

Cancer Patient Experience Survey

2022 Results

NHS Black Country Integrated Care Board

Published July 2023

Executive Summary

Questions Above Expected Range

	Case Mix Adjusted Scores			
	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	84%	72%	80%	76%

Questions Below Expected Range

	Case	Mix Adjusted S	Scores	
	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	61%	70%	65%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	46%	47%	57%	52%
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	74%	74%	83%	79%
Q36. Hospital staff always did everything they could to help the patient control pain	79%	81%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	82%	85%	91%	88%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	76%	77%	91%	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	66%	72%	87%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	69%	70%	86%	78%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	36%	39%	51%	45%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.7	9.0	8.9

Introduction

The National Cancer Patient Experience Survey 2022 is the 12th iteration of the survey first undertaken in 2010. It has been designed to monitor progress on cancer care; to provide information to drive local quality improvements; to assist commissioners and providers of cancer care; and to inform the work of the various charities and stakeholder groups supporting cancer patients.

The survey was overseen by a national Cancer Patient Experience Advisory Group. This Advisory Group set the principles and objectives of the survey programme and guided questionnaire development. The survey was commissioned and managed by NHS England. The survey provider, Picker, is responsible for designing, running and analysing the survey.

The 2022 survey involved 133 NHS Trusts. Out of 115,662 people, 61,268 people responded to the survey, yielding a response rate of 53%.

Methodology

Eligibility, fieldwork and survey methods

The sample for the survey included all adult (aged 16 and over) NHS patients, with a confirmed primary diagnosis of cancer, discharged from an NHS Trust after an inpatient episode or day case attendance for cancer related treatment in the months of April, May and June 2022. The fieldwork for the survey was undertaken between November 2022 and February 2023.

As in the previous seven years, the survey used a mixed mode methodology. Questionnaires were sent by post, with two reminders where necessary, but also included an option to complete the questionnaire online. A Freephone helpline and email was available for respondents to opt out, ask questions about the survey, enable them to complete their questionnaire over the phone and provide access to a translation and interpreting facility for those whose first language was not English.

How Alliance and ICB results are generated

Alliance and ICB results are derived using the post code of each patient, rather than by mapping trust results to ICBs or Alliances. This mapping is achieved using lookup files released by the Office for National Statistics.

Alliance and ICB results therefore reflect the experience of people referred from within the geographical footprint.

Case-mix adjustment

Both unadjusted and adjusted scores are presented in this report. Case-mix adjusted scores allow us to account for the impact that differing patient populations might have on results. By using the case-mix adjusted estimates we can obtain a greater understanding of how an ICB is performing given their patient population. The factors taken into account in this case-mix adjustment are Male/Female/Non-binary/Other, age, ethnicity, deprivation, and cancer type.

Unadjusted data should be used to see the actual responses from patients relating to the ICB. Casemix adjusted data, together with expected ranges, should be used to understand whether the results are significantly higher or lower than national results taking account of the patient mix.

Scoring methodology

Sixty-one questions from the questionnaire are scored as these questions relate directly to patient experience. For all but one question (Q59), the score shows the percentage of respondents who gave the most favourable response to a question. For Q59, respondents rate their overall care on a scale of 0 to 10, of which the average was calculated for this question's score. The percentages in this report have been rounded to the nearest percentage point. Therefore, in some cases the figures do not appear to add up to 100%.

Please note that following a review of the scoring methodology, a change was made to the scoring of Q12 such that the response option "No, I was told by letter or email" is no longer considered neutral.

Statistical significance

In the reporting of 2022 results, appropriate statistical tests have been undertaken to identify unadjusted scores for which the change over time is 'statistically significant'. A statistically significant difference means that the change in the result is very unlikely to have occurred by chance.

Suppression

Data is suppressed for two reasons: to ensure unreliable results based on very small numbers of respondents are not released, and to prevent individuals being identifiable in the data.

In cases where a result is based on fewer than 10 responses, the result has been suppressed. For example, where fewer than 10 people answered a question from a particular ICB, the results are not shown for that question for that ICB.

For ICBs with an eligible population of 1,000 or fewer, data relating to the respondent and their condition has been suppressed where 5 people or fewer were in a particular category. In instances where only one has been suppressed, the next lowest category has been suppressed to prevent back calculation from the total number of responses.

Additional suppression

Additional suppression happens if only **one** ICB has a score suppressed. If this happens, we will suppress another ICB's results (both the ICB level and subgroup results for the question) based on the next lowest number of respondents for the score. We do this so that the national score cannot be used to work out the score for the individual ICB.

The same rule applies to groups in each subgroup breakdown. For example, if only **one** ICB has the 85+ age group suppressed for Q25 we will need to suppress another ICB's results for the 85+ age group on Q25. This suppression is based on the 85+ age group with the next lowest number of respondents for Q25.

Understanding the results

This report shows how this ICB scored for each question in the survey compared with national results. It is aimed at helping individual ICBs to understand their performance and identify areas for local and regional improvement. Below is a description of the type of results presented within this report and how to understand them.

Expected range charts

The expected range charts in this report show a bar with the lowest and highest score received for each question nationally. Within this bar, an expected range is given (within the grey bar) and a black diamond represents the actual score for this ICB.

ICBs whose score is above the upper limit of the expected range (in the dark blue) are positive outliers, with a score statistically significantly higher than the national mean. This indicates that the ICB performs better than what ICBs of the same size and demographics are expected to perform. The opposite is true if the score is below the lower limit of the expected range (in the light blue); these are negative outliers. For scores within the expected range (in the grey), the score is what we would expect given the ICB's size and demographics.

Comparability tables

The comparability tables show the 2021 and 2022 unadjusted scores for this ICB for each scored question. If there is a statistically significant change from 2021 an arrow will be presented for the direction of change.

The adjusted 2022 score will also be presented for each scored question along with the lower and upper expected range and national score. Scores above the upper limit of the expected range will be highlighted dark blue, scores below the lower limit of the expected range will be highlighted light blue, and scores within the lower and upper limit of the expected ranges will be highlighted grey.

