

Cancer Patient Experience Survey

2022 Results

NHS Gloucestershire 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	72%	59%	71%	65%
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	71%	81%	76%
Q27. Staff provided the patient with relevant information on available support	94%	87%	93%	90%
Q29. Patient was offered information about how to get financial help or benefits	76%	60%	75%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	77%	63%	76%	69%
Q36. Hospital staff always did everything they could to help the patient control pain	90%	79%	90%	84%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	85%	63%	82%	72%
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	64%	52%	64%	58%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	54%	37%	52%	45%

NHS Gloucestershire Integrated Care Board has no scores below expected range

Introduction

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

How Alliance and ICB results are generated

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

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

Case-mix adjustment

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

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

Scoring methodology

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

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

Statistical significance

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

Suppression

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

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

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

Additional suppression

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

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

Understanding the results

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

Expected range charts

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

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

Comparability tables

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

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

Sub-group breakdowns

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

Tumour type tables

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

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

Further information

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

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

Response Rate

Overall Response Rate

449 patients responded out of a total of 747 patients, resulting in a response rate of 60%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	805	747	449	60%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

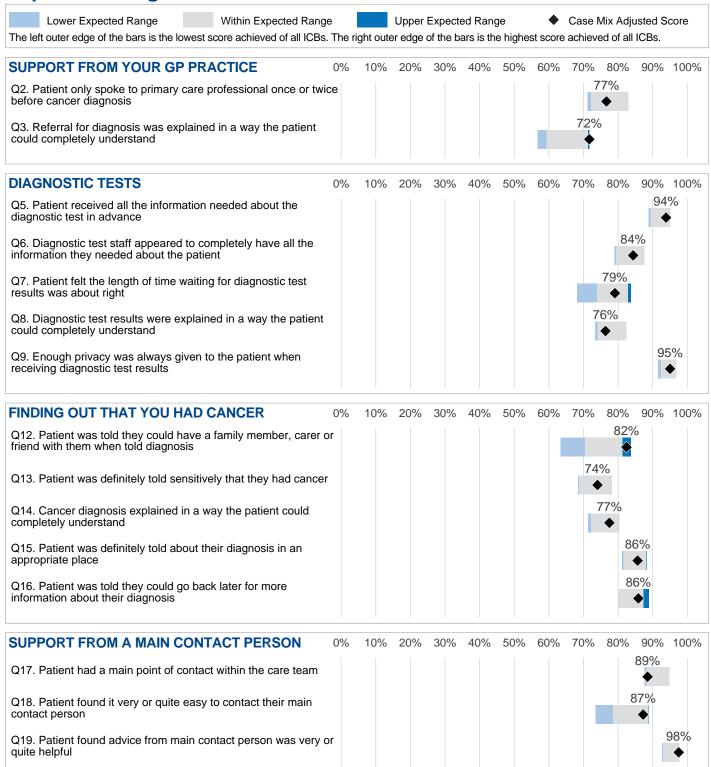
	Number of Respondents
Paper	359
Online	90
Phone	0
Translation Service	0
Total	449

