Cancer Services Data on PHE Fingertips

General Practice Profiles for cancer provide comparative information for benchmarking and reviewing variations at a PCN and General Practice level. They are intended to help primary care think about clinical practice and service delivery in cancer and early detection and diagnosis.

The website is interactive and can be used in many ways.

The best way to use the site and find out about the data is to spend time exploring it.

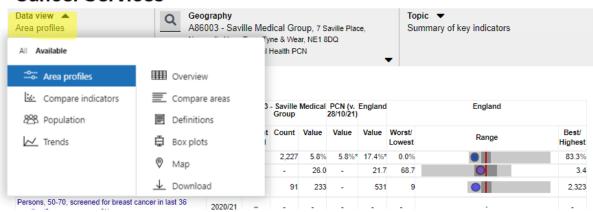
Getting started

Website: https://fingertips.phe.org.uk/profile/cancerservices

Data View: Choose preferred view.

Overview and area profiles are good starting points

Cancer Services



Area Profiles: This view shows individual practices in a PCN, for example and benchmarks the data against England, PCN

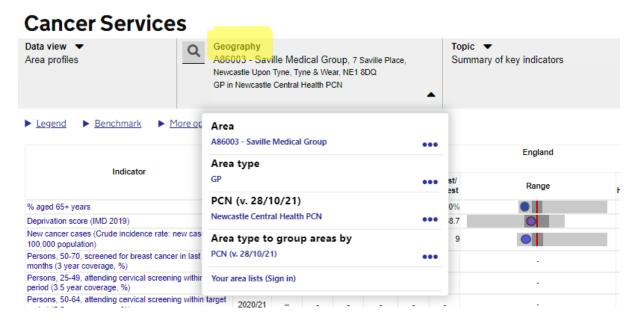
Compare Indicator; This is a very useful way of comparing data. With this data view you choose two indicators. It may be helpful for one indicator to be from the practice summary such as aged over 65 or deprivation index and the second indicator to be a cancer indicator. Population; This gives a profile of the practice. Age and gender profile and the latest deprivation status, ethnicity and life expectancy included.

Trends; For each indicator, shows the trend over the (up to) last 11 years

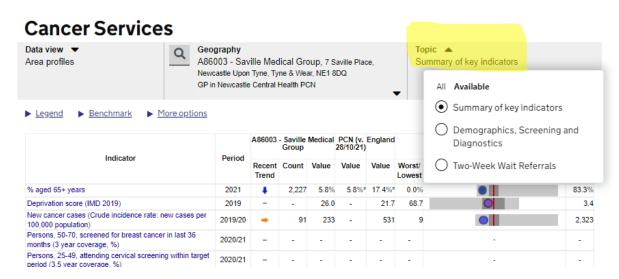
Overview; This shows for all the chosen PCNs in a given topic area. The data can be benchmarked against England or smaller areas (e.g. PCN). The data is colour coded to Lower, Similar and Higher values against the benchmarks.

Compare Areas; This puts all practices (for example) within a PCN in table, so you can the individual practice values. It can also generate a funnel diagram showing who are outliers. This is also a helpful way of reviewing data. It

Geography- By changing the Area Type To Group Areas By Tab to either CCG or PCN enables you to view your data at a CCG or PCN Footprint. The screen shot below shows how you can see key cancer indcators for your practice, bench marked by PCN averages and England averages. In order to get data for each individual practice within a PCN -Select your preferred Area type to group areas by (e.g. PCN) and then select your PCN. You will see data for each practice in the PCN



Topic: Select which data you wish to view (e.g. summary of key indicators). The screen shot below shows how you can change the range of cancer indicators you are looking at.



The above enables you to review your practices data profile for a group of cancer indicators against a PCN and England benchmark.

Comparing Your Practice to Others in a PCN

You can also compare and review your practice's data with those across your PCN. Follow the instructions below to do this.

Data View Tab - Select Compare Areas

Geography Tab – Select PCN under the Area Type to Group Areas tab.

Then in the tab above – Labelled PCN find and select your PCN

Then from the Area Type – select GP

Finally, Under the Area Tab find – select your practice.

Cancer Services

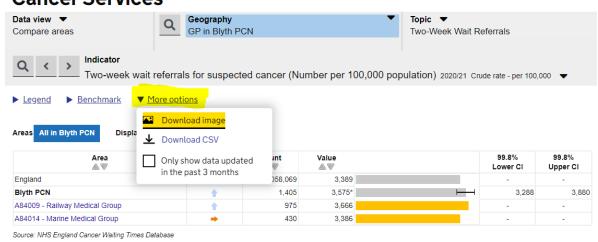


This will produce a table with comparative data for one indicator at a time only. To change the indicator use the arrows near the Indictor section. To change the range of indicators don't forget to change the your options in the Topic bar, right at the top of the page.

Extract Data Tables for Use in other Documents

If you wish to extract any tables or graphs from the site to include in presentations or reports. Click on the More Options tab as shown below and select download image and it will provide a view of what you can currently see on the screen.

Cancer Services



Understanding data is very important. A practice of mainly students will have less patients aged over 65 and hence will have a lower cancer prevalence. Conversely if a practice has a lot of patients aged over 65 they should have a higher cancer prevalence. If not ask why not.

When comparing indicators such as screening, practices should compare themselves against similarly deprived practices as this is a major factor in screening rates. A practice with 82% cervical screening rate may compare badly against similar practices who achieve an 85% rate.