

Cancer Patient Experience Survey

2022 Results

NHS Cornwall and the Isles of Scilly Integrated Care Board

Published July 2023

Executive Summary

Questions Above 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	70%	61%	69%	65%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	82%	75%	82%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	76%	81%	78%
Q18. Patient found it very or quite easy to contact their main contact person	89%	80%	87%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	77%	82%	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	91%	95%	93%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	75%	65%	74%	69%
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	87%	92%	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	83%	75%	82%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	85%	77%	84%	81%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	86%	74%	85%	79%
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	71%	77%	74%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	83%	89%	86%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	52%	39%	50%	45%

Questions Below Expected Range

	Case	Mix Adjusted S	cores	
	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	63%	72%	80%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	81%	83%	87%	85%

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.

Age group tables

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

1,265 patients responded out of a total of 2,092 patients, resulting in a response rate of 60%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	2,224	2,092	1,265	60%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

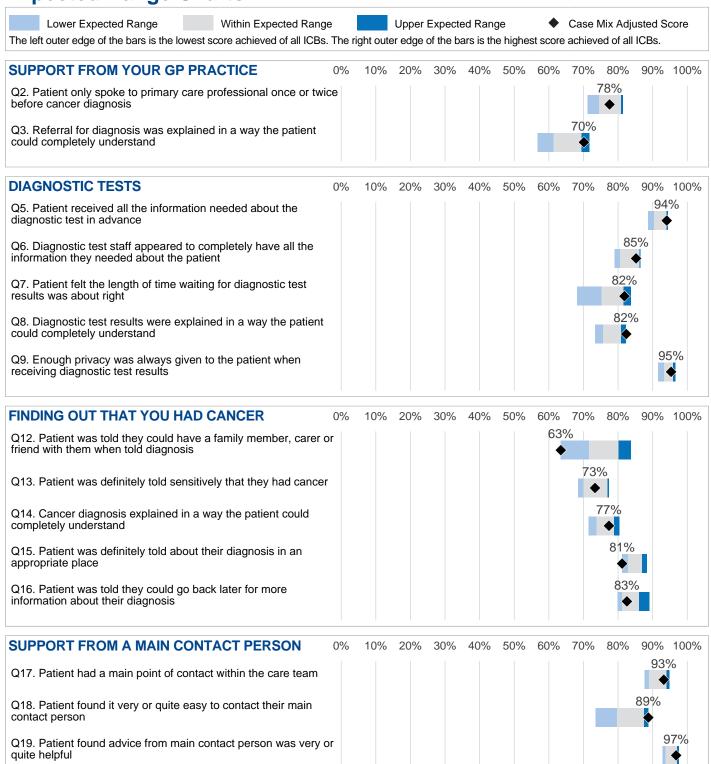
	Number of Respondents
Paper	1,029
Online	236
Phone	0
Translation Service	0
Total	1,265

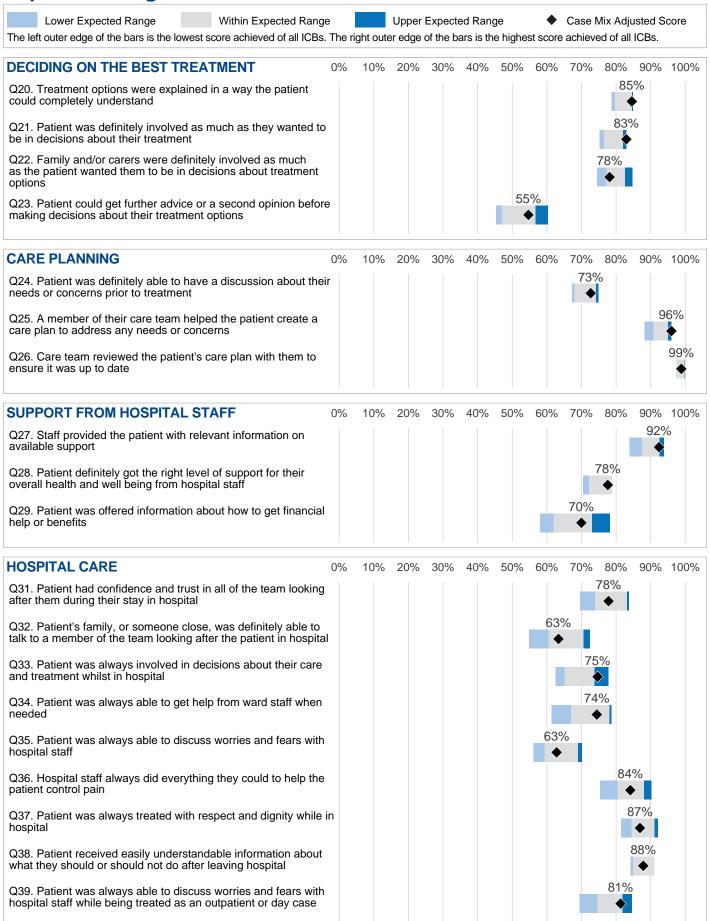
Respondents by Tumour Group

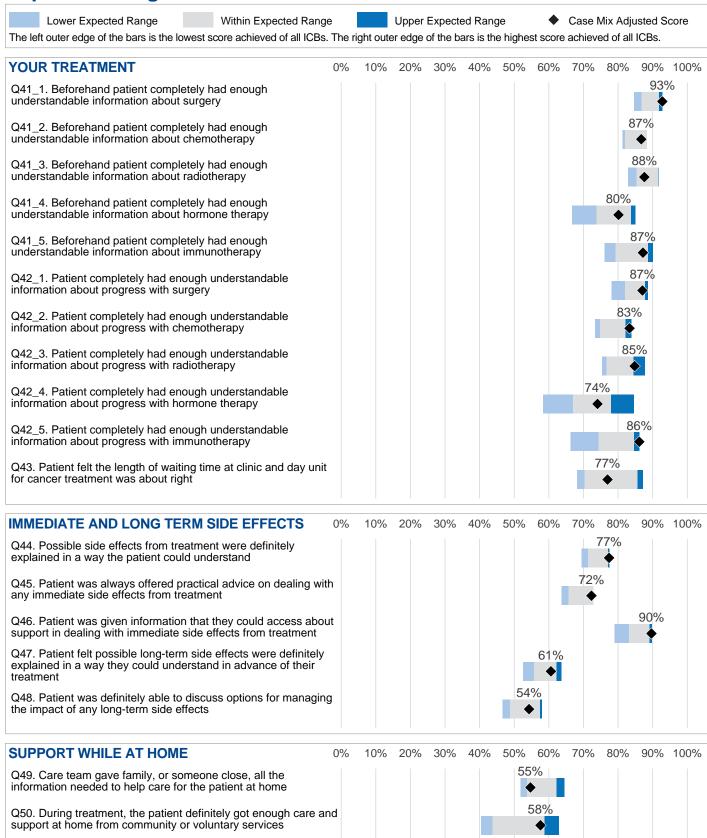
	Number of Respondents
Brain / CNS	2
Breast	259
Colorectal / LGT	118
Gynaecological	45
Haematological	181
Head and Neck	32
Lung	92
Prostate	198
Sarcoma	11
Skin	88
Upper Gastro	54
Urological	73
Other	112
Total	1,265

