

Cancer Patient Experience Survey

2022 Results

Milton Keynes University Hospital NHS Foundation Trust

Published July 2023

Executive Summary

Questions Above Expected Range

	Case	Case Mix Adjusted Scores Lower Upper Expected Expected Range Range			
	2022 Score	Expected	Expected	National Score	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	87%	70%	82%	76%	

Questions Below Expected Range

	Case	Mix Adjusted S	cores	
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q20. Treatment options were explained in a way the patient could completely understand	78%	78%	86%	82%
Q29. Patient was offered information about how to get financial help or benefits	55%	58%	77%	67%

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.

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 a Trust 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 Trust. 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 Trust, the results are not shown for that question for that Trust.

Milton Keynes University Hospital NHS Foundation Trust

For Trusts 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** Trust has a score suppressed. If this happens, we will suppress another Trust's results (both the Trust 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 Trust.

The same rule applies to groups in each subgroup breakdown. For example, if only **one** Trust has the 85+ age group suppressed for Q25 we will need to suppress another Trust'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 Trust scored for each question in the survey compared with national results. It is aimed at helping individual Trusts to understand their performance and identify areas for local 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 Trust.

Trusts 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 Trust performs better than what Trusts 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 Trust's size and demographics.

Comparability tables

The comparability tables show the 2021 and 2022 unadjusted scores for this Trust 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 Trusts 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 Trust level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response Rate

Overall Response Rate

345 patients responded out of a total of 646 patients, resulting in a response rate of 53%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	689	646	345	53%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

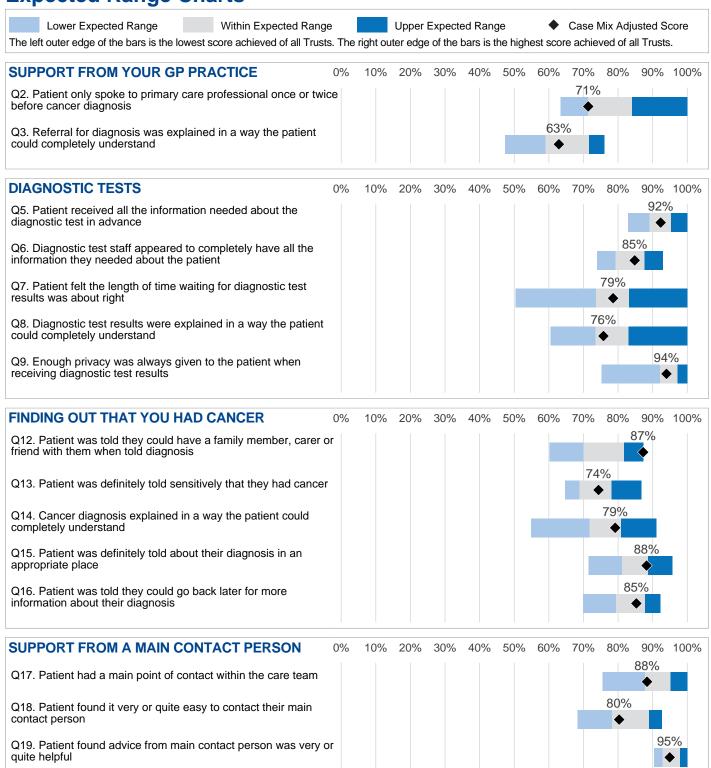
	Number of Respondents
Paper	276
Online	69
Phone	0
Translation Service	0
Total	345