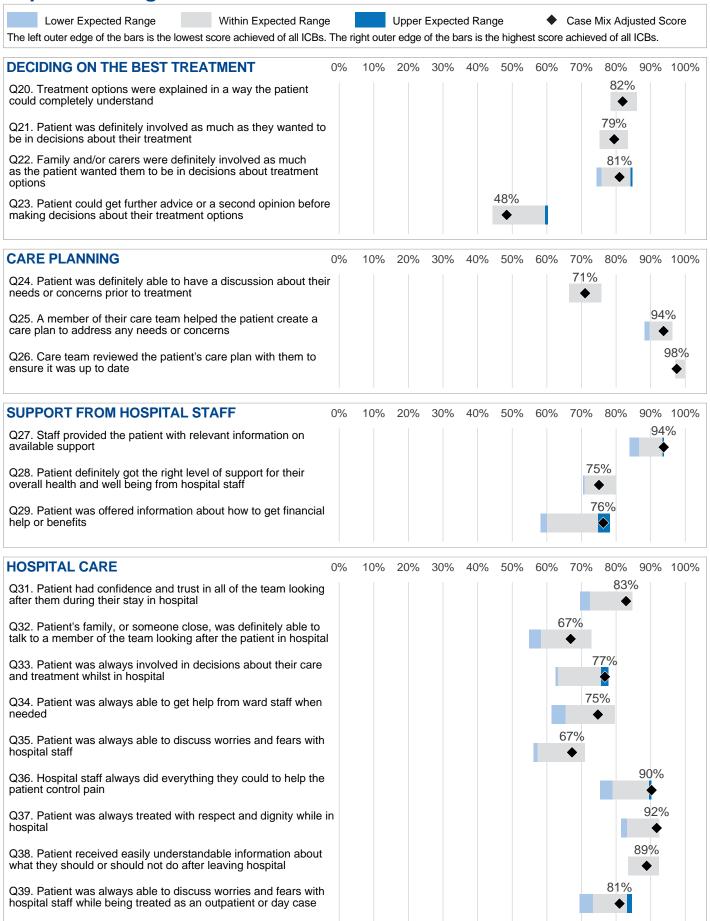
Respondents by Tumour Group

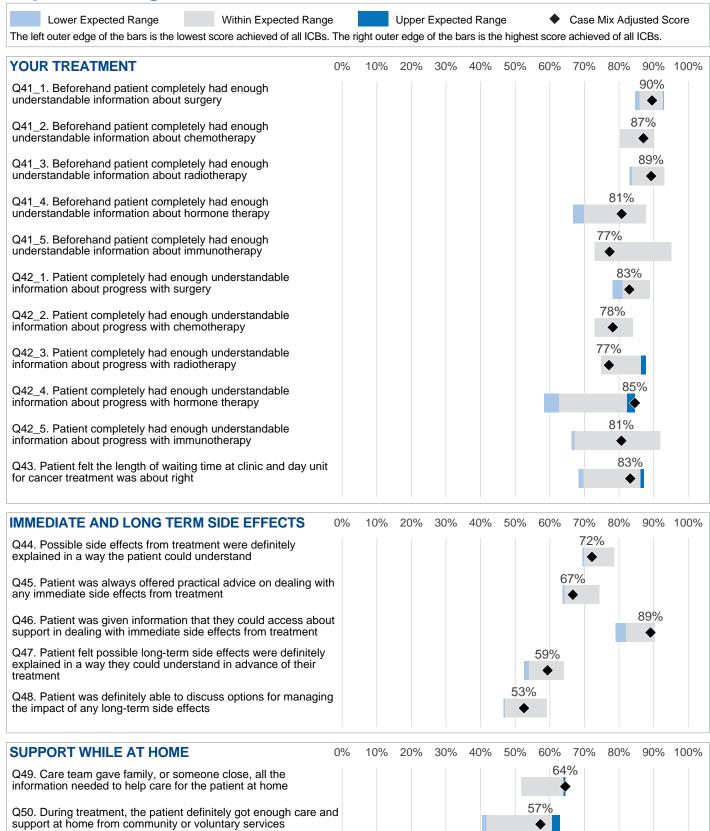
	Number of Respondents
Brain / CNS	*
Breast	149
Colorectal / LGT	59
Gynaecological	33
Haematological	50
Head and Neck	17
Lung	15
Prostate	40
Sarcoma	*
Skin	8
Upper Gastro	12
Urological	28
Other	34
Total	449

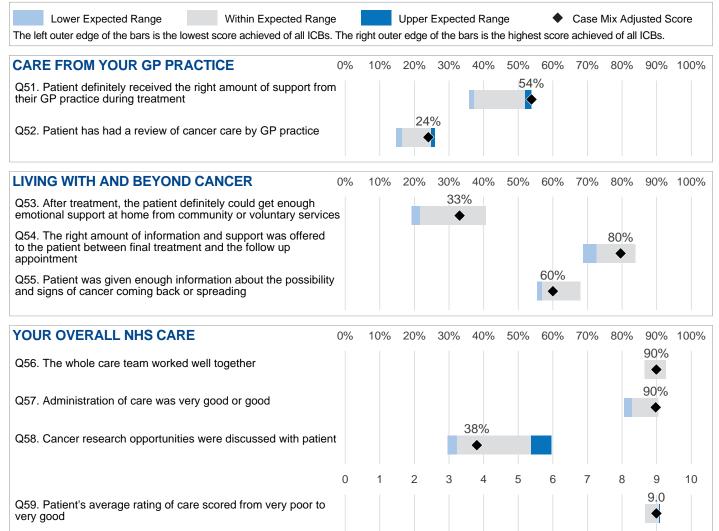
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	399
Irish	*
Gypsy or Irish Traveller	*
Any other White background	12
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	I
Arab	*
Any other ethnic group	*
Not given	
Not given	25
Total	449









Comparability tables

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

**	No	score	available	for	2021.
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	Unadjusted Scores						Case Mix Adjusted Scores			
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	237	78%	231	79%		77%	72%	83%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	319	76%	300	74%		72%	59%	71%	65%	