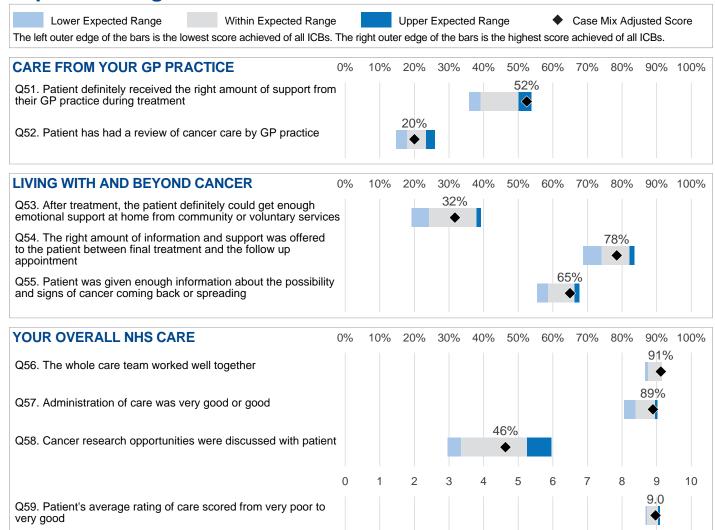
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,132
Irish	*
Gypsy or Irish Traveller	*
Any other White background	42
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	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	65
Total	1,265









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				
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	659	76%	667	78%		78%	74%	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	924	70%	906	70%		70%	61%	69%	65%

		Una	djusted So	cores	Case M				
DIAGNOSTIC TESTS	2021 n	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	974	96%	985	94%		94%	90%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	1031	88%	1037	86%		85%	81%	86%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	1032	86%	1030	82%		82%	75%	82%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	1038	83%	1042	83%		82%	76%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	1037	94%	1037	96%		95%	93%	96%	95%

		Una	djusted So	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	1134	57%	1163	64%	A	63%	72%	80%	76%
Q13. Patient was definitely told sensitively that they had cancer	1223	76%	1250	74%		73%	70%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	1230	80%	1253	78%		77%	74%	79%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	1218	83%	1240	82%		81%	83%	87%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	1089	86%	1118	83%		83%	81%	86%	84%

		Una	djusted So	cores	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	1202	95%	1206	93%		93%	89%	94%	92%
Q18. Patient found it very or quite easy to contact their main contact person	1063	90%	1020	89%		89%	80%	87%	84%
Q19. Patient found advice from main contact person was very or quite helpful	1094	98%	1070	97%		97%	94%	97%	95%

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

**	No score	available	for 2021

	Unadjusted Scores						Case Mix Adjusted Scores			
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	1163	85%	1171	85%		85%	80%	85%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1225	84%	1247	84%		83%	77%	82%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	951	69%	1001	79%	•	78%	77%	83%	80%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	552	55%	540	56%		55%	47%	57%	52%	

		Una	djusted So	cores		Case M			
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	1126	76%	1119	73%		73%	68%	74%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	672	94%	617	96%		96%	91%	95%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	519	99%	486	99%		99%	98%	100%	99%

		Una	djusted So	cores		Case M	FI		
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	1005	92%	1065	93%		92%	88%	93%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1220	81%	1243	79%		78%	72%	79%	75%
Q29. Patient was offered information about how to get financial help or benefits	553	70%	581	69%		70%	62%	73%	67%

		Una	djusted So		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	489	84%	440	79%		78%	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	391	61%	336	65%		63%	61%	71%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	484	75%	436	75%		75%	65%	74%	69%
Q34. Patient was always able to get help from ward staff when needed	483	80%	429	75%		74%	67%	78%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	483	71%	420	64%		63%	59%	69%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	435	88%	371	85%		84%	80%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	489	92%	438	87%	•	87%	84%	91%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	477	90%	431	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	1051	84%	1073	82%		81%	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	606	93%	600	93%		93%	87%	92%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	534	90%	488	87%		87%	82%	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	360	89%	401	88%		88%	85%	92%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	216	84%	259	83%		80%	74%	84%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	235	91%	235	88%		87%	79%	89%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	604	85%	599	87%		87%	82%	88%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	533	84%	491	84%		83%	75%	82%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	364	82%	402	85%		85%	77%	84%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	211	74%	255	76%		74%	67%	78%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	234	87%	232	87%		86%	74%	85%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1205	78%	1224	78%		77%	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	1185	78%	1180	78%		77%	71%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1129	74%	1125	73%		72%	66%	73%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	911	88%	913	90%		90%	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	1109	66%	1105	62%		61%	56%	62%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	954	59%	945	56%		54%	49%	58%	53%

		Una	djusted So	cores	Case M				
SUPPORT WHILE AT HOME	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	757	59%	765	56%		55%	54%	62%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	463	56%	449	58%		58%	44%	59%	51%

Comparability tables

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▲ 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				
CARE 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
Q51. Patient definitely received the right amount of support from their GP practice during treatment	793	54%	791	53%		52%	39%	50%	45%
Q52. Patient has had a review of cancer care by GP practice	1170	20%	1196	20%		20%	18%	23%	21%

		Una	djusted So	cores		Case M	F		
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	226	34%	238	32%		32%	24%	38%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	531	83%	561	80%		78%	74%	82%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	984	68%	958	66%		65%	59%	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	1178	93%	1197	91%		91%	88%	92%	90%
Q57. Administration of care was very good or good	1213	92%	1240	89%		89%	84%	90%	87%
Q58. Cancer research opportunities were discussed with patient	732	47%	764	47%		46%	34%	53%	43%
Q59. Patient's average rating of care scored from very poor to very good	1180	9.2	1212	9.0	•	9.0	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	*	95%	76%	75%	70%	83%	50%	79%	*	93%	62%	76%	65%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	82%	67%	71%	59%	86%	59%	70%	*	76%	61%	64%	70%	70%

DIAGNOSTIC TESTS Tumour Type														
	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	*	95%	97%	92%	91%	97%	95%	93%	*	95%	98%	90%	93%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	87%	89%	72%	84%	93%	82%	90%	80%	86%	82%	83%	83%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	85%	89%	86%	84%	80%	76%	83%	*	77%	76%	78%	84%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	85%	85%	79%	75%	87%	83%	80%	*	90%	89%	83%	83%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	96%	94%	98%	93%	97%	99%	96%	90%	97%	98%	92%	95%	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	ur Ty	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	*	66%	61%	62%	61%	43%	76%	56%	64%	64%	73%	53%	75%	64%
Q13. Patient was definitely told sensitively that they had cancer	*	84%	72%	76%	68%	81%	70%	70%	73%	84%	77%	58%	72%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	85%	79%	78%	69%	83%	75%	76%	91%	86%	74%	71%	77%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	89%	81%	80%	76%	84%	81%	79%	64%	87%	90%	79%	78%	82%
Q16. Patient was told they could go back later for more information about their diagnosis	*	95%	78%	82%	79%	88%	77%	83%	82%	84%	84%	71%	73%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Ty	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%	94%	93%	94%	96%	94%	92%	91%	99%	96%	89%	92%	93%
Q18. Patient found it very or quite easy to contact their main contact person	*	89%	94%	95%	89%	88%	96%	81%	*	92%	96%	80%	91%	89%
Q19. Patient found advice from main contact person was very or quite helpful	*	99%	96%	95%	96%	100%	98%	97%	*	97%	100%	91%	97%	97%