Sub-group breakdowns

Unadjusted scores are shown for tumour type, Male/Female/Non-binary/Other, age, IMD quintile, long-term condition status and ethnicity breakdowns. Unadjusted scores for the same sub-group across different ICBs may not be comparable, as they do not account for the impact that differing patient populations might have on results.

Tumour type tables

The tumour type tables show the unadjusted scores for each scored question for each of the 13 tumour groups. Central nervous system is abbreviated as 'CNS' and lower gastrointestinal tract is abbreviated as 'LGT' throughout this report.

The age group tables show the unadjusted scores for each scored question for each of the eight age groups.

Male/Female/Non-binary/Other tables

These tables show the unadjusted scores for the following groups male; female; non-binary; prefer to self-describe; and prefer not to say.

Ethnicity tables

The ethnicity tables show the unadjusted scores for six ethnicity groups.

Long-term condition status tables

The long-term condition status tables show the unadjusted scores for two groups: those who indicate they have one or more long term conditions and those who indicate that they have no long-term conditions.

IMD quintile tables

The IMD quintile tables show the unadjusted scores for five quintiles based on relative disadvantage, with quintile 1 being the most deprived and quintile 5 being the least deprived.

Year on year charts

The year on year charts show two columns representing the unadjusted scores of the last two years (2021 and 2022) for each scored question.

Further information

This research was carried out in accordance with the international standard for organisations conducting social research (accreditation to ISO20252:2012; certificate number GB08/74322). The 2022 survey data has been produced and published in line with the Code of Practice for Official Statistics.

For more information on the methodology, please see the Technical Document. It can be viewed along with the 2022 questionnaire and survey guidance on the website at www.ncpes.co.uk. For all other outputs at ICB level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response Rate

Overall Response Rate

1,081 patients responded out of a total of 2,314 patients, resulting in a response rate of 47%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	2,479	2,314	1,081	47%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

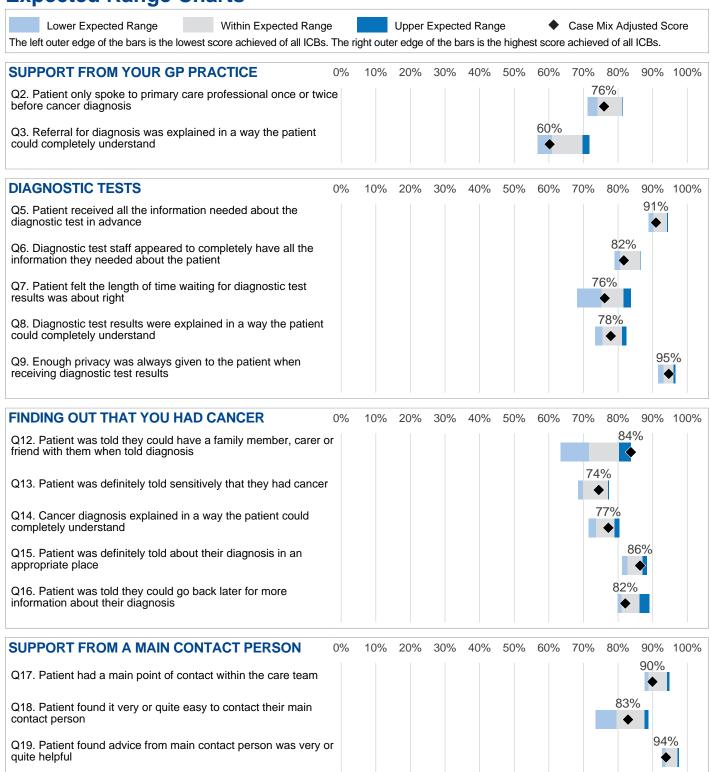
	Number of Respondents
Paper	929
Online	151
Phone	1
Translation Service	0
Total	1,081