		Una	djusted So	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	420	94%	374	94%		94%	89%	95%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	436	86%	392	84%		84%	79%	88%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	436	78%	394	78%		79%	74%	83%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	438	83%	394	77%		76%	74%	82%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	436	96%	395	95%		95%	92%	97%	95%

		Una	djusted So	cores	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	454	78%	414	82%		82%	71%	81%	76%
Q13. Patient was definitely told sensitively that they had cancer	483	78%	444	74%		74%	69%	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	485	81%	439	78%		77%	72%	80%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	481	89%	445	86%		86%	82%	88%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	443	86%	394	87%		86%	80%	87%	84%

		Una	djusted So	cores		Case M	ix Adjusted	d Scores	
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	462	94%	428	89%	•	89%	88%	95%	92%
Q18. Patient found it very or quite easy to contact their main contact person	408	88%	343	87%		87%	79%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	415	98%	361	98%		98%	93%	98%	95%

Comparability tables

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

**	No score	available	for 2021.

		Una	djusted So	cores		Case M			
DECIDING ON THE BEST TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q20. Treatment options were explained in a way the patient could completely understand	451	86%	417	82%		82%	78%	86%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	474	85%	446	79%		79%	75%	83%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	405	82%	377	81%		81%	76%	84%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	197	60%	187	47%	•	48%	44%	59%	52%

		Una	djusted So	cores		Case M	ix Adjusted	d Scores	
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	436	80%	407	71%	•	71%	66%	76%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	261	98%	242	93%		94%	90%	96%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	213	98%	179	97%		98%	97%	100%	99%

		Una	djusted So	cores		Case M	d Scores		
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	407	96%	395	94%		94%	87%	93%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	479	80%	446	74%		75%	71%	80%	75%
Q29. Patient was offered information about how to get financial help or benefits	250	79%	225	77%		76%	60%	75%	67%

		Una	djusted So	cores		Case M	d Scores		
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	233	81%	208	82%		83%	72%	85%	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	184	64%	163	66%		67%	58%	73%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	231	77%	208	76%		77%	63%	76%	69%
Q34. Patient was always able to get help from ward staff when needed	232	70%	203	73%		75%	65%	80%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	226	66%	200	67%		67%	57%	71%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	207	90%	189	90%		90%	79%	90%	84%
Q37. Patient was always treated with respect and dignity while in hospital	232	91%	207	91%		92%	83%	92%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	229	90%	203	89%		89%	83%	92%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	414	83%	382	80%		81%	73%	83%	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

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		Una	djusted S	cores		Case M	d Scores		
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	368	91%	317	90%		90%	86%	93%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	215	84%	211	87%		87%	80%	90%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	184	90%	183	89%		89%	84%	93%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	85	81%	81	79%		81%	70%	88%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	48	90%	42	76%		77%	73%	95%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	367	86%	316	83%		83%	81%	89%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	216	76%	211	78%		78%	73%	84%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	188	80%	182	78%		77%	75%	86%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	81	75%	79	84%		85%	63%	82%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	50	82%	41	80%		81%	67%	92%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	468	86%	433	83%		83%	70%	86%	78%

		Una	djusted So	cores		Case M	d Scores		
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	460	79%	432	72%	•	72%	70%	79%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	447	73%	413	66%	•	67%	64%	74%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	385	89%	343	90%		89%	82%	90%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	436	62%	406	59%		59%	54%	64%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	380	59%	353	52%		53%	47%	59%	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	345	64%	312	63%		64%	52%	64%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	161	60%	177	57%		57%	42%	61%	51%

Comparability tables

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

▲ or **▼**

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

Adjusted Score below Lower Expected Range

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

**	No	score	available	for	2021.
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		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	275	53%	259	54%		54%	37%	52%	45%
Q52. Patient has had a review of cancer care by GP practice	460	20%	420	24%		24%	16%	25%	21%

		Una	djusted So	cores		Case M	ix Adjusted	d Scores	
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	104	42%	105	32%		33%	22%	41%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	232	83%	247	79%		80%	73%	84%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	386	64%	363	58%		60%	57%	68%	62%

		Una	djusted So	cores		Case M	ix Adjusted	d Scores	
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	460	94%	422	90%	•	90%	86%	93%	90%
Q57. Administration of care was very good or good	473	91%	439	89%		90%	83%	91%	87%
Q58. Cancer research opportunities were discussed with patient	275	33%	263	36%		38%	32%	54%	43%
Q59. Patient's average rating of care scored from very poor to very good	462	9.1	430	9.0		9.0	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our Typ	ре					
	Brain / CNS Breast Colorectal / LGT Cynaecological Head and Neck Lung Prostate Sarcoma Skin Upper Gastro Urological							Urological	Other	All				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	92%	79%	84%	58%	92%	*	72%	*	*	*	67%	63%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	87%	80%	68%	56%	82%	60%	73%	*	*	*	82%	58%	74%