DECIDING ON THE BEST TREATMENT							Tumo	ur Ty	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	*	88%	88%	89%	83%	90%	76%	82%	91%	84%	94%	82%	82%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	88%	85%	89%	82%	88%	75%	82%	82%	89%	92%	81%	81%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	73%	75%	84%	83%	86%	77%	80%	90%	83%	88%	75%	75%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	62%	44%	67%	56%	62%	53%	48%	*	66%	72%	61%	44%	56%

CARE PLANNING							Tumo	ur Ty _l	ре					
	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	*	74%	80%	68%	68%	89%	68%	71%	64%	78%	76%	68%	78%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	95%	97%	91%	96%	100%	98%	96%	*	100%	97%	97%	95%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	99%	100%	100%	98%	100%	100%	99%	*	97%	100%	96%	100%	99%

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	*	94%	92%	95%	90%	93%	92%	93%	*	99%	98%	84%	88%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	79%	78%	84%	79%	91%	82%	77%	73%	87%	74%	75%	72%	79%
Q29. Patient was offered information about how to get financial help or benefits	*	74%	68%	75%	67%	67%	73%	57%	*	79%	76%	73%	62%	69%

HOSPITAL CARE							Tumo	our Typ	ре					
	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	*	79%	76%	93%	77%	85%	75%	75%	*	83%	80%	76%	77%	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	*	57%	57%	80%	70%	72%	67%	56%	*	*	78%	50%	72%	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	83%	73%	86%	78%	85%	64%	64%	*	82%	88%	54%	71%	75%
Q34. Patient was always able to get help from ward staff when needed	*	77%	71%	67%	83%	78%	74%	74%	*	75%	80%	76%	70%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	70%	67%	57%	70%	75%	63%	56%	*	60%	64%	43%	60%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	85%	81%	76%	85%	100%	84%	89%	*	*	89%	81%	83%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	87%	88%	80%	89%	95%	82%	86%	*	92%	92%	83%	88%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	93%	86%	90%	87%	100%	81%	83%	*	92%	92%	79%	82%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	79%	80%	78%	87%	92%	81%	83%	*	84%	80%	85%	81%	82%

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	*	95%	91%	94%	94%	91%	88%	95%	*	95%	88%	93%	88%	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	87%	93%	91%	86%	*	76%	94%	*	*	93%	90%	82%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	91%	88%	100%	83%	91%	86%	86%	*	*	90%	89%	78%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	82%	*	*	*	*	*	83%	*	*	*	*	92%	83%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	84%	*	*	76%	*	82%	*	*	100%	*	96%	97%	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	90%	87%	86%	78%	91%	87%	81%	*	92%	84%	79%	86%	87%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	82%	87%	86%	86%	*	85%	94%	*	*	84%	80%	78%	84%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	87%	100%	100%	78%	95%	86%	81%	*	*	80%	67%	83%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	75%	*	*	*	*	*	75%	*	*	*	*	85%	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	86%	*	*	83%	*	81%	*	*	96%	*	92%	94%	87%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	74%	81%	88%	69%	93%	68%	90%	73%	86%	81%	75%	75%	78%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our Ty	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	*	79%	80%	79%	76%	84%	72%	80%	*	82%	77%	75%	74%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	72%	77%	71%	74%	87%	69%	68%	70%	77%	80%	61%	76%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	93%	93%	84%	87%	96%	89%	89%	*	89%	88%	84%	86%	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	61%	69%	70%	57%	82%	49%	66%	*	67%	58%	54%	68%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	56%	60%	58%	53%	72%	51%	54%	*	61%	49%	54%	56%	56%

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	*	44%	70%	60%	52%	77%	65%	50%	*	54%	62%	52%	58%	56%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	49%	61%	72%	54%	88%	52%	57%	*	58%	71%	47%	60%	58%

CARE FROM YOUR GP PRACTICE							Tumo	ur Ty	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	*	49%	55%	72%	50%	67%	48%	55%	*	56%	56%	51%	50%	53%
Q52. Patient has had a review of cancer care by GP practice	*	21%	23%	25%	13%	19%	21%	25%	36%	14%	17%	23%	16%	20%

LIVING WITH AND BEYOND CANCER							Tumo	our 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	*	29%	30%	*	20%	*	44%	35%	*	45%	*	27%	21%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	82%	83%	83%	75%	96%	81%	75%	*	86%	90%	71%	66%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	59%	66%	68%	78%	82%	53%	65%	*	82%	66%	63%	65%	66%

YOUR OVERALL NHS CARE							Tumo	our Ty	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	*	94%	89%	93%	92%	100%	89%	90%	100%	94%	92%	84%	90%	91%
Q57. Administration of care was very good or good	*	93%	89%	91%	91%	97%	93%	87%	91%	89%	87%	84%	84%	89%
Q58. Cancer research opportunities were discussed with patient	*	39%	38%	44%	64%	37%	44%	64%	*	32%	28%	45%	41%	47%
Q59. Patient's average rating of care scored from very poor to very good	*	9.2	9.0	9.2	9.1	9.6	8.9	8.8	8.7	9.1	9.2	8.8	9.0	9.0

Age group tables

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	*	*	72%	77%	82%	75%	80%	73%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	65%	84%	77%	64%	69%	76%	70%

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	*	*	76%	97%	93%	96%	94%	88%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	84%	83%	83%	87%	85%	88%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	53%	70%	77%	84%	87%	88%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	67%	88%	80%	85%	84%	71%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	89%	97%	93%	95%	98%	96%	96%

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	*	*	39%	49%	61%	62%	71%	67%	64%
Q13. Patient was definitely told sensitively that they had cancer	*	*	50%	68%	70%	73%	79%	83%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	63%	74%	74%	78%	83%	81%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	65%	74%	80%	82%	86%	83%	82%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	87%	87%	87%	83%	81%	67%	83%

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	*	*	96%	97%	90%	95%	94%	89%	93%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	72%	90%	89%	88%	91%	87%	89%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	89%	97%	96%	98%	97%	95%	97%

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	*	*	81%	90%	83%	83%	87%	80%	85%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	73%	82%	80%	85%	86%	87%	84%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	56%	72%	76%	78%	84%	80%	79%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	54%	61%	49%	52%	63%	56%	56%		

Age group tables

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	*	*	50%	75%	73%	75%	73%	67%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	90%	97%	93%	97%	98%	89%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	100%	99%	99%	100%	99%

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	*	*	86%	94%	91%	94%	93%	86%	93%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	43%	77%	72%	80%	83%	79%	79%		
Q29. Patient was offered information about how to get financial help or benefits	*	*	71%	75%	74%	68%	66%	53%	69%		

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	*	*	60%	64%	79%	85%	79%	65%	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	*	*	*	57%	65%	63%	73%	50%	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	50%	79%	81%	78%	69%	69%	75%
Q34. Patient was always able to get help from ward staff when needed	*	*	60%	70%	75%	79%	77%	60%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	60%	61%	66%	67%	59%	47%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	60%	81%	85%	88%	85%	*	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	90%	91%	86%	89%	88%	81%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	90%	88%	87%	91%	84%	86%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	65%	83%	78%	83%	85%	76%	82%