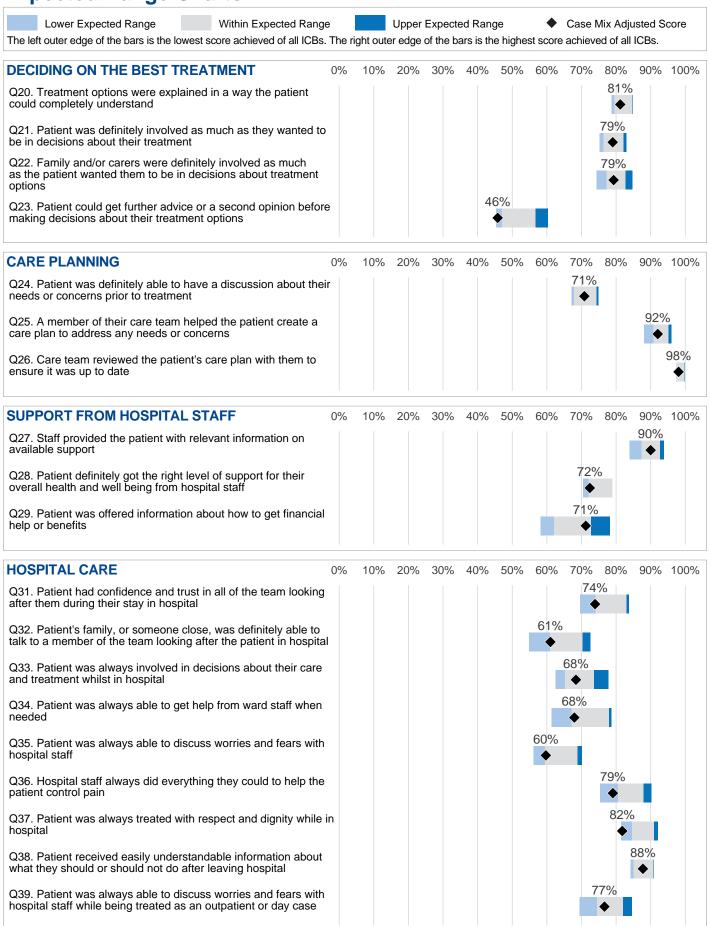
Respondents by Tumour Group

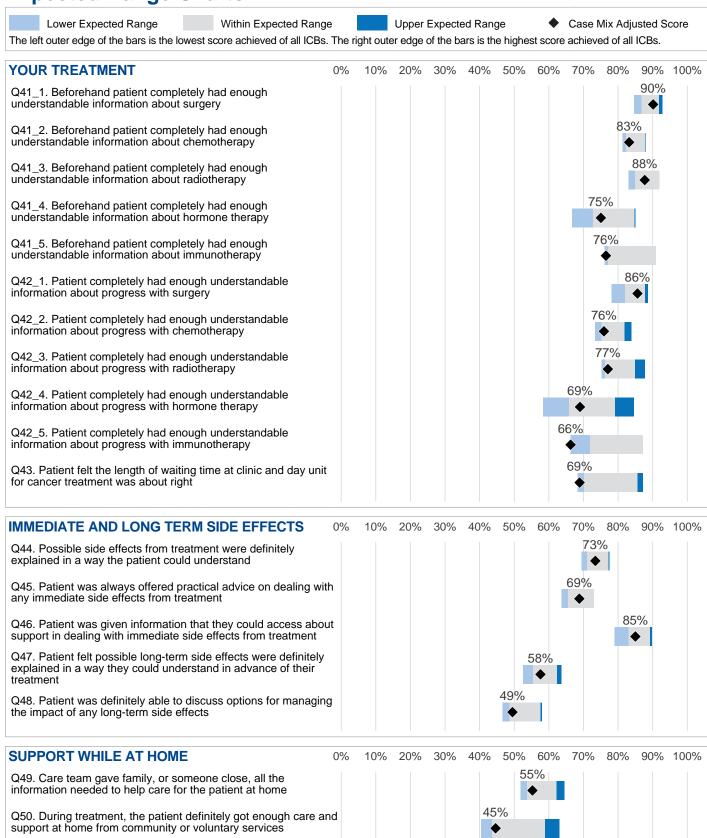
	Number of Respondents
Brain / CNS	3
Breast	291
Colorectal / LGT	162
Gynaecological	54
Haematological	116
Head and Neck	33
Lung	75
Prostate	74
Sarcoma	5
Skin	22
Upper Gastro	47
Urological	85
Other	114
Total	1,081

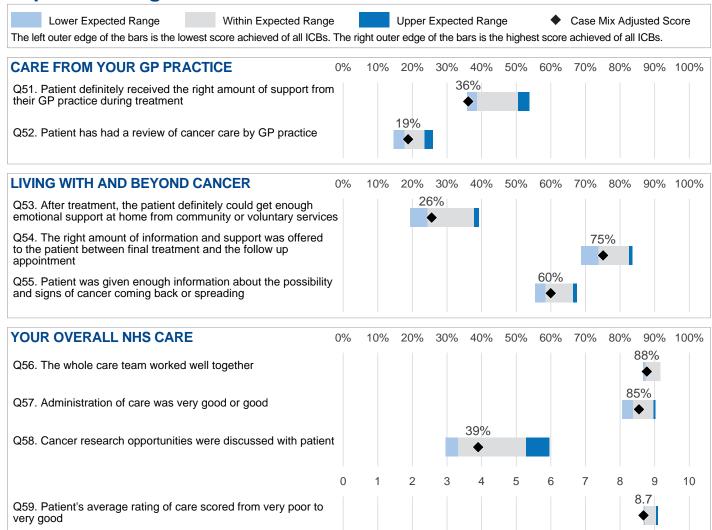
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	888
Irish	6
Gypsy or Irish Traveller	*
Any other White background	16
Mixed / Multiple Ethnicity	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	47
Pakistani	10
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	
African	9
Caribbean	17
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	69
Total	1,081









Comparability tables

 Indicates where a score is not available due to suppression or a low base size.

▲ or ▼

Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.

Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges
Adjusted Score above Upper Expected Range

**	No score	available	for 2021.
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	Unadjusted Scores					Case M			
SUPPORT FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	544	79%	516	76%		76%	74%	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	745	56%	689	59%		60%	61%	70%	65%

	Unadjusted Scores					Case M			
DIAGNOSTIC TESTS		2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q5. Patient received all the information needed about the diagnostic test in advance	955	92%	872	91%		91%	90%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	1013	82%	913	81%		82%	81%	86%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	1011	80%	920	76%		76%	75%	82%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	1017	76%	917	78%		78%	76%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	1021	94%	923	95%		95%	93%	96%	95%

	Unadjusted Scores					Case M			
FINDING OUT THAT YOU HAD CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	1128	79%	1029	85%	A	84%	72%	80%	76%
Q13. Patient was definitely told sensitively that they had cancer	1180	74%	1071	76%		74%	70%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	1187	75%	1070	78%		77%	74%	79%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	1172	85%	1074	87%		86%	83%	87%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	1045	83%	966	82%		82%	81%	86%	84%

	Unadjusted Scores					Case M			
SUPPORT FROM A MAIN CONTACT PERSON	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q17. Patient had a main point of contact within the care team	1135	91%	1021	90%		90%	89%	94%	92%
Q18. Patient found it very or quite easy to contact their main contact person	936	84%	839	83%		83%	80%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	976	96%	864	94%		94%	94%	97%	95%

Comparability tables

Indicates where a score is not available due to suppression or a low base size.

▲ or ▼

Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.

Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges

Adjusted Score above Upper Expected Range

**	No score	available	for 2021

		Una	djusted So	cores		Case M			
DECIDING ON THE BEST TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q20. Treatment options were explained in a way the patient could completely understand	1115	81%	1001	81%		81%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1165	75%	1051	79%		79%	76%	82%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	1007	77%	933	79%		79%	77%	83%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	591	51%	553	48%		46%	47%	57%	52%

	Unadjusted Scores						Case Mix Adjusted Scores			
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	1064	73%	959	71%		71%	68%	74%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	673	92%	570	92%		92%	91%	95%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	524	98%	452	98%		98%	98%	100%	99%	

		Una	djusted So	cores	Case M				
SUPPORT FROM HOSPITAL STAFF	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q27. Staff provided the patient with relevant information on available support	1001	89%	913	90%		90%	87%	93%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1184	74%	1057	73%		72%	72%	79%	75%
Q29. Patient was offered information about how to get financial help or benefits	739	74%	702	71%		71%	62%	73%	67%

		Una	djusted So	cores		Case M			
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	561	81%	480	75%		74%	74%	83%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	471	60%	399	62%		61%	61%	70%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	553	67%	473	69%		68%	65%	74%	69%
Q34. Patient was always able to get help from ward staff when needed	550	75%	471	69%		68%	67%	78%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	533	67%	459	60%		60%	59%	69%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	489	85%	421	79%		79%	81%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	560	89%	484	82%	•	82%	85%	91%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	549	87%	474	88%		88%	85%	91%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	1026	78%	952	77%		77%	75%	82%	78%

Comparability tables

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Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges Adjusted Score above Upper Expected Range

**	Nο	score	available	for	2021

		Una	djusted So	cores		Case M			
YOUR TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q41_1. Beforehand patient completely had enough understandable information about surgery	655	91%	574	90%		90%	87%	92%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	667	85%	595	84%		83%	82%	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	364	88%	320	88%		88%	85%	92%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	211	80%	177	75%		75%	73%	85%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	98	81%	109	76%		76%	77%	91%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	640	85%	563	86%		86%	82%	88%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	658	77%	590	77%		76%	75%	82%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	363	77%	313	78%		77%	76%	85%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	207	67%	175	70%		69%	66%	79%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	100	77%	108	67%		66%	72%	87%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1151	73%	1026	69%		69%	70%	86%	78%

		Una	djusted So	cores		Case M			
IMMEDIATE AND LONG TERM SIDE EFFECTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	1122	75%	1010	74%		73%	71%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1076	67%	972	70%		69%	66%	73%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	883	86%	801	85%		85%	83%	89%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	1052	59%	965	59%		58%	55%	62%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	935	53%	858	51%		49%	49%	58%	53%

SUPPORT WHILE AT HOME		Una	djusted So	cores	Case M				
	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	837	56%	767	57%		55%	54%	62%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	498	48%	429	44%		45%	44%	59%	51%

Comparability tables

* Indicates where a score is not available due to suppression or a low base size.

▲ or **▼**

Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.

Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges Adjusted Score above Upper Expected Range

**	No	score	available	for	2021.
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CARE FROM YOUR GP PRACTICE	Unadjusted Scores						Case Mix Adjusted Scores			
	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	635	34%	579	36%		36%	39%	51%	45%	
Q52. Patient has had a review of cancer care by GP practice	1120	17%	1006	19%		19%	18%	24%	21%	

		Una	djusted So	cores		Case M			
LIVING WITH AND BEYOND CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	281	25%	250	26%		26%	24%	38%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	519	77%	447	74%		75%	74%	83%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	945	63%	834	60%		60%	58%	66%	62%

		Una	djusted So	cores		Case M			
YOUR OVERALL NHS CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q56. The whole care team worked well together	1125	90%	1004	88%		88%	87%	92%	90%
Q57. Administration of care was very good or good	1172	87%	1042	86%		85%	84%	90%	87%
Q58. Cancer research opportunities were discussed with patient	612	41%	543	39%		39%	33%	53%	43%
Q59. Patient's average rating of care scored from very poor to very good	1149	8.8	1008	8.7		8.7	8.7	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	88%	72%	59%	63%	89%	85%	80%	*	100%	71%	62%	65%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	63%	56%	68%	58%	57%	49%	66%	*	77%	63%	46%	56%	59%

DIAGNOSTIC TESTS							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	87%	92%	93%	93%	93%	94%	91%	*	100%	90%	84%	95%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	83%	82%	85%	74%	86%	76%	87%	*	90%	85%	79%	76%	81%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	75%	84%	71%	78%	75%	75%	79%	*	65%	83%	71%	73%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	82%	80%	78%	74%	80%	68%	82%	*	84%	85%	67%	78%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	94%	96%	100%	94%	83%	94%	95%	*	95%	98%	91%	96%	95%

FINDING OUT THAT YOU HAD CANCER							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	91%	90%	75%	80%	81%	89%	79%	*	77%	89%	73%	85%	85%
Q13. Patient was definitely told sensitively that they had cancer	*	82%	78%	79%	77%	76%	72%	72%	*	86%	70%	62%	68%	76%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	83%	78%	87%	71%	73%	81%	84%	*	86%	67%	67%	75%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	90%	88%	87%	85%	91%	91%	89%	*	95%	81%	79%	84%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	*	88%	76%	80%	79%	78%	85%	94%	*	86%	74%	75%	79%	82%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	92%	90%	96%	93%	90%	87%	96%	*	90%	89%	83%	88%	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	88%	82%	70%	82%	74%	84%	80%	*	100%	87%	77%	80%	83%
Q19. Patient found advice from main contact person was very or quite helpful	*	93%	93%	90%	99%	93%	98%	95%	*	100%	95%	86%	94%	94%

DECIDING ON THE BEST TREATMENT							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	78%	83%	91%	82%	70%	88%	85%	*	90%	86%	73%	85%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	76%	81%	88%	78%	75%	79%	85%	*	100%	84%	67%	81%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	77%	83%	85%	72%	79%	84%	81%	*	80%	86%	69%	83%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	44%	50%	36%	45%	48%	57%	61%	*	55%	48%	44%	49%	48%