DIAGNOSTIC TESTS							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	93%	92%	97%	95%	80%	100%	94%	*	*	100%	100%	96%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	89%	91%	84%	76%	69%	93%	86%	*	*	82%	81%	69%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	77%	89%	75%	85%	63%	86%	77%	*	*	83%	72%	68%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	81%	82%	66%	74%	56%	93%	88%	*	*	82%	81%	55%	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	98%	95%	94%	95%	94%	100%	97%	*	*	83%	96%	86%	95%

FINDING OUT THAT YOU HAD CANCER							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	88%	81%	81%	77%	75%	80%	85%	*	*	73%	78%	70%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	83%	78%	67%	61%	59%	80%	75%	*	*	90%	68%	58%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	84%	84%	79%	63%	59%	87%	75%	*	*	73%	82%	62%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	92%	88%	79%	70%	81%	100%	90%	*	*	82%	86%	73%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	*	96%	88%	75%	90%	53%	86%	94%	*	*	*	73%	69%	87%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Typ	е					
	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	*	81%	93%	91%	92%	81%	93%	100%	*	*	100%	89%	88%	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	89%	87%	96%	87%	92%	92%	77%	*	*	92%	78%	87%	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	97%	100%	97%	100%	92%	100%	94%	*	*	100%	96%	96%	98%

DECIDING ON THE BEST TREATMENT							Tumo	ur Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	88%	87%	79%	77%	63%	93%	76%	*	*	90%	76%	73%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	79%	78%	67%	82%	76%	100%	88%	*	*	75%	71%	78%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	84%	83%	87%	73%	57%	100%	77%	*	*	*	68%	96%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	43%	50%	40%	64%	*	*	53%	*	*	*	55%	30%	47%

CARE PLANNING							Tumo	our Typ	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%	76%	61%	79%	50%	86%	60%	*	*	50%	65%	88%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	92%	97%	85%	100%	*	91%	88%	*	*	*	100%	100%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	94%	97%	100%	100%	*	*	95%	*	*	*	*	100%	97%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Typ	е					
	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	*	98%	94%	97%	90%	75%	86%	100%	*	*	*	90%	86%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	73%	80%	67%	80%	59%	60%	78%	*	*	92%	71%	70%	74%
Q29. Patient was offered information about how to get financial help or benefits	*	76%	76%	88%	81%	91%	70%	72%	*	*	*	*	68%	77%

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	*	89%	84%	92%	93%	42%	*	63%	*	*	*	73%	78%	82%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	72%	63%	71%	59%	30%	*	77%	*	*	*	67%	77%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	89%	86%	73%	85%	33%	*	69%	*	*	*	73%	67%	76%
Q34. Patient was always able to get help from ward staff when needed	*	81%	76%	77%	72%	27%	*	94%	*	*	*	80%	65%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	64%	67%	73%	77%	30%	*	56%	*	*	*	67%	67%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	96%	93%	92%	90%	80%	*	87%	*	*	*	79%	86%	90%
Q37. Patient was always treated with respect and dignity while in hospital	*	96%	86%	92%	100%	58%	*	94%	*	*	*	100%	94%	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	96%	91%	92%	92%	67%	*	88%	*	*	*	93%	88%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	80%	84%	85%	83%	62%	83%	86%	*	*	73%	78%	71%	80%

YOUR TREATMENT							Tumo	our Typ	е					
	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	*	92%	93%	97%	*	46%	100%	88%	*	*	*	95%	75%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	80%	92%	94%	90%	*	*	100%	*	*	*	*	75%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	90%	85%	*	100%	*	*	*	*	*	*	*	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	79%	*	*	*	*	*	76%	*	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	80%	*	*	*	*	*	*	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	88%	89%	90%	60%	46%	*	71%	*	*	*	77%	69%	83%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	75%	83%	76%	76%	*	*	75%	*	*	90%	*	81%	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	86%	50%	*	75%	*	*	*	*	*	*	*	*	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	84%	*	*	*	*	*	82%	*	*	*	*	*	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	90%	*	*	*	*	*	*	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	85%	88%	74%	70%	76%	86%	85%	*	*	90%	79%	91%	83%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	69%	80%	81%	71%	71%	86%	65%	*	*	60%	71%	71%	72%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	65%	73%	81%	55%	53%	85%	66%	*	*	*	64%	64%	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	86%	96%	89%	70%	100%	91%	*	*	*	90%	85%	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	62%	56%	57%	59%	53%	54%	64%	*	*	40%	58%	52%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	50%	69%	63%	43%	50%	75%	44%	*	*	*	43%	42%	52%