Age group tables

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	*	*	80%	92%	94%	94%	93%	96%	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	86%	90%	86%	88%	88%	67%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	94%	87%	93%	84%	73%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	83%	73%	86%	84%	*	83%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	84%	82%	91%	91%	*	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	93%	92%	85%	87%	89%	92%	87%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	64%	90%	83%	88%	82%	67%	84%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	97%	85%	83%	83%	80%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	87%	69%	79%	76%	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	89%	77%	91%	88%	*	87%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	59%	74%	75%	79%	83%	70%	78%

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	*	*	76%	79%	74%	81%	79%	64%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	57%	74%	69%	74%	77%	62%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	86%	95%	88%	90%	91%	71%	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	48%	64%	60%	65%	63%	40%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	44%	55%	54%	60%	53%	41%	56%

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	*	*	33%	55%	47%	56%	62%	60%	56%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	27%	68%	48%	60%	63%	54%	58%	

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%	60%	47%	51%	58%	57%	53%		
Q52. Patient has had a review of cancer care by GP practice	*	*	11%	28%	26%	17%	19%	19%	20%		

Age group tables

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	*	*	*	45%	32%	26%	30%	42%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	60%	88%	81%	79%	81%	76%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	50%	56%	62%	67%	72%	72%	66%

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	*	*	95%	94%	88%	92%	93%	88%	91%
Q57. Administration of care was very good or good	*	*	68%	91%	88%	89%	92%	91%	89%
Q58. Cancer research opportunities were discussed with patient	*	*	38%	44%	42%	51%	49%	35%	47%
Q59. Patient's average rating of care scored from very poor to very good	*	*	8.2	9.1	8.9	9.0	9.2	8.6	9.0

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	81%	75%	*	*	*	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	73%	67%	*	*	*	68%	70%

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	95%	94%	*	*	*	81%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	88%	*	*	*	72%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	84%	*	*	*	81%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	83%	83%	*	*	*	72%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	95%	*	*	*	87%	96%

FINDING OUT THAT YOU HAD CANCER			Male/Female/Non-binary/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	64%	63%	*	*	*	63%	64%		
Q13. Patient was definitely told sensitively that they had cancer	77%	71%	*	*	*	70%	74%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	76%	*	*	*	66%	78%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	80%	*	*	*	72%	82%		
Q16. Patient was told they could go back later for more information about their diagnosis	86%	80%	*	*	*	82%	83%		

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Fema	le/Non-bina	ry/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	94%	93%	*	*	*	90%	93%
Q18. Patient found it very or quite easy to contact their main contact person	91%	87%	*	*	*	91%	89%
Q19. Patient found advice from main contact person was very or quite helpful	98%	96%	*	*	*	94%	97%

DECIDING ON THE BEST TREATMENT				Male/Fema	ale/Non-bina	ry/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	85%	84%	*	*	*	89%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	84%	*	*	*	78%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	76%	81%	*	*	*	82%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	55%	*	*	*	54%	56%

CARE PLANNING				Male/Fema	ile/Non-bina	ry/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	71%	75%	*	*	*	74%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	97%	*	*	*	95%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	*	*	*	100%	99%

SUPPORT FROM HOSPITAL STAFF				Male/Fema	ile/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	92%	93%	*	*	*	91%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	81%	*	*	*	83%	79%
Q29. Patient was offered information about how to get financial help or benefits	72%	66%	*	*	*	76%	69%

HOSPITAL CARE	IOSPITAL CARE						
	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	76%	81%	*	*	*	*	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	64%	65%	*	*	*	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	76%	75%	*	*	*	*	75%
Q34. Patient was always able to get help from ward staff when needed	72%	80%	*	*	*	*	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	66%	*	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	88%	*	*	*	*	85%
Q37. Patient was always treated with respect and dignity while in hospital	86%	90%	*	*	*	*	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	87%	*	*	*	*	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	84%	*	*	*	81%	82%

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	93%	94%	*	*	*	91%	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	89%	*	*	*	91%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	86%	*	*	*	82%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	81%	*	*	*	*	83%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	90%	*	*	*	*	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	87%	88%	*	*	*	83%	87%
Q42_2. Patient completely had enough understandable nformation about progress with chemotherapy	83%	85%	*	*	*	64%	84%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	87%	84%	*	*	*	58%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	77%	76%	*	*	*	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	85%	88%	*	*	*	*	87%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	72%	84%	*	*	*	90%	78%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS			Male/Fema	ile/Non-bina	ry/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	77%	79%	*	*	*	81%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	74%	*	*	*	76%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	89%	*	*	*	82%	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	64%	*	*	*	62%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	56%	*	*	*	69%	56%

SUPPORT WHILE AT HOME				Male/Fema	le/Non-bina	ry/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	50%	59%	*	*	*	71%	56%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	62%	*	*	*	57%	58%

CARE FROM YOUR GP PRACTICE				Male/Fema	ile/Non-bina	ry/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	49%	55%	*	*	*	50%	53%
Q52. Patient has had a review of cancer care by GP practice	20%	20%	*	*	*	19%	20%

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	28%	34%	*	*	*	50%	32%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	79%	*	*	*	85%	80%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	69%	*	*	*	76%	66%		

Male/Female/Non-binary/Other tables

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	92%	91%	*	*	*	87%	91%
Q57. Administration of care was very good or good	90%	89%	*	*	*	87%	89%
Q58. Cancer research opportunities were discussed with patient	42%	52%	*	*	*	38%	47%
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.0	*	*	*	9.0	9.0

Ethnicity tables

SUPPORT FROM YOUR GP PRACTICE				Ethr	nicity		
	White Mixed Asian Black Other Not given					All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	*	*	*	*	78%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	*	*	*	*	69%	70%

DIAGNOSTIC TESTS				Ethr	Ethnicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	95%	*	*	*	*	85%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	86%	*	*	*	*	76%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	83%	*	*	*	*	71%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	83%	*	*	*	*	72%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	88%	96%

FINDING OUT THAT YOU HAD CANCER				Ethr	nicity		
	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	64%	*	*	*	*	62%	64%
Q13. Patient was definitely told sensitively that they had cancer	75%	*	*	*	*	64%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	*	*	*	65%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	*	*	*	*	69%	82%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	*	*	*	*	78%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N			Ethr	nicity	-	
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	93%	*	*	*	*	89%	93%
Q18. Patient found it very or quite easy to contact their main contact person	89%	*	*	*	*	81%	89%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	*	*	93%	97%

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	85%	*	*	*	*	83%	85%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	85%	*	*	*	*	67%	84%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	78%	*	*	*	*	80%	79%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	*	*	*	*	51%	56%	

Ethnicity tables

CARE PLANNING				Ethr	nicity		
	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	73%	*	*	*	*	75%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	*	*	*	*	94%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	*	*	*	100%	99%

SUPPORT FROM HOSPITAL STAFF				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	93%	*	*	*	*	91%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	*	*	*	*	77%	79%
Q29. Patient was offered information about how to get financial help or benefits	69%	*	*	*	*	81%	69%

HOSPITAL CARE				Ethr	nicity		
	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	78%	*	*	*	*	82%	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	64%	*	*	*	*	86%	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	75%	*	*	*	*	76%	75%
Q34. Patient was always able to get help from ward staff when needed	75%	*	*	*	*	76%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	*	*	*	*	71%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	*	*	*	85%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	*	*	*	*	82%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	*	*	*	*	94%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	*	*	*	*	78%	82%