CARE PLANNING							Tumo	ur Typ	е					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	73%	75%	70%	71%	73%	72%	70%	*	79%	71%	63%	70%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	91%	96%	82%	95%	100%	92%	94%	*	100%	96%	89%	88%	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	96%	97%	100%	98%	100%	100%	100%	*	100%	100%	100%	100%	98%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	92%	88%	89%	90%	89%	91%	92%	*	88%	92%	85%	87%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	69%	75%	72%	82%	78%	76%	78%	*	82%	68%	60%	74%	73%
Q29. Patient was offered information about how to get financial help or benefits	*	77%	72%	61%	68%	68%	78%	67%	*	62%	69%	53%	70%	71%

HOSPITAL CARE							Tumo	our Typ	е					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	64%	81%	76%	74%	87%	74%	92%	*	*	72%	66%	77%	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	56%	66%	62%	52%	73%	71%	67%	*	*	53%	56%	69%	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	62%	70%	81%	65%	87%	82%	77%	*	*	50%	59%	71%	69%
Q34. Patient was always able to get help from ward staff when needed	*	62%	70%	72%	63%	87%	91%	92%	*	*	47%	64%	63%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	54%	63%	69%	53%	80%	72%	76%	*	*	44%	52%	62%	60%
Q36. Hospital staff always did everything they could to help the patient control pain	*	74%	79%	85%	74%	86%	91%	100%	*	*	63%	69%	87%	79%
Q37. Patient was always treated with respect and dignity while in hospital	*	75%	89%	81%	78%	87%	91%	92%	*	*	72%	79%	79%	82%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	87%	89%	91%	83%	87%	91%	100%	*	*	83%	84%	85%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	75%	83%	77%	74%	71%	76%	84%	*	91%	78%	64%	78%	77%

YOUR TREATMENT							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	89%	87%	95%	94%	90%	92%	96%	*	90%	100%	89%	93%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	80%	88%	92%	86%	83%	87%	75%	*	*	88%	83%	82%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	88%	75%	95%	92%	89%	79%	95%	*	*	*	93%	90%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	70%	*	*	*	*	*	90%	*	*	*	*	81%	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	80%	*	*	77%	*	88%	*	*	*	*	65%	71%	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	86%	85%	88%	94%	89%	84%	89%	*	95%	94%	76%	86%	86%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	74%	82%	81%	80%	67%	78%	58%	*	*	73%	75%	73%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	81%	75%	95%	75%	70%	83%	59%	*	*	*	64%	85%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	67%	*	*	*	*	*	79%	*	*	*	*	68%	70%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	75%	*	*	62%	*	80%	*	*	*	*	65%	54%	67%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	61%	73%	70%	67%	83%	68%	79%	*	82%	79%	74%	59%	69%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	74%	77%	86%	72%	77%	70%	74%	*	84%	79%	59%	75%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	69%	77%	67%	67%	79%	77%	64%	*	72%	67%	59%	71%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	83%	88%	89%	85%	77%	84%	88%	*	93%	83%	75%	88%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	61%	59%	63%	50%	73%	59%	67%	*	79%	54%	53%	54%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	52%	53%	63%	40%	72%	49%	56%	*	64%	46%	44%	48%	51%

SUPPORT WHILE AT HOME							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	55%	57%	46%	61%	73%	75%	60%	*	69%	66%	38%	46%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	46%	44%	44%	42%	64%	48%	47%	*	*	41%	49%	31%	44%

CARE FROM YOUR GP PRACTICE							Tumo	ur Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	40%	32%	45%	22%	35%	28%	41%	*	36%	43%	32%	40%	36%
Q52. Patient has had a review of cancer care by GP practice	*	17%	14%	22%	16%	20%	24%	21%	*	30%	30%	20%	22%	19%

LIVING WITH AND BEYOND CANCER							Tumo	ur Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	21%	34%	47%	22%	30%	27%	20%	*	*	30%	21%	0%	26%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	69%	78%	75%	81%	82%	74%	79%	*	100%	70%	65%	64%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	59%	55%	57%	63%	64%	60%	66%	*	86%	58%	58%	62%	60%

YOUR OVERALL NHS CARE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q56. The whole care team worked well together	*	86%	89%	90%	89%	90%	90%	92%	*	95%	91%	86%	86%	88%
Q57. Administration of care was very good or good	*	85%	87%	85%	89%	87%	85%	88%	*	100%	86%	80%	86%	86%
Q58. Cancer research opportunities were discussed with patient	*	35%	39%	36%	56%	30%	39%	37%	*	*	57%	44%	26%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	8.6	8.8	8.9	8.9	8.7	8.6	9.0	*	9.2	8.7	8.3	8.5	8.7

SUPPORT FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	74%	61%	76%	73%	84%	78%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	65%	51%	60%	58%	58%	73%	59%

DIAGNOSTIC TESTS				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	79%	84%	91%	93%	91%	90%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	81%	79%	77%	84%	79%	88%	81%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	48%	61%	72%	79%	82%	88%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	56%	73%	77%	80%	79%	86%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	85%	88%	94%	96%	96%	100%	95%

FINDING OUT THAT YOU HAD CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	77%	82%	85%	87%	83%	89%	85%
Q13. Patient was definitely told sensitively that they had cancer	*	*	72%	77%	77%	75%	76%	75%	76%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	71%	82%	76%	79%	77%	77%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	75%	81%	89%	89%	87%	88%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	89%	87%	86%	84%	74%	83%	82%

SUPPORT FROM A MAIN CONTACT PERSO	N			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	80%	93%	93%	88%	91%	90%	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	70%	83%	80%	87%	81%	90%	83%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	87%	93%	92%	96%	92%	100%	94%

DECIDING ON THE BEST TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	68%	85%	78%	83%	83%	82%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	69%	73%	73%	83%	82%	87%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	71%	71%	74%	83%	81%	82%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	29%	43%	47%	52%	45%	59%	48%

CARE PLANNING				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	72%	73%	67%	74%	70%	71%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	89%	93%	90%	93%	93%	96%	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	100%	94%	97%	100%	98%	100%	98%