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	*	60%	76%	68%	53%	50%	83%	63%	*	*	*	61%	58%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	53%	65%	36%	58%	*	*	53%	*	*	*	70%	59%	57%

CARE 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
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	52%	67%	47%	56%	*	*	57%	*	*	*	64%	55%	54%
Q52. Patient has had a review of cancer care by GP practice	*	27%	19%	26%	20%	6%	29%	24%	*	*	9%	35%	24%	24%

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	*	24%	44%	*	45%	*	*	*	*	*	*	*	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	76%	82%	86%	74%	82%	*	81%	*	*	*	67%	83%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	52%	49%	63%	67%	53%	*	61%	*	*	*	64%	63%	58%

YOUR OVERALL NHS CARE							Tumo	our Typ	ре					
	Brain / CNS CNS Breast Colorectal / LGT Colorectal / Colorectal											Other	All	
Q56. The whole care team worked well together	*	93%	93%	94%	87%	75%	93%	87%	*	*	92%	92%	81%	90%
Q57. Administration of care was very good or good	*	95%	97%	88%	85%	75%	87%	80%	*	*	75%	86%	88%	89%
Q58. Cancer research opportunities were discussed with patient											36%			
Q59. Patient's average rating of care scored from very poor to very good	*	9.1	9.2	9.0	8.9	8.3	9.5	8.7	*	*	8.9	9.0	8.5	9.0

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	*	*	65%	76%	71%	79%	93%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	89%	75%	75%	70%	74%	*	74%

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	*	*	94%	82%	90%	96%	99%	*	94%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	79%	71%	84%	86%	92%	*	84%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	79%	60%	76%	79%	85%	*	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	53%	69%	76%	82%	79%	*	77%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	89%	94%	96%	97%	93%	*	95%	

FINDING OUT THAT YOU HAD CANCER	IDING 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	*	*	90%	71%	81%	84%	84%	*	82%		
Q13. Patient was definitely told sensitively that they had cancer	*	*	65%	69%	71%	78%	76%	*	74%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	70%	79%	73%	82%	78%	*	78%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	75%	79%	83%	90%	86%	*	86%		
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	94%	91%	89%	86%	84%	*	87%		

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	*	*	78%	72%	82%	97%	94%	*	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	100%	82%	84%	93%	83%	*	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	100%	96%	97%	99%	98%	*	98%

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	*	*	85%	78%	77%	87%	85%	*	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	60%	68%	77%	84%	84%	*	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	67%	74%	82%	82%	83%	*	81%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	73%	29%	34%	55%	50%	*	47%	

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	*	*	79%	55%	71%	75%	71%	*	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	100%	85%	89%	96%	98%	*	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	83%	94%	100%	98%	100%	*	97%

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	*	*	84%	91%	94%	96%	94%	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	53%	62%	68%	81%	78%	*	74%
Q29. Patient was offered information about how to get financial help or benefits	*	*	79%	74%	72%	85%	74%	*	77%

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	*	*	*	75%	76%	84%	95%	*	82%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	56%	61%	72%	67%	*	66%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	75%	71%	80%	76%	*	76%	
Q34. Patient was always able to get help from ward staff when needed	*	*	*	70%	60%	83%	73%	*	73%	
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	60%	61%	73%	68%	*	67%	
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	84%	85%	95%	88%	*	90%	
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	95%	89%	93%	93%	*	91%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	84%	84%	93%	90%	*	89%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	70%	71%	84%	86%	80%	*	80%	

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	*	*	74%	76%	92%	94%	93%	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	65%	74%	88%	91%	95%	*	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	83%	83%	87%	96%	91%	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	80%	91%	74%	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	80%	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	58%	69%	84%	90%	91%	*	83%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	59%	74%	80%	78%	85%	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	83%	83%	76%	77%	81%	*	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	92%	86%	79%	*	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	85%	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	80%	74%	80%	86%	83%	*	83%

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	*	*	50%	68%	70%	78%	75%	*	72%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	63%	54%	61%	74%	71%	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	93%	93%	93%	89%	87%	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	50%	66%	60%	62%	54%	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	40%	43%	47%	58%	55%	*	52%

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	*	*	47%	39%	62%	67%	68%	*	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	46%	56%	51%	57%	61%	*	57%

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	*	*	85%	50%	46%	57%	52%	*	54%
Q52. Patient has had a review of cancer care by GP practice	*	*	37%	14%	19%	28%	22%	*	24%

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	*	*	*	38%	13%	32%	47%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	73%	71%	70%	90%	87%	*	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	47%	37%	57%	66%	60%	*	58%