Ethnicity tables

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	*	*	*	*	90%	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	*	*	*	*	79%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	53%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	83%	*	*	*	*	85%	83%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	87%	*	*	*	*	90%	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	88%	*	*	*	*	76%	87%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	84%	*	*	*	*	67%	84%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	*	*	*	*	47%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	77%	*	*	*	*	69%	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	86%	*	*	*	*	91%	87%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	78%	*	*	*	*	78%	78%

IMMEDIATE AND LONG TERM SIDE EFFECT	S		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	78%	*	*	*	*	73%	78%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	73%	*	*	*	*	73%	73%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	*	*	*	*	83%	90%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	*	*	*	*	57%	62%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	*	*	*	*	63%	56%	

SUPPORT WHILE AT HOME	Ethnicity						
	White Mixed Asian Black Other Not given						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	55%	*	*	*	*	61%	56%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	58%	*	*	*	*	46%	58%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not give					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	52%	*	*	*	*	55%	53%
Q52. Patient has had a review of cancer care by GP practice	20%	*	*	*	*	20%	20%

Ethnicity tables

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	31%	*	*	*	*	33%	32%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	*	*	*	*	74%	80%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	*	*	*	*	67%	66%		

YOUR OVERALL NHS CARE		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q56. The whole care team worked well together	92%	*	*	*	*	88%	91%	
Q57. Administration of care was very good or good	90%	*	*	*	*	82%	89%	
Q58. Cancer research opportunities were discussed with patient	48%	*	*	*	*	39%	47%	
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	*	*	*	8.7	9.0	

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD Quintile						
	1 (most deprived) 2 3 4 5 (least deprived) England					Non- England	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	82%	79%	76%	78%	79%	*	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65%	71%	68%	70%	75%	*	70%

DIAGNOSTIC TESTS				IMD Quint	ile		
	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	90%	96%	95%	89%	100%	*	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	89%	86%	89%	78%	83%	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	81%	83%	82%	81%	88%	*	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	84%	83%	83%	78%	96%	*	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	95%	96%	96%	100%	*	96%

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	63%	63%	66%	63%	59%	*	64%	
Q13. Patient was definitely told sensitively that they had cancer	75%	72%	78%	70%	87%	*	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	77%	78%	80%	83%	*	78%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	81%	83%	79%	93%	*	82%	
Q16. Patient was told they could go back later for more information about their diagnosis	85%	82%	85%	80%	89%	*	83%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quinti	le		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	91%	93%	94%	94%	100%	*	93%
Q18. Patient found it very or quite easy to contact their main contact person	90%	88%	91%	87%	100%	*	89%
Q19. Patient found advice from main contact person was very or quite helpful	99%	97%	97%	95%	100%	*	97%

IMD quintile tables

DECIDING ON THE BEST TREATMENT				IMD Quinti	le		
	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	88%	82%	86%	87%	97%	*	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	86%	83%	85%	83%	90%	*	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	80%	81%	73%	70%	*	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	63%	55%	56%	53%	*	*	56%

CARE PLANNING				IMD Quintil	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	75%	76%	72%	67%	85%	*	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	98%	96%	96%	94%	100%	*	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	99%	99%	99%	100%	*	99%

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	88%	94%	92%	93%	96%	*	93%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	80%	80%	76%	87%	*	79%		
Q29. Patient was offered information about how to get financial help or benefits	69%	69%	72%	62%	85%	*	69%		

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	76%	81%	77%	76%	*	*	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	65%	66%	66%	57%	*	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	79%	73%	72%	*	*	75%
Q34. Patient was always able to get help from ward staff when needed	67%	77%	75%	77%	*	*	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	53%	66%	63%	63%	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	79%	86%	86%	84%	*	*	85%
Q37. Patient was always treated with respect and dignity while in hospital	76%	91%	87%	85%	*	*	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	79%	89%	90%	84%	*	*	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	87%	84%	79%	81%	84%	*	82%

IMD quintile tables

YOUR TREATMENT				IMD Quinti	uintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All			
Q41_1. Beforehand patient completely had enough understandable information about surgery	96%	93%	92%	94%	100%	*	93%			
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	89%	86%	88%	82%	*	87%			
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	88%	87%	93%	*	*	88%			
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	86%	86%	76%	88%	*	*	83%			
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	96%	87%	86%	89%	*	*	88%			
Q42_1. Patient completely had enough understandable information about progress with surgery	86%	87%	86%	89%	100%	*	87%			
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	86%	83%	85%	81%	82%	*	84%			
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	84%	84%	83%	90%	*	*	85%			
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	85%	76%	71%	88%	*	*	76%			
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	91%	84%	87%	86%	*	*	87%			
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	73%	79%	78%	81%	69%	*	78%			

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	76%	80%	77%	75%	77%	*	78%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	73%	72%	72%	80%	*	73%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	90%	91%	86%	100%	*	90%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	64%	63%	59%	52%	*	62%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	55%	57%	54%	52%	*	56%		

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	58%	53%	57%	58%	40%	*	56%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	44%	56%	63%	58%	65%	*	58%

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	43%	58%	51%	50%	38%	*	53%
Q52. Patient has had a review of cancer care by GP practice	17%	21%	19%	19%	21%	*	20%

Cancer Patient Experience Survey 2022 NHS Cornwall and the Isles of Scilly Integrated Care Board

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	32%	31%	33%	30%	30%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	70%	81%	79%	82%	94%	*	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	71%	67%	65%	66%	61%	*	66%

YOUR 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	91%	92%	94%	87%	90%	*	91%
Q57. Administration of care was very good or good	89%	90%	91%	84%	97%	*	89%
Q58. Cancer research opportunities were discussed with patient	41%	49%	48%	44%	43%	*	47%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	9.1	8.8	9.2	*	9.0

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	77%	80%	79%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	68%	73%	67%	70%	

DIAGNOSTIC TESTS		Long term condition status		
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	94%	95%	90%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	88%	84%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	83%	82%	86%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	81%	87%	77%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	97%	91%	96%

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	64%	63%	58%	64%
Q13. Patient was definitely told sensitively that they had cancer	73%	75%	75%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	81%	70%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	81%	85%	76%	82%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	85%	84%	83%

SUPPORT FROM A MAIN CONTACT PERSON	Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	93%	94%	93%	93%	
Q18. Patient found it very or quite easy to contact their main contact person	88%	91%	90%	89%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	97%	98%	97%	

DECIDING ON THE BEST TREATMENT		Long term condition status		
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	86%	90%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	85%	80%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	77%	80%	82%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	56%	57%	56%

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	72%	75%	75%	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	98%	93%	96%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	100%	99%	

SUPPORT FROM HOSPITAL STAFF	Long term condition status				
	Yes	No	Not given	All	
Q27. Staff provided the patient with relevant information on available support	92%	94%	96%	93%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	81%	83%	79%	
Q29. Patient was offered information about how to get financial help or benefits	65%	75%	79%	69%	

