

# Lung Cancer Dashboard

## An effective tool for presenting Comparative Cancer Intelligence for Commissioners

Sharma L (HYCCN, NYCRIS, YHPHO), Hunt C (HYCCN), Pollock C (YHPHO), Roman Tatarek-Gintowt (NYCRIS)

Humber and Yorkshire Coast Cancer Network



NHS

NHS

Northern and Yorkshire Cancer Registry and Information Service

### Objectives

Good health intelligence leads to real improvements in the quality and efficiency of services. Lung cancer is the second most commonly diagnosed cancer and the most common cause of cancer death with low survival rates in the UK compared to international rates. Commissioners, clinicians and public health practitioners need accurate information from many sources to understand local performance and plan improvements. The lung cancer dashboard offers a clear, simple and informative solution to this need for information, and compares performance against other organisations within the network and nationally to help identify areas of concerns.

### Method

At the Humber and Yorkshire Coast Cancer Network (with support from YHPHO and NYCRIS), we created a lung cancer dashboard – a visual display of text and graphics combined on a single screen/sheet of paper.

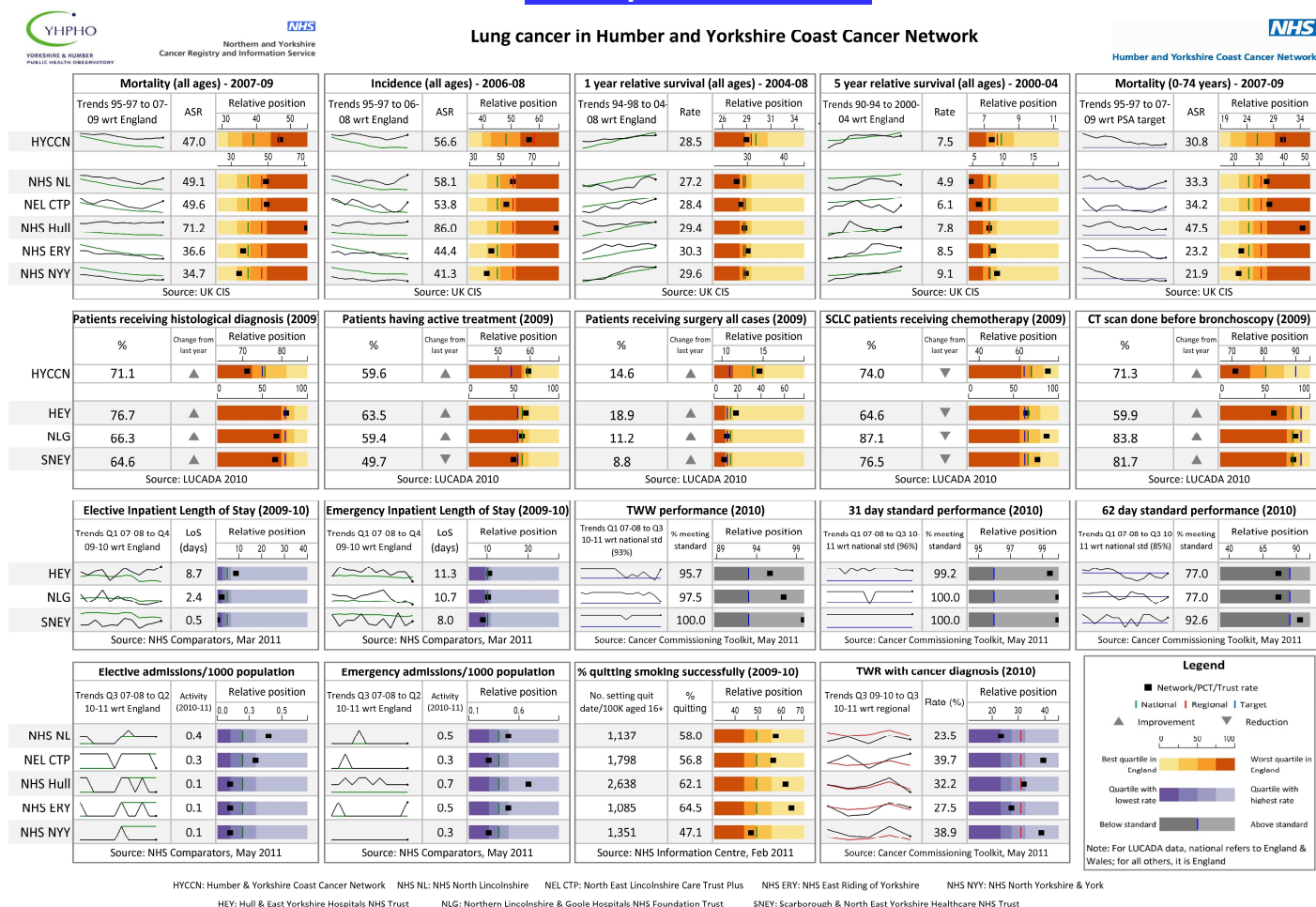
The dashboard includes indicators in various domains –

- Cancer outcomes including incidence, mortality and survival rates;
- Lung cancer audit data (LUCADA);
- Cancer waiting times;
- Elective and emergency admissions,
- Length of stay, etc.

These indicators are not cast in stone, and can be modified according to organisational requirements.

Graphics used in the dashboard include 'sparklines' to show trends and progress against targets; bullet charts to benchmark performance against peers and nationally; up/down icons, etc. These can be quickly updated as latest figures become available.

### Sample Dashboard



### Results

The dashboard presents lung cancer outcomes and key activity process measures for the network, commissioners and provider organisations.

It enables sharing of a wide range of comparative organisational data on outcomes and treatment identifying areas of concern quickly and effectively.

### Conclusions

This analysis helped the Lung NSSG at the network to identify problem areas and resulted in an inpatient audit where performance was of concern. Support was received from commissioners for three early diagnosis and awareness campaigns in the network.

The dashboard will help the commissioners to quickly and effectively assess their and their providers' progress towards targets. It can help to meet the information needs of the GP commissioning consortia for decision making in a simple and effective manner. It will support and underpin the GP consortia's efforts to sustain ongoing work. It will be useful to target investment appropriately, from awareness and early diagnosis campaigns to ensuring equity of access to treatment and improving the experience of patients and carers.