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	*	*	90%	89%	86%	93%	90%	*	90%
Q57. Administration of care was very good or good	*	*	90%	87%	89%	90%	91%	*	89%
Q58. Cancer research opportunities were discussed with patient	*	*	31%	32%	29%	40%	42%	*	36%
Q59. Patient's average rating of care scored from very poor to very good	*	*	9.3	8.8	8.9	9.1	9.0	*	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	78%	78%	*	*	*	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	76%	70%	*	*	*	80%	74%

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	94%	94%	*	*	*	100%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	82%	*	*	*	100%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	83%	*	*	*	82%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	77%	*	*	*	83%	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	97%	*	*	*	92%	95%

FINDING OUT THAT YOU HAD CANCER				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	82%	*	*	*	93%	82%
Q13. Patient was definitely told sensitively that they had cancer	75%	73%	*	*	*	79%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	74%	*	*	*	86%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	87%	*	*	*	86%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	87%	87%	*	*	*	75%	87%

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	86%	93%	*	*	*	82%	89%
Q18. Patient found it very or quite easy to contact their main contact person	89%	85%	*	*	*	*	87%
Q19. Patient found advice from main contact person was very or quite helpful	97%	98%	*	*	*	*	98%

DECIDING ON THE BEST TREATMENT				Male/Fema	le/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	83%	79%	*	*	*	93%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	76%	83%	*	*	*	100%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	77%	*	*	*	86%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	40%	58%	*	*	*	*	47%

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	72%	71%	*	*	*	62%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	96%	*	*	*	*	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	96%	99%	*	*	*	*	97%

SUPPORT FROM HOSPITAL STAFF				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	94%	95%	*	*	*	92%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	72%	77%	*	*	*	86%	74%
Q29. Patient was offered information about how to get financial help or benefits	78%	75%	*	*	*	*	77%

HOSPITAL CARE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	82%	82%	*	*	*	*	82%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	70%	*	*	*	*	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	77%	77%	*	*	*	*	76%
Q34. Patient was always able to get help from ward staff when needed	70%	78%	*	*	*	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	71%	*	*	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	92%	89%	*	*	*	*	90%
Q37. Patient was always treated with respect and dignity while in hospital	89%	95%	*	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	89%	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	81%	*	*	*	92%	80%

YOUR TREATMENT				Male/Fema	ıle/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	91%	86%	*	*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	87%	*	*	*	*	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	89%	*	*	*	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	84%	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	73%	78%	*	*	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	76%	*	*	*	*	83%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	77%	*	*	*	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	71%	*	*	*	*	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	84%	84%	*	*	*	*	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	81%	78%	*	*	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	82%	*	*	*	92%	83%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	70%	*	*	*	79%	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	66%	65%	*	*	*	85%	66%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	91%	*	*	*	*	90%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	61%	*	*	*	79%	59%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	53%	*	*	*	70%	52%	

SUPPORT WHILE AT HOME				Male/Fema	ile/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	64%	61%	*	*	*	*	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	56%	63%	*	*	*	*	57%

CARE 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
Q51. Patient definitely received the right amount of support from their GP practice during treatment	54%	56%	*	*	*	50%	54%
Q52. Patient has had a review of cancer care by GP practice	26%	20%	*	*	*	21%	24%

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%	44%	*	*	*	*	32%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	78%	81%	*	*	*	*	79%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	56%	62%	*	*	*	64%	58%		

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	90%	87%	*	*	*	100%	90%
Q57. Administration of care was very good or good	92%	84%	*	*	*	92%	89%
Q58. Cancer research opportunities were discussed with patient	29%	50%	*	*	*	*	36%
Q59. Patient's average rating of care scored from very poor to very good	9.0	8.9	*	*	*	9.2	9.0

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	79%	*	*	*	*	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	74%	*	*	*	*	67%	74%

DIAGNOSTIC TESTS		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	94%	*	*	*	*	91%	94%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	*	*	*	86%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	*	*	*	*	64%	78%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	*	*	*	*	74%	77%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	86%	95%		

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	81%	*	*	*	*	91%	82%
Q13. Patient was definitely told sensitively that they had cancer	74%	*	*	*	*	67%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	*	*	*	75%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	*	*	*	*	83%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	87%	*	*	*	*	73%	87%

SUPPORT FROM A MAIN CONTACT PERSOI	N	Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	89%	*	*	*	*	86%	89%
Q18. Patient found it very or quite easy to contact their main contact person	87%	*	*	*	*	88%	87%
Q19. Patient found advice from main contact person was very or quite helpful	98%	*	*	*	*	95%	98%