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	78%	79%	86%	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	63%	66%	85%	65%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	74%	76%	93%	75%	
Q34. Patient was always able to get help from ward staff when needed	75%	75%	86%	75%	
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	66%	71%	64%	
Q36. Hospital staff always did everything they could to help the patient control pain	84%	87%	80%	85%	
Q37. Patient was always treated with respect and dignity while in hospital	86%	90%	86%	87%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	88%	86%	88%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	85%	84%	82%	

YOUR TREATMENT Long term condition status					
	Yes	No	Not given	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	96%	89%	93%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	88%	95%	87%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	93%	79%	88%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	83%	86%	83%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	85%	92%	100%	88%	
Q42_1. Patient completely had enough understandable information about progress with surgery	87%	88%	89%	87%	
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	83%	85%	80%	84%	
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	84%	87%	67%	85%	
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	76%	78%	79%	76%	
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	83%	92%	100%	87%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	79%	86%	78%	

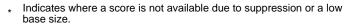
IMMEDIATE AND LONG TERM SIDE EFFECTS		Long term condition status		
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	81%	75%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	77%	75%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	94%	86%	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	68%	59%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	63%	66%	56%

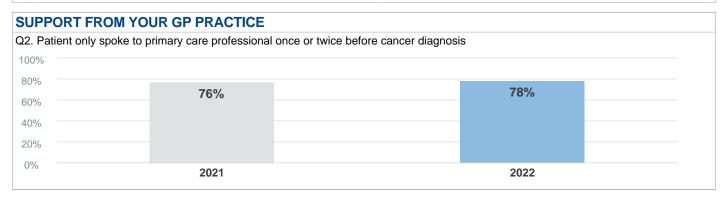
SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	52%	61%	59%	56%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	68%	57%	58%

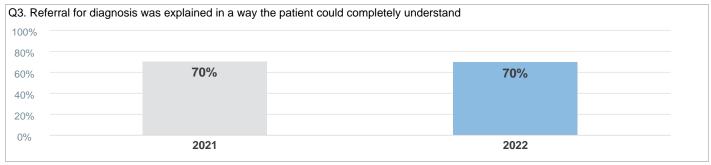
CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	50%	57%	56%	53%
Q52. Patient has had a review of cancer care by GP practice	17%	24%	27%	20%

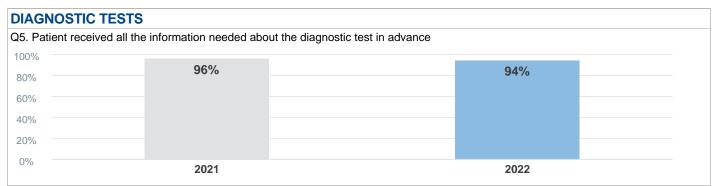
LIVING WITH AND BEYOND CANCER	G WITH AND BEYOND CANCER Long term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	26%	46%	36%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	78%	83%	87%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	70%	70%	66%

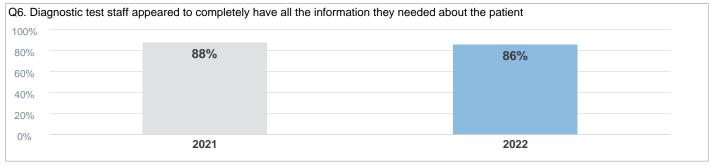
YOUR OVERALL NHS CARE	Long term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	90%	94%	91%	91%
Q57. Administration of care was very good or good	89%	90%	89%	89%
Q58. Cancer research opportunities were discussed with patient	45%	52%	43%	47%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.2	9.1	9.0