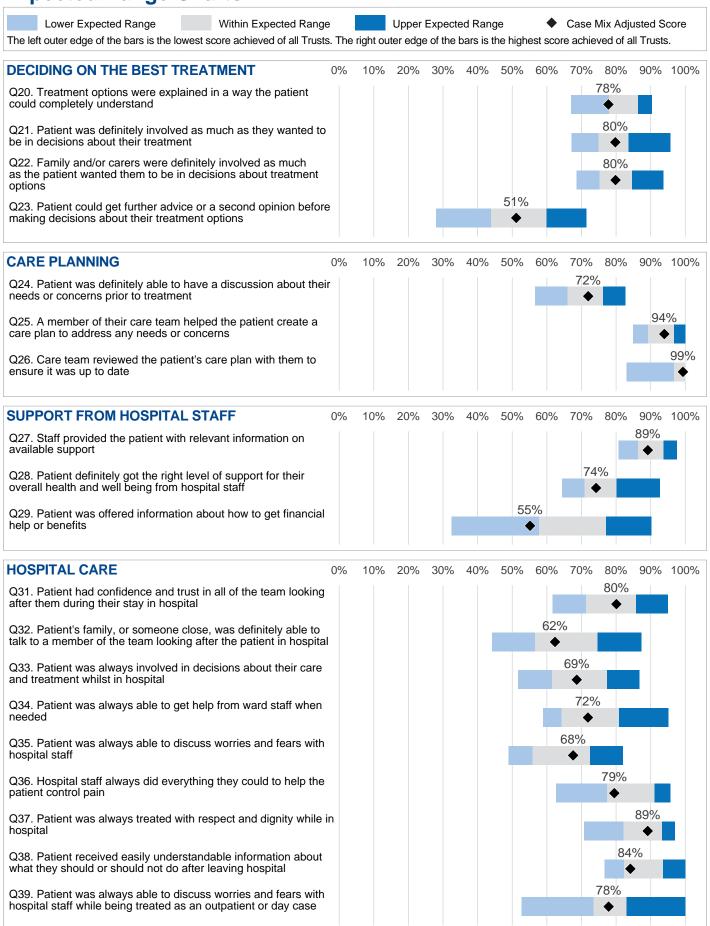
Respondents by Tumour Group

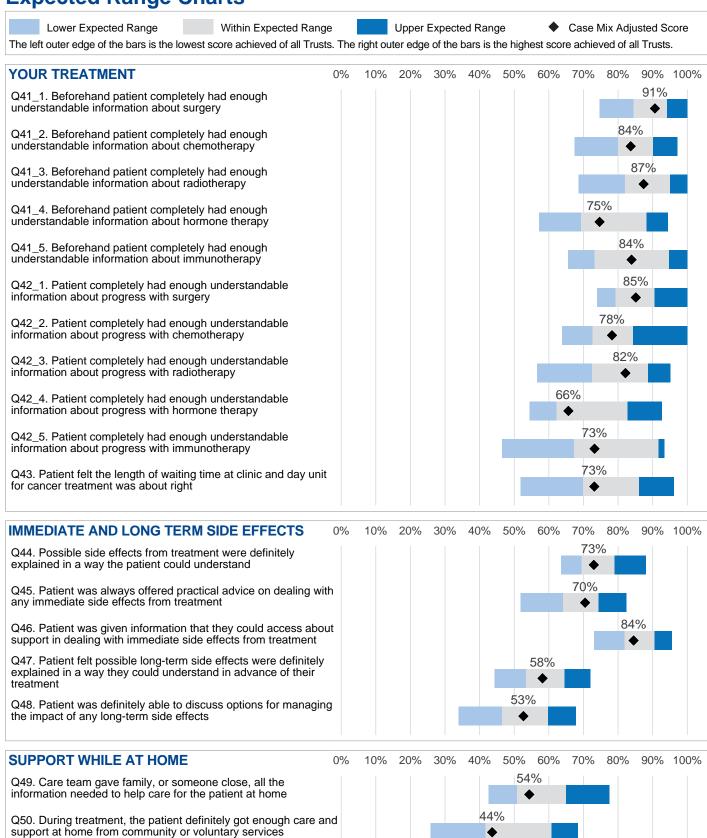
	Number of Respondents
Brain / CNS	0
Breast	65
Colorectal / LGT	50
Gynaecological	*
Haematological	56
Head and Neck	6
Lung	15
Prostate	56
Sarcoma	*
Skin	*
Upper Gastro	13
Urological	28
Other	48
Total	345

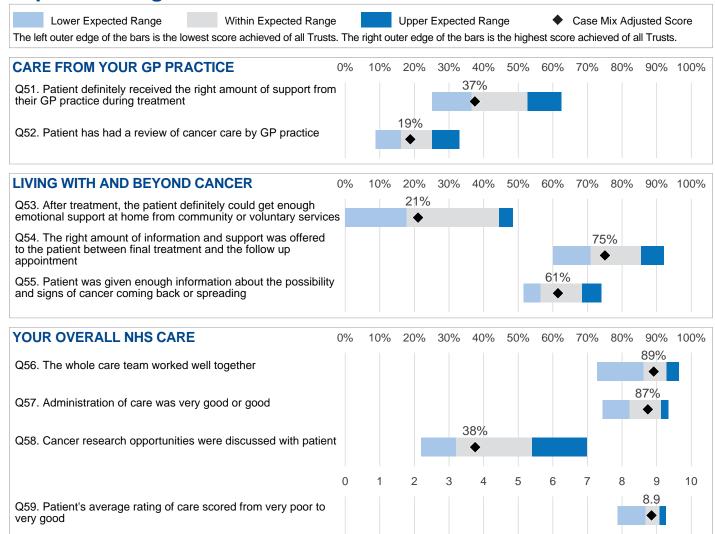
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	281
Irish	*
Gypsy or Irish Traveller	*
Any other White background	9
Mixed / Multiple Ethnicity	1
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	12
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	20
Total	345









Comparability tables

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



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	Case M	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	National Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	177	77%	167	70%		71%	71%	84%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	231	64%	219	64%		63%	59%	72%	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	National Score
Q5. Patient received all the information needed about the diagnostic test in advance	284	93%	289	92%		92%	89%	95%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	308	83%	306	85%		85%	79%	88%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	310	80%	307	79%		79%	74%	83%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	307	70%	306	75%		76%	74%	83%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	310	94%	311	94%		94%	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	National Score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	325	78%	319	87%		87%	70%	82%	76%
Q13. Patient was definitely told sensitively that they had cancer	343	68%	343	73%		74%	69%	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	343	70%	340	79%		79%	72%	81%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	340	85%	339	88%		88%	81%	89%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	299	84%	298	85%		85%	79%	88%	84%