DECIDING ON THE BEST TREATMENT		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	82%	*	*	*	*	83%	82%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	*	*	*	*	76%	79%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	*	*	*	*	70%	81%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	47%	*	*	*	*	46%	47%		

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	71%	*	*	*	*	61%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	*	*	*	*	100%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	97%	*	*	*	*	100%	97%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	94%	*	*	*	*	91%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	*	*	*	*	72%	74%
Q29. Patient was offered information about how to get financial help or benefits	77%	*	*	*	*	67%	77%

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	82%	*	*	*	*	85%	82%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	68%	*	*	*	*	50%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	76%	*	*	*	*	77%	76%
Q34. Patient was always able to get help from ward staff when needed	73%	*	*	*	*	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	66%	*	*	*	*	75%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	91%	*	*	*	*	92%	90%
Q37. Patient was always treated with respect and dignity while in hospital	92%	*	*	*	*	85%	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	*	*	*	*	92%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	*	*	*	*	70%	80%

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	*	*	*	*	94%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	*	*	*	*	*	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	*	*	*	*	83%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	*	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	74%	*	*	*	*	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	*	*	*	*	81%	83%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	*	*	*	*	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	80%	*	*	*	*	55%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	83%	*	*	*	*	*	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	78%	*	*	*	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	*	*	*	*	87%	83%

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	71%	*	*	*	*	83%	72%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	66%	*	*	*	*	68%	66%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	*	*	*	*	67%	90%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	*	*	*	*	61%	59%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	*	*	*	*	71%	52%		

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	63%	*	*	*	*	63%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	58%	*	*	*	*	45%	57%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not gi					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	53%	*	*	*	*	73%	54%
Q52. Patient has had a review of cancer care by GP practice	23%	*	*	*	*	22%	24%

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%	*	*	*	*	*	32%			
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	78%	*	*	*	*	93%	79%			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	58%	*	*	*	*	50%	58%			

YOUR OVERALL NHS CARE			Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All			
Q56. The whole care team worked well together	89%	*	*	*	*	100%	90%			
Q57. Administration of care was very good or good	89%	*	*	*	*	92%	89%			
Q58. Cancer research opportunities were discussed with patient	37%	*	*	*	*	25%	36%			
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	*	*	*	9.3	9.0			

IMD quintile tables

JPPORT FROM YOUR GP PRACTICE				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	80%	68%	83%	80%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	74%	79%	77%	78%	69%	*	74%

DIAGNOSTIC TESTS				IMD Quinti	le		
	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	94%	89%	95%	94%	95%	*	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	75%	82%	86%	87%	*	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	87%	76%	84%	78%	73%	*	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	86%	69%	83%	76%	*	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	93%	92%	94%	98%	*	95%

FINDING OUT THAT YOU HAD CANCER		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	87%	82%	80%	82%	82%	*	82%		
Q13. Patient was definitely told sensitively that they had cancer	85%	81%	68%	75%	74%	*	74%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	85%	87%	75%	78%	77%	*	78%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	97%	81%	86%	83%	88%	*	86%		
Q16. Patient was told they could go back later for more information about their diagnosis	93%	90%	81%	88%	87%	*	87%		

SUPPORT FROM A MAIN CONTACT PERSO	N						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	90%	93%	87%	88%	88%	*	89%
Q18. Patient found it very or quite easy to contact their main contact person	79%	95%	93%	89%	83%	*	87%
Q19. Patient found advice from main contact person was very or quite helpful	96%	100%	100%	97%	96%	*	98%

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	91%	80%	76%	83%	84%	*	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	88%	70%	73%	81%	82%	*	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	86%	71%	75%	81%	84%	*	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	73%	31%	43%	52%	41%	*	47%

CARE PLANNING	IMD Quintile						
	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	81%	65%	68%	69%	75%	*	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	100%	89%	92%	96%	*	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	98%	95%	98%	*	97%

SUPPORT FROM HOSPITAL STAFF			IMD Quintile						
						Non- England	All		
Q27. Staff provided the patient with relevant information on available support	97%	93%	92%	96%	93%	*	94%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	73%	77%	71%	74%	*	74%		
Q29. Patient was offered information about how to get financial help or benefits	60%	86%	88%	70%	77%	*	77%		

HOSPITAL CARE	RE 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	100%	93%	85%	83%	74%	*	82%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	*	73%	65%	62%	*	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	93%	64%	72%	83%	72%	*	76%
Q34. Patient was always able to get help from ward staff when needed	87%	79%	72%	72%	72%	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	79%	69%	69%	64%	64%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	100%	92%	85%	97%	86%	*	90%
Q37. Patient was always treated with respect and dignity while in hospital	93%	86%	89%	97%	88%	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	86%	86%	95%	85%	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	90%	83%	79%	75%	83%	*	80%