SUPPORT FROM HOSPITAL STAFF				Age		-			
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	*	81%	94%	91%	91%	86%	93%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	47%	61%	69%	78%	76%	82%	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	67%	88%	74%	70%	59%	68%	71%

HOSPITAL CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	38%	55%	75%	75%	86%	76%	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	61%	50%	54%	67%	65%	60%	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	43%	54%	71%	70%	75%	79%	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	29%	48%	73%	70%	78%	71%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	24%	51%	60%	60%	72%	58%	60%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	40%	78%	81%	79%	86%	83%	79%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	43%	76%	79%	84%	90%	86%	82%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	76%	79%	85%	90%	92%	89%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	57%	73%	73%	79%	79%	81%	77%

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	77%	94%	88%	92%	89%	100%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	78%	80%	77%	86%	91%	71%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	87%	76%	85%	94%	91%	93%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	45%	64%	78%	80%	81%	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	85%	66%	87%	80%	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	73%	87%	85%	87%	85%	92%	86%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	61%	72%	71%	79%	82%	82%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	80%	65%	78%	83%	80%	75%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	55%	57%	67%	77%	77%	*	70%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	67%	64%	77%	65%	*	67%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	40%	60%	70%	72%	69%	65%	69%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	69%	69%	75%	78%	72%	63%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	59%	62%	69%	72%	70%	70%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	69%	86%	84%	88%	81%	91%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	45%	57%	62%	61%	55%	60%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	43%	47%	52%	55%	47%	44%	51%

SUPPORT WHILE AT HOME				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	44%	54%	51%	62%	56%	62%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	38%	41%	46%	47%	39%	50%	44%

CARE FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	44%	46%	38%	35%	26%	46%	36%
Q52. Patient has had a review of cancer care by GP practice	*	*	39%	19%	20%	19%	19%	13%	19%

LIVING WITH AND BEYOND CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	27%	29%	22%	25%	25%	44%	26%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	50%	64%	75%	79%	79%	59%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	37%	45%	60%	64%	61%	73%	60%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	77%	84%	89%	86%	93%	92%	88%
Q57. Administration of care was very good or good	*	*	71%	83%	85%	88%	87%	83%	86%
Q58. Cancer research opportunities were discussed with patient	*	*	46%	30%	42%	40%	37%	38%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	*	7.7	8.4	8.6	8.8	8.8	8.7	8.7

SUPPORT FROM YOUR GP PRACTICE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	76%	75%	*	*	*	68%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	57%	*	*	*	54%	59%

DIAGNOSTIC TESTS				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	92%	*	*	*	91%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	79%	83%	*	*	*	88%	81%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	78%	*	*	*	86%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	79%	*	*	*	71%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	93%	*	*	*	91%	95%

FINDING OUT THAT YOU HAD CANCER				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	84%	*	*	*	85%	85%
Q13. Patient was definitely told sensitively that they had cancer	77%	72%	*	*	*	88%	76%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	77%	*	*	*	83%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	87%	*	*	*	90%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	81%	*	*	*	91%	82%

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Female/Non-binary/Other				
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	90%	90%	*	*	*	92%	90%	
Q18. Patient found it very or quite easy to contact their main contact person	84%	81%	*	*	*	79%	83%	
Q19. Patient found advice from main contact person was very or quite helpful	93%	95%	*	*	*	94%	94%	

DECIDING ON THE BEST TREATMENT			Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All			
Q20. Treatment options were explained in a way the patient could completely understand	81%	82%	*	*	*	82%	81%			
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	82%	*	*	*	79%	79%			
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	79%	*	*	*	84%	79%			
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	46%	49%	*	*	*	64%	48%			

CARE PLANNING		Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	70%	73%	*	*	*	76%	71%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	90%	95%	*	*	*	94%	92%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	98%	*	*	*	100%	98%		

SUPPORT FROM HOSPITAL STAFF				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	90%	89%	*	*	*	97%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	71%	75%	*	*	*	89%	73%
Q29. Patient was offered information about how to get financial help or benefits	73%	66%	*	*	*	81%	71%

HOSPITAL CARE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	71%	79%	*	*	*	71%	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	61%	*	*	*	71%	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	67%	*	*	*	78%	69%
Q34. Patient was always able to get help from ward staff when needed	66%	74%	*	*	*	61%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	59%	61%	*	*	*	78%	60%
Q36. Hospital staff always did everything they could to help the patient control pain	77%	81%	*	*	*	86%	79%
Q37. Patient was always treated with respect and dignity while in hospital	80%	85%	*	*	*	83%	82%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	87%	*	*	*	100%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	75%	78%	*	*	*	91%	77%

YOUR TREATMENT				Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	*	*	*	95%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	82%	87%	*	*	*	83%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	87%	*	*	*	91%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	71%	90%	*	*	*	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	79%	71%	*	*	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	86%	*	*	*	95%	86%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	77%	*	*	*	76%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	72%	*	*	*	80%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	67%	77%	*	*	*	*	70%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	67%	64%	*	*	*	*	67%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	63%	75%	*	*	*	74%	69%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	74%	*	*	*	85%	74%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	68%	*	*	*	81%	70%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	85%	*	*	*	89%	85%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	59%	*	*	*	67%	59%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	50%	*	*	*	68%	51%		

SUPPORT WHILE AT HOME	Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	53%	60%	*	*	*	78%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	43%	44%	*	*	*	64%	44%

CARE FROM YOUR GP PRACTICE	Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	36%	34%	*	*	*	50%	36%
Q52. Patient has had a review of cancer care by GP practice	18%	21%	*	*	*	23%	19%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	24%	28%	*	*	*	*	26%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	76%	*	*	*	77%	74%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	60%	*	*	*	64%	60%	

YOUR OVERALL NHS CARE				Male/Fema	ale/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	87%	89%	*	*	*	100%	88%
Q57. Administration of care was very good or good	85%	88%	*	*	*	86%	86%
Q58. Cancer research opportunities were discussed with patient	36%	42%	*	*	*	62%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.6	8.7	*	*	*	9.2	8.7