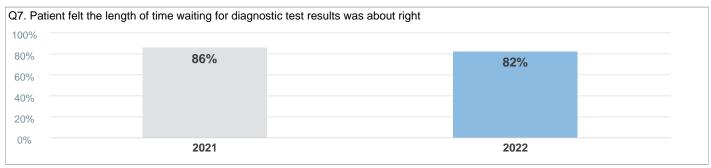


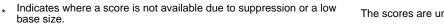


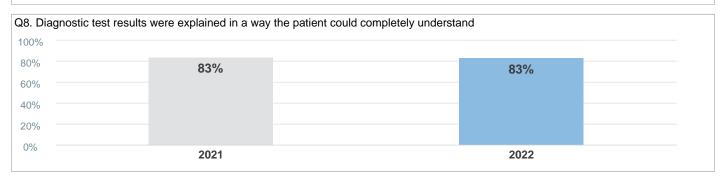


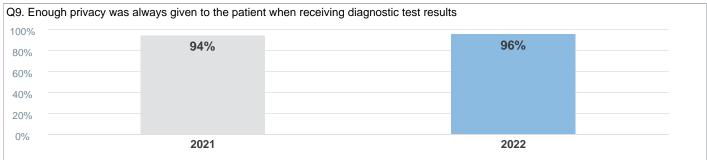


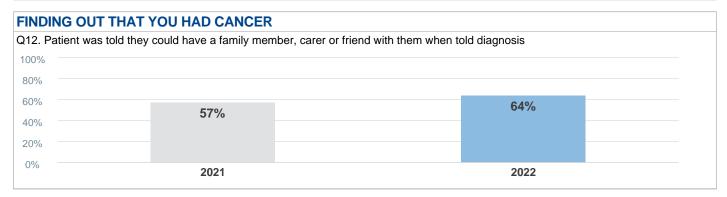


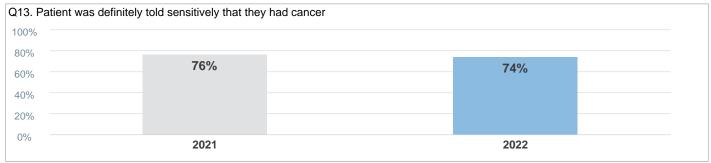


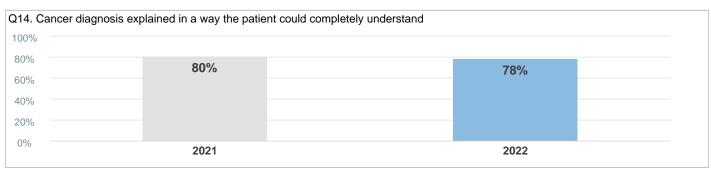


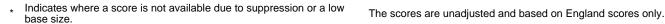


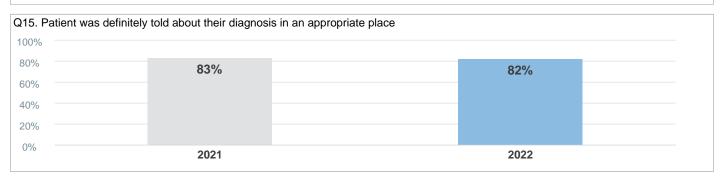


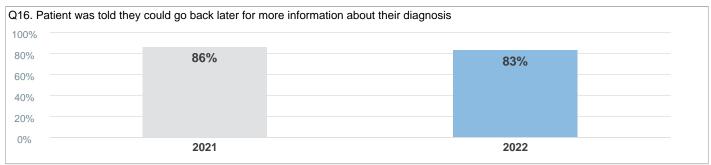






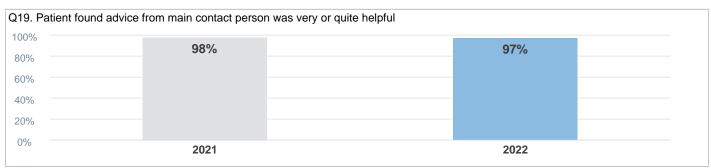


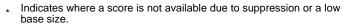


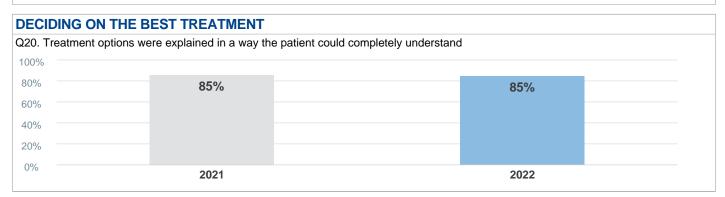




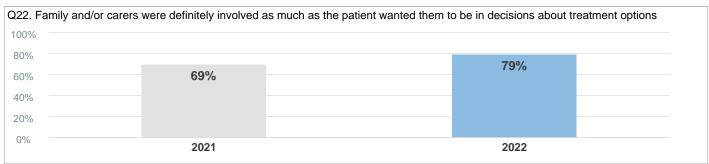




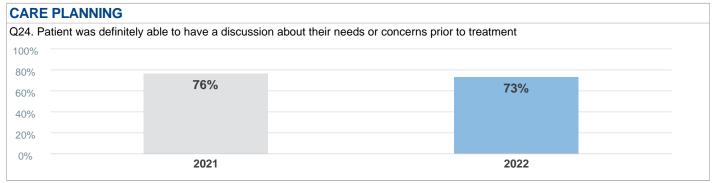


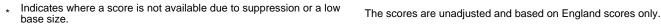


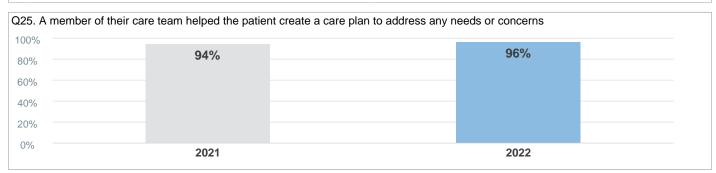




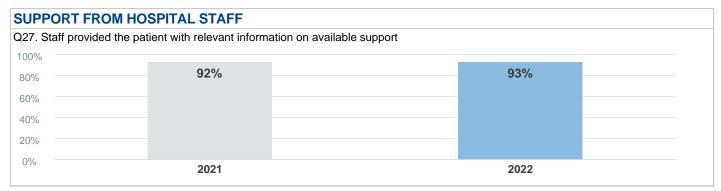


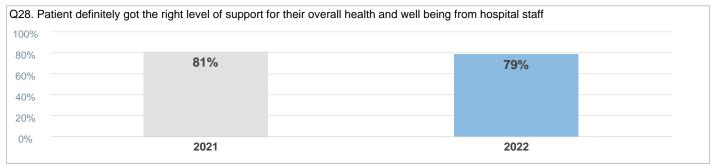




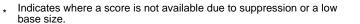


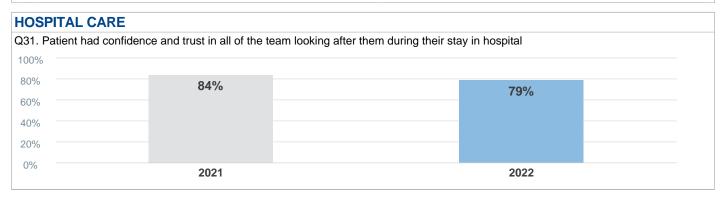




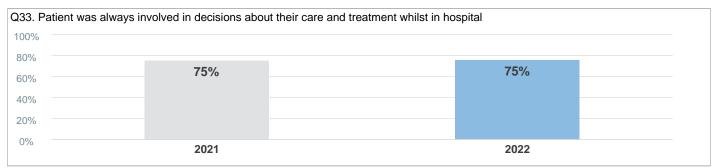




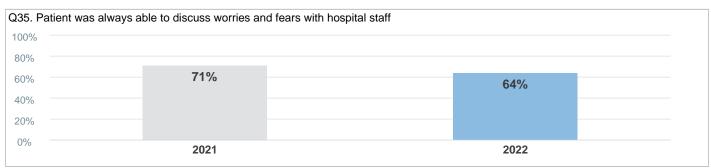


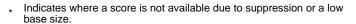


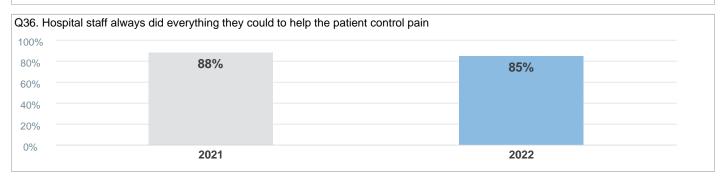


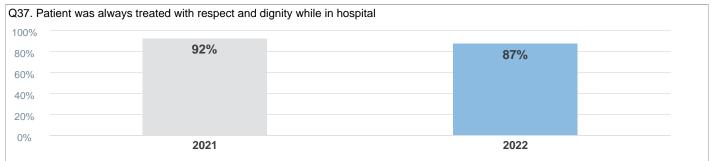