IMD quintile tables

YOUR TREATMENT		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	100%	84%	85%	93%	88%	*	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	75%	94%	87%	85%	89%	*	87%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	79%	89%	93%	88%	*	89%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	86%	82%	76%	*	79%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	85%	73%	*	76%		
Q42_1. Patient completely had enough understandable information about progress with surgery	100%	80%	79%	87%	79%	*	83%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	64%	83%	79%	76%	79%	*	78%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	79%	81%	79%	74%	*	78%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	93%	85%	79%	*	84%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	83%	73%	*	80%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	84%	81%	86%	81%	*	83%		

IMMEDIATE AND LONG TERM SIDE EFFECTS				IMD Quinti	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	81%	70%	73%	76%	67%	*	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	79%	74%	64%	60%	*	66%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	85%	91%	91%	89%	*	90%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	55%	61%	64%	57%	58%	*	59%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	38%	54%	49%	56%	*	52%	

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%	61%	64%	61%	65%	*	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	56%	27%	52%	63%	62%	*	57%

CARE FROM YOUR GP PRACTICE	IMD Quintile						
	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	62%	55%	58%	43%	62%	*	54%
Q52. Patient has had a review of cancer care by GP practice	28%	20%	20%	27%	24%	*	24%

IMD quintile tables

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

LIVING WITH AND BEYOND CANCER				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	30%	36%	22%	36%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	79%	79%	81%	79%	*	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	50%	63%	63%	59%	55%	*	58%

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	94%	80%	88%	90%	91%	*	90%
Q57. Administration of care was very good or good	97%	90%	86%	89%	89%	*	89%
Q58. Cancer research opportunities were discussed with patient	29%	33%	36%	34%	39%	*	36%
Q59. Patient's average rating of care scored from very poor to very good	9.0	8.7	8.9	9.1	9.0	*	9.0

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

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	79%	76%	93%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	71%	77%	81%	74%

DIAGNOSTIC TESTS				
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	96%	94%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	88%	87%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	79%	68%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	80%	66%	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	96%	97%	95%

FINDING OUT THAT YOU HAD CANCER		Long term condition status		
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	83%	79%	91%	82%
Q13. Patient was definitely told sensitively that they had cancer	73%	78%	66%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	85%	74%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	85%	83%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	92%	73%	87%

SUPPORT FROM A MAIN CONTACT PERSO	ON Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	90%	88%	81%	89%	
Q18. Patient found it very or quite easy to contact their main contact person	89%	85%	84%	87%	
Q19. Patient found advice from main contact person was very or quite helpful	99%	96%	92%	98%	

DECIDING ON THE BEST TREATMENT				
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	79%	87%	82%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	81%	86%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	80%	79%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	44%	44%	71%	47%

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

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	73%	68%	74%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	91%	91%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	95%	100%	97%	

SUPPORT FROM HOSPITAL STAFF	Long term condition status				
	Yes	No	Not given	All	
Q27. Staff provided the patient with relevant information on available support	93%	97%	91%	94%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	75%	69%	74%	
Q29. Patient was offered information about how to get financial help or benefits	72%	84%	77%	77%	

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	84%	82%	70%	82%
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%	74%	53%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	73%	81%	80%	76%
Q34. Patient was always able to get help from ward staff when needed	74%	74%	68%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	71%	63%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	93%	87%	89%	90%
Q37. Patient was always treated with respect and dignity while in hospital	93%	88%	95%	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	90%	89%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	85%	81%	80%

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

YOUR TREATMENT		Long term condition	status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	88%	92%	88%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	83%	92%	87%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	91%	80%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	77%	86%	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	65%	91%	*	76%
Q42_1. Patient completely had enough understandable information about progress with surgery	82%	84%	83%	83%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	72%	82%	93%	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	75%	85%	67%	78%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	78%	93%	*	84%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	76%	82%	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	85%	94%	83%

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	70%	75%	76%	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	64%	70%	66%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	91%	89%	76%	90%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	54%	66%	61%	59%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	51%	63%	52%	

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	65%	57%	72%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	57%	63%	37%	57%

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	53%	54%	63%	54%
Q52. Patient has had a review of cancer care by GP practice	21%	27%	26%	24%

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

LIVING WITH AND BEYOND CANCER	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	23%	48%	43%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	80%	78%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	56%	63%	55%	58%

YOUR OVERALL NHS CARE	Long term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	89%	90%	94%	90%
Q57. Administration of care was very good or good	88%	92%	88%	89%
Q58. Cancer research opportunities were discussed with patient	30%	46%	25%	36%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.1	9.0	9.0