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not					Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	*	59%	55%	*	69%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	*	43%	47%	*	64%	59%

DIAGNOSTIC TESTS		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	91%	*	91%	74%	*	95%	91%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	81%	*	78%	78%	*	84%	81%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	*	66%	65%	*	72%	76%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	*	68%	61%	*	79%	78%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	*	89%	91%	*	95%	95%		

FINDING OUT THAT YOU HAD CANCER			Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	85%	64%	83%	84%	*	92%	85%		
Q13. Patient was definitely told sensitively that they had cancer	75%	73%	72%	77%	*	90%	76%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	82%	73%	81%	*	83%	78%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	100%	81%	88%	*	90%	87%		
Q16. Patient was told they could go back later for more information about their diagnosis	82%	*	78%	88%	*	88%	82%		

SUPPORT FROM A MAIN CONTACT PERSO	SON Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	90%	90%	89%	100%	*	92%	90%
Q18. Patient found it very or quite easy to contact their main contact person	84%	*	84%	73%	*	79%	83%
Q19. Patient found advice from main contact person was very or quite helpful	94%	*	94%	92%	*	93%	94%

DECIDING ON THE BEST TREATMENT			Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	82%	*	77%	72%	*	82%	81%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	64%	78%	69%	*	78%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	80%	74%	67%	*	88%	79%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	45%	*	51%	65%	*	64%	48%	

CARE PLANNING		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	71%	*	65%	80%	*	78%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	*	95%	88%	*	91%	92%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	*	97%	100%	*	100%	98%	

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	90%	*	88%	86%	*	89%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	45%	66%	64%	*	81%	73%
Q29. Patient was offered information about how to get financial help or benefits	70%	*	64%	86%	*	80%	71%

HOSPITAL CARE	Ethnicity									
	White	Mixed	Asian	Black	Other	Not given	All			
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	75%	*	79%	64%	*	75%	75%			
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	*	66%	50%	*	64%	62%			
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	*	61%	67%	*	75%	69%			
Q34. Patient was always able to get help from ward staff when needed	70%	*	55%	73%	*	66%	69%			
Q35. Patient was always able to discuss worries and fears with hospital staff	60%	*	50%	71%	*	67%	60%			
Q36. Hospital staff always did everything they could to help the patient control pain	79%	*	74%	77%	*	83%	79%			
Q37. Patient was always treated with respect and dignity while in hospital	83%	*	76%	87%	*	86%	82%			
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	*	88%	87%	*	93%	88%			
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	64%	73%	68%	*	82%	77%			

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	*	91%	94%	*	94%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	*	90%	79%	*	89%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	*	83%	*	*	89%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	76%	*	*	*	*	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	74%	*	*	*	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	86%	*	84%	81%	*	93%	86%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	*	76%	64%	*	79%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	78%	*	78%	*	*	83%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	70%	*	*	*	*	*	70%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	63%	*	*	*	*	*	67%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	70%	45%	59%	63%	*	64%	69%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	64%	70%	67%	*	79%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	55%	62%	60%	*	71%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	*	87%	83%	*	84%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	45%	50%	64%	*	70%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	40%	52%	42%	*	57%	51%

SUPPORT WHILE AT HOME	Ethnicity						
	White Mixed Asian Black Other Not give						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	56%	40%	62%	53%	*	67%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	43%	*	50%	47%	*	52%	44%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not giver					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	34%	*	32%	25%	*	50%	36%
Q52. Patient has had a review of cancer care by GP practice	19%	*	27%	18%	*	18%	19%

LIVING WITH AND BEYOND CANCER	LIVING WITH AND BEYOND CANCER			Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All				
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	25%	*	28%	*	*	36%	26%				
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	*	73%	64%	*	81%	74%				
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	*	42%	48%	*	63%	60%				

YOUR OVERALL NHS CARE				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	88%	91%	91%	75%	*	92%	88%
Q57. Administration of care was very good or good	86%	91%	82%	81%	*	86%	86%
Q58. Cancer research opportunities were discussed with patient	37%	*	47%	43%	*	52%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.2	8.1	8.4	*	8.9	8.7

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE			IMD Quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	72%	76%	80%	73%	82%	*	76%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	54%	65%	57%	64%	59%	*	59%	

DIAGNOSTIC TESTS		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q5. Patient received all the information needed about the diagnostic test in advance	91%	91%	90%	89%	93%	*	91%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	79%	80%	81%	85%	83%	*	81%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	72%	76%	78%	75%	*	76%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	71%	72%	82%	84%	*	78%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	91%	97%	97%	97%	*	95%		

FINDING OUT THAT YOU HAD CANCER		IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	84%	87%	85%	82%	*	85%	
Q13. Patient was definitely told sensitively that they had cancer	78%	73%	75%	77%	72%	*	76%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	81%	75%	76%	77%	78%	*	78%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	89%	84%	85%	89%	88%	*	87%	
Q16. Patient was told they could go back later for more information about their diagnosis	85%	82%	79%	79%	83%	*	82%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quinti			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	92%	88%	91%	89%	92%	*	90%
Q18. Patient found it very or quite easy to contact their main contact person	83%	79%	86%	86%	81%	*	83%
Q19. Patient found advice from main contact person was very or quite helpful	93%	95%	94%	94%	95%	*	94%

IMD quintile tables

DECIDING ON THE BEST TREATMENT	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	78%	82%	84%	80%	*	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	77%	77%	81%	77%	*	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	78%	78%	75%	82%	*	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	40%	48%	44%	46%	*	48%

CARE PLANNING				IMD Quinti	le		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	68%	73%	64%	78%	*	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	90%	95%	89%	95%	93%	*	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	97%	98%	99%	98%	*	98%

SUPPORT FROM HOSPITAL STAFF		IMD Quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q27. Staff provided the patient with relevant information on available support	89%	91%	90%	88%	94%	*	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	67%	73%	72%	75%	*	73%
Q29. Patient was offered information about how to get financial help or benefits	70%	70%	72%	66%	76%	*	71%