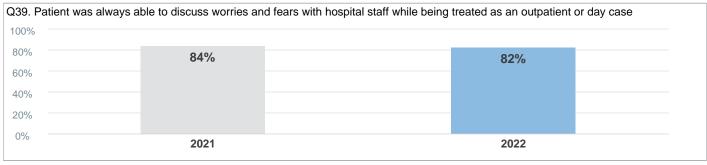






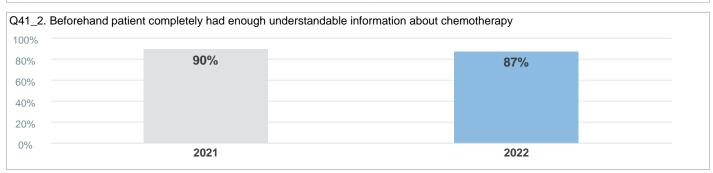


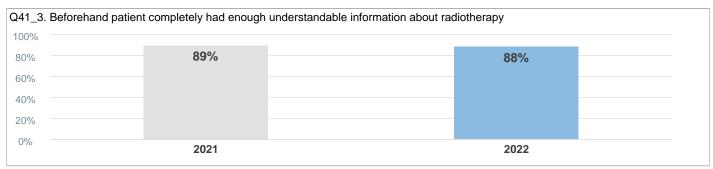


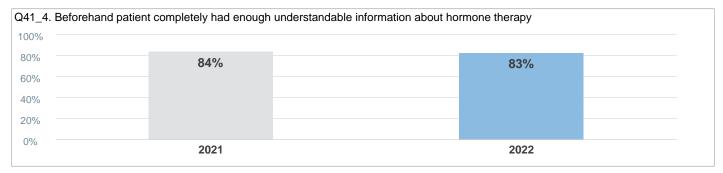


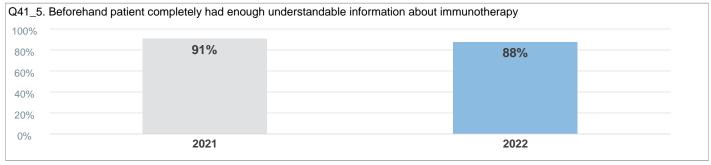


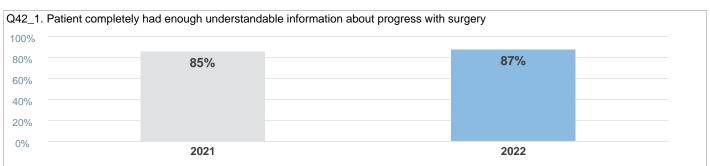




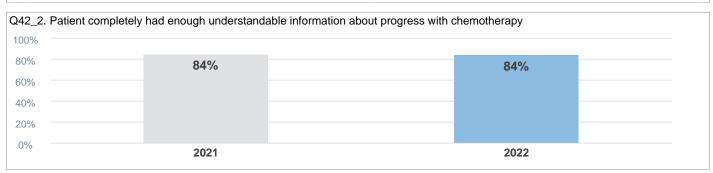


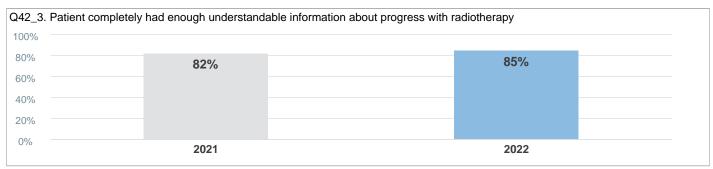


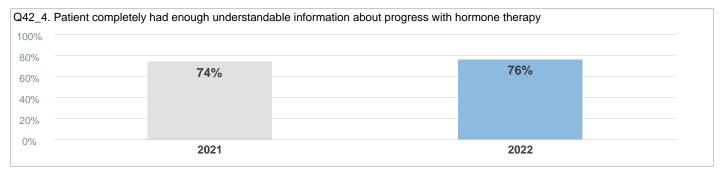


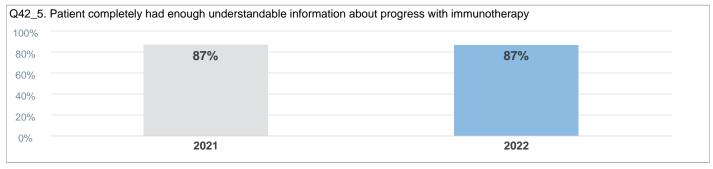


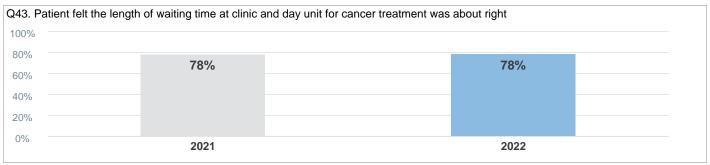


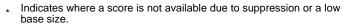


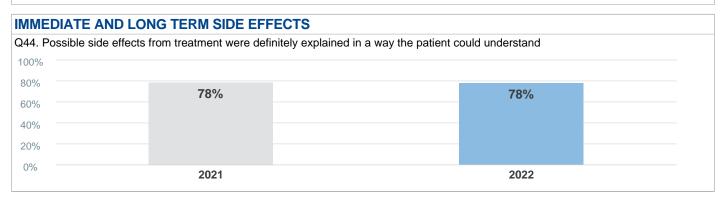




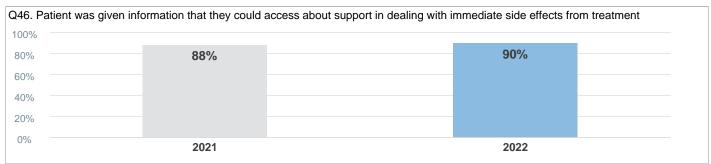


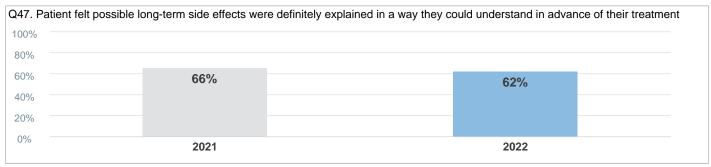




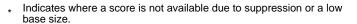


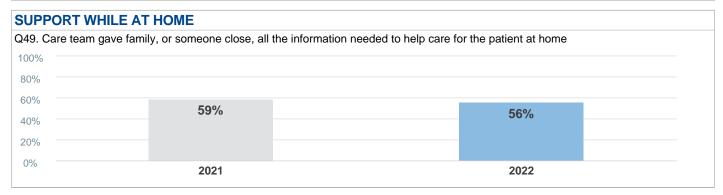


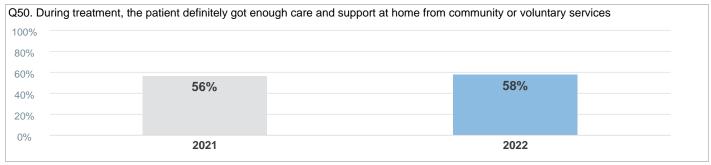


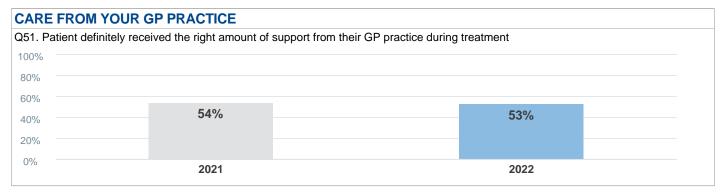




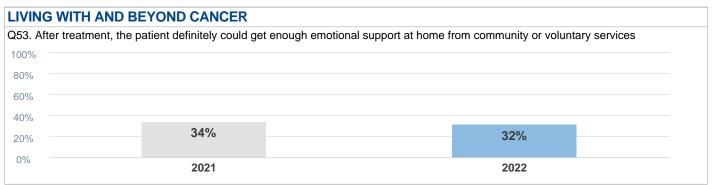


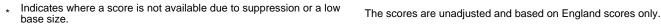


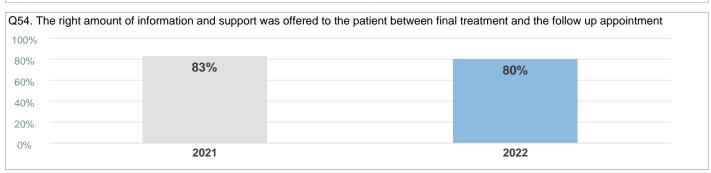


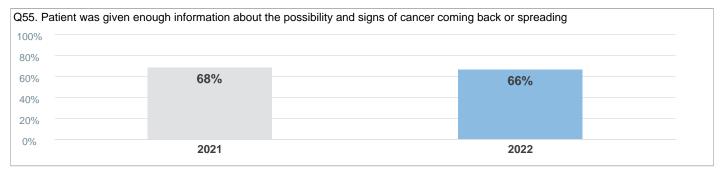






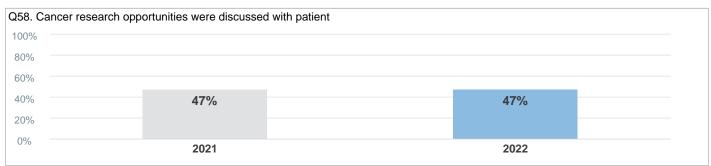












Cancer Patient Experience Survey 2022 NHS Cornwall and the Isles of Scilly Integrated Care Board

