not suspected) seen in 2 wks

Profiles – detail (3)

Practice	BR9	Surgical cases (from #BR12) receiving sentinel lymph node biopsy (invasive only)
	BR10	Surgeries which are day case or one overnight stay (all cases from #G2)
	BR11	Mastectomy procedures (from #BR13) with immediate reconstruction (invasive only)
	BR12	Major surgeries in invasive breast cancer (from #BR5) (7)
	BR13	Surgical cases (from #BR12) receiving mastectomy (invasive only)
	BR14	Median length of stay (days) for elective surgical admissions (from #G2, all cases)
	BR15	Mean length of stay (days) for elective surgical admissions (from #G2, all cases)
Outcomes and Recovery	BR16	Surgical cases (from #BR12) readmitted as an emergency within 28 days
	BR17	Patients treated surviving at one year (to be included in later profile)
Patient Experience - CPES (4)	G22	Patients surveyed & % reporting always being treated with respect & dignity (6)
	G23	Number of survey questions and % of those questions scoring red(8)
	G24	Number of survey questions and % of those questions scoring green(8)

Profiles development

- ## 2013/2014

  - Existing profiles converted to web format – Sept 2013

  - 4 further service profiles released (OG, Sarcoma, Gynaecology, Head & Neck) – Sept 2013

  - CCG profiles released – Dec 2013

Profiles development

- **2014/2015**
  - Develop 4 further service profiles (Urology, Haematology, Skin, CNS) – Sept 2014
  - Create web profile for Public view (Radiotherapy) – March 2014
  - Create Tartan Rug – June 2014
  - Create Comparison profile – June 2014
 - Update existing Service profiles – Dec 2014

Profiles development

- Need for information output ('what does this mean for x'?) that meets needs of stakeholders
  - National Director for Cancer
  - Providers
    - Clinical teams
    - Network Groups
  - NPRP
  - SCNs, CCGs etc
  - Public/patients

Profiles development

- Information output to include;
    - Trends over 3 years
    - Trends at each Service Profile update
    - Headlines
    - Narrative

Headline Narrative report
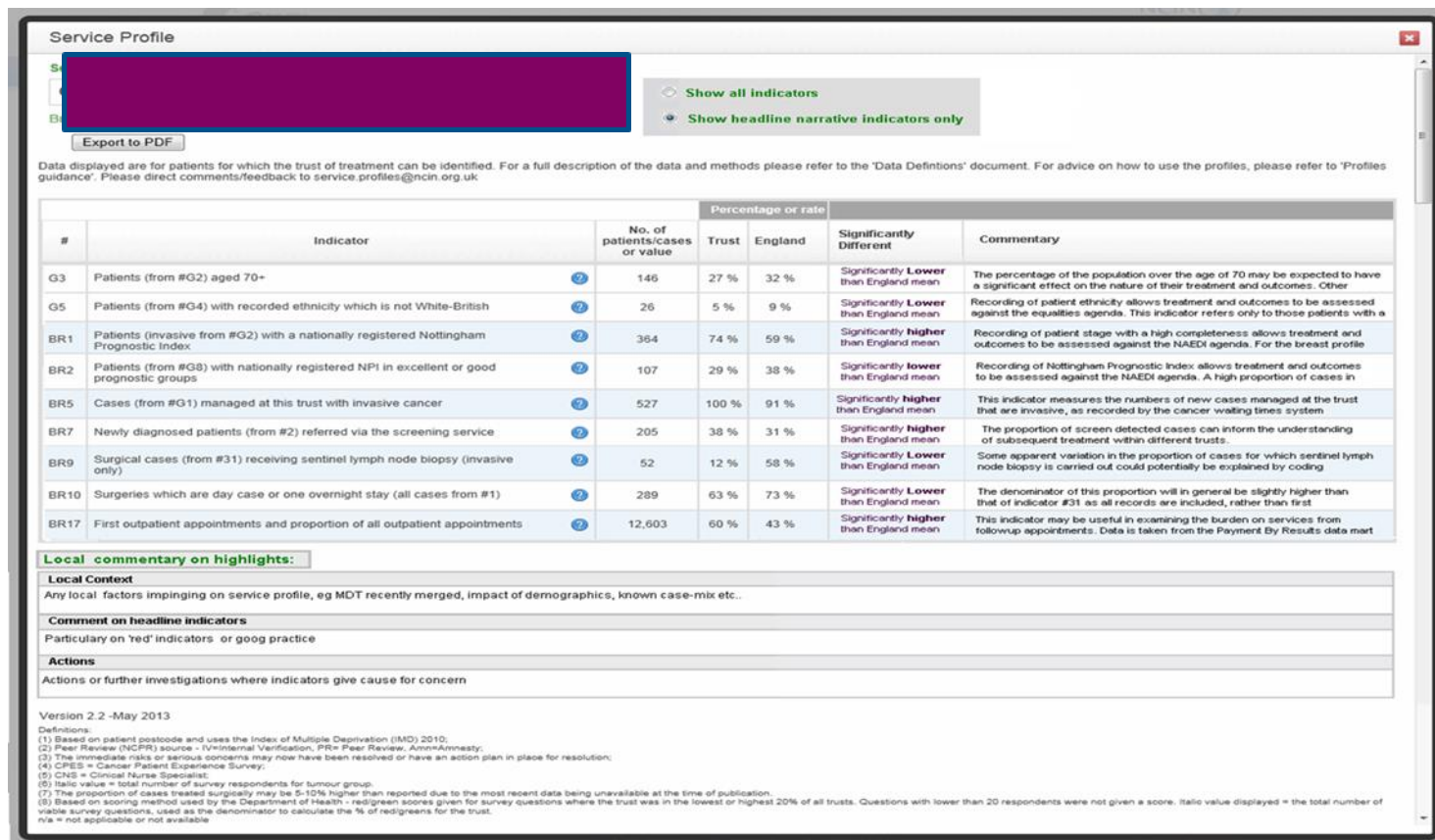
Profiles development

- In tandem with NCIN scoping exercise for SCNs

- Must dovetail with development of CRG indicators

- Rationalise with other information provision

- Must be relevant to NPR – clinical engagement, clinical narrative, reviewer reports, public/patients

Cancer Outcomes Conference
9 & 10 June 2014
Hilton Birmingham Metropole

www.ncin.org.uk/conference

The Cancer Outcomes Conference 2014 will explore the 'power of information' both locally and nationally.

It will examine how UK-wide cancer registration data and other health related datasets are being exploited to reduce cancer incidence, mortality and morbidity.

To find out more, visit www.ncin.org.uk/conference

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Nicky.coombes@phe.gov.uk

020 7654 8148