HOSPITAL CARE	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	80%	76%	64%	74%	73%	*	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	61%	66%	57%	65%	58%	*	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	72%	72%	66%	64%	67%	*	69%
Q34. Patient was always able to get help from ward staff when needed	75%	73%	62%	61%	66%	*	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	61%	53%	54%	65%	*	60%
Q36. Hospital staff always did everything they could to help the patient control pain	81%	80%	72%	81%	81%	*	79%
Q37. Patient was always treated with respect and dignity while in hospital	87%	81%	79%	78%	82%	*	82%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	87%	86%	85%	95%	*	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	76%	74%	75%	78%	81%	*	77%

IMD quintile tables

YOUR TREATMENT	IMD Quintile								
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	90%	89%	89%	93%	*	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	84%	84%	81%	82%	*	84%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	83%	94%	87%	88%	*	88%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	73%	82%	69%	79%	71%	*	75%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	88%	64%	80%	75%	67%	*	76%		
Q42_1. Patient completely had enough understandable information about progress with surgery	87%	85%	82%	90%	85%	*	86%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	74%	73%	77%	79%	*	77%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	84%	65%	85%	80%	73%	*	78%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	70%	74%	59%	74%	70%	*	70%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	84%	64%	50%	60%	60%	*	67%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	72%	70%	71%	61%	63%	*	69%		

IMMEDIATE AND LONG TERM SIDE EFFECTS				IMD Quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	71%	75%	73%	73%	*	74%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	75%	65%	73%	64%	69%	*	70%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	83%	85%	89%	82%	88%	*	85%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	63%	60%	59%	54%	55%	*	59%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	48%	51%	43%	56%	*	51%	

SUPPORT WHILE AT HOME	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	64%	54%	53%	49%	56%	*	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	48%	38%	39%	43%	53%	*	44%

CARE FROM YOUR GP PRACTICE							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	33%	35%	31%	41%	43%	*	36%
Q52. Patient has had a review of cancer care by GP practice	21%	18%	19%	19%	19%	*	19%

IMD quintile tables

LIVING WITH AND BEYOND CANCER				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	30%	21%	26%	24%	31%	*	26%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	66%	77%	77%	85%	*	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	59%	57%	56%	70%	*	60%

OUR OVERALL NHS CARE				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q56. The whole care team worked well together	89%	87%	88%	89%	88%	*	88%
Q57. Administration of care was very good or good	89%	83%	85%	87%	83%	*	86%
Q58. Cancer research opportunities were discussed with patient	43%	41%	31%	32%	46%	*	39%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.6	8.8	8.5	8.8	*	8.7

SUPPORT FROM YOUR GP PRACTICE	Long term condition status				
	Yes	No	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	75%	78%	67%	76%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	59%	59%	59%	59%	

DIAGNOSTIC TESTS				
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	93%	94%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	84%	83%	81%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	77%	80%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	76%	84%	76%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	97%	94%	95%

FINDING OUT THAT YOU HAD CANCER		Long term condition status		
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	85%	86%	82%	85%
Q13. Patient was definitely told sensitively that they had cancer	74%	78%	83%	76%
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	81%	83%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	90%	83%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	82%	92%	82%

SUPPORT FROM A MAIN CONTACT PERSON	RSON Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	90%	90%	91%	90%	
Q18. Patient found it very or quite easy to contact their main contact person	82%	87%	80%	83%	
Q19. Patient found advice from main contact person was very or quite helpful	93%	96%	96%	94%	

DECIDING ON THE BEST TREATMENT	Long term condition	ng term condition status		
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	80%	86%	77%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	82%	76%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	78%	81%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	47%	48%	64%	48%

CARE PLANNING	Long term condition status				
	Yes	No	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	68%	80%	73%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	91%	96%	93%	92%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	100%	98%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	88%	94%	91%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	78%	85%	73%
Q29. Patient was offered information about how to get financial help or benefits	69%	73%	79%	71%

HOSPITAL CARE Long term condition status					
	Yes	No	Not given	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	74%	79%	70%	75%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	60%	69%	50%	62%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	72%	61%	69%	
Q34. Patient was always able to get help from ward staff when needed	68%	72%	58%	69%	
Q35. Patient was always able to discuss worries and fears with hospital staff	57%	65%	74%	60%	
Q36. Hospital staff always did everything they could to help the patient control pain	77%	85%	84%	79%	
Q37. Patient was always treated with respect and dignity while in hospital	81%	84%	83%	82%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	91%	83%	88%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	75%	80%	88%	77%	

YOUR TREATMENT Long term condition status						
	Yes	No	Not given	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	94%	85%	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	83%	88%	77%	84%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	91%	80%	88%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	76%	73%	*	75%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	75%	76%	*	76%		
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	89%	84%	86%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	76%	79%	76%	77%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	75%	83%	89%	78%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	70%	66%	*	70%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	65%	71%	*	67%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	67%	71%	75%	69%		

IMMEDIATE AND LONG TERM SIDE EFFECTS Long term condition status					
	Yes	No	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	72%	80%	75%	74%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	67%	75%	76%	70%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	83%	90%	90%	85%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	56%	65%	63%	59%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	48%	57%	62%	51%	

SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	54%	61%	76%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	41%	53%	60%	44%

CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	36%	35%	34%	36%
Q52. Patient has had a review of cancer care by GP practice	20%	19%	21%	19%

LIVING WITH AND BEYOND CANCER		Long term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	25%	30%	33%	26%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	77%	82%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	58%	65%	68%	60%

YOUR OVERALL NHS CARE		Long term condition status		
	Yes	No	Not given	All
Q56. The whole care team worked well together	87%	91%	90%	88%
Q57. Administration of care was very good or good	86%	88%	81%	86%
Q58. Cancer research opportunities were discussed with patient	38%	41%	45%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.6	8.9	8.9	8.7