	Unadjusted Scores						Case Mix Adjusted 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	National Score	
Q17. Patient had a main point of contact within the care team	332	90%	329	88%		88%	88%	95%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	272	76%	257	80%		80%	78%	89%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	279	92%	277	95%		95%	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.
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		Una	djusted So	cores		Case M	ix Adjuste	d 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	National Score
Q20. Treatment options were explained in a way the patient could completely understand	315	78%	318	77%		78%	78%	86%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	339	76%	337	79%		80%	75%	84%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	283	78%	293	80%		80%	75%	85%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	176	41%	155	51%		51%	44%	60%	52%

		Una	djusted So	cores	Case M	d Scores			
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	301	67%	302	71%		72%	66%	76%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	160	94%	175	94%		94%	89%	97%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	131	96%	132	99%		99%	97%	100%	99%

		Una	djusted So	cores		Case M	ix Adjuste	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	National Score
Q27. Staff provided the patient with relevant information on available support	269	82%	284	89%		89%	86%	94%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	337	75%	339	73%		74%	71%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	140	56%	156	54%		55%	58%	77%	67%

		Una	djusted So	cores		Case M	ix Adjuste	d Scores	
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	140	77%	131	80%		80%	71%	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	115	60%	107	62%		62%	57%	75%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	137	63%	129	68%		69%	62%	77%	70%
Q34. Patient was always able to get help from ward staff when needed	136	79%	131	72%		72%	64%	81%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	132	67%	128	67%		68%	56%	72%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	110	83%	107	79%		79%	77%	91%	84%
Q37. Patient was always treated with respect and dignity while in hospital	138	91%	132	89%		89%	82%	93%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	136	90%	128	84%		84%	82%	94%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	293	73%	311	77%		78%	74%	83%	78%

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

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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	National Score
Q41_1. Beforehand patient completely had enough understandable information about surgery	178	85%	156	90%		91%	84%	94%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	199	84%	189	83%		84%	80%	90%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	76	83%	93	87%		87%	82%	95%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	60	58%	72	75%		75%	69%	88%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	54	70%	45	82%		84%	73%	95%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	176	81%	158	85%		85%	79%	90%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	199	78%	191	78%		78%	73%	84%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	75	79%	91	81%		82%	72%	89%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	59	56%	72	65%		66%	62%	83%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	53	70%	42	71%		73%	67%	92%	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	336	76%	332	73%		73%	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	National Score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	324	71%	327	72%		73%	69%	79%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	303	69%	312	70%		70%	64%	74%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	240	85%	244	84%		84%	82%	91%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	305	55%	299	57%		58%	53%	65%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	258	47%	261	51%		53%	47%	60%	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	National Score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	221	56%	213	54%		54%	51%	65%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	122	43%	114	43%		44%	42%	61%	51%

Comparability tables

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



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	National Score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	176	44%	186	38%		37%	37%	53%	45%
Q52. Patient has had a review of cancer care by GP practice	327	20%	314	18%		19%	16%	25%	21%

		Una	djusted So	cores	Case M				
LIVING WITH AND BEYOND CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	52	25%	46	22%		21%	18%	44%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	130	81%	121	75%		75%	71%	86%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	261	58%	255	60%		61%	56%	68%	62%

		Una	djusted So	cores	Case M	- NI-41I			
YOUR OVERALL NHS CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q56. The whole care team worked well together	320	92%	315	89%		89%	86%	93%	90%
Q57. Administration of care was very good or good	339	88%	331	87%		87%	82%	91%	87%
Q58. Cancer research opportunities were discussed with patient	199	41%	203	38%		38%	32%	54%	43%
Q59. Patient's average rating of care scored from very poor to very good	331	8.9	325	8.8		8.9	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tum	our Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	88%	68%	*	54%	*	*	76%	*	*	*	50%	63%	70%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	79%	57%	*	48%	*	*	58%	*	*	60%	63%	71%	64%

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	*	94%	91%	*	98%	*	79%	94%	*	*	100%	86%	93%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	96%	86%	*	83%	*	85%	81%	*	*	83%	86%	78%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	85%	86%	*	81%	*	71%	72%	*	*	75%	79%	73%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	85%	72%	*	74%	*	50%	72%	*	*	83%	89%	67%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	96%	93%	*	92%	*	100%	94%	*	*	100%	93%	91%	94%

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	*	92%	91%	*	81%	*	93%	86%	*	*	83%	88%	80%	87%
Q13. Patient was definitely told sensitively that they had cancer	*	89%	76%	*	58%	*	73%	64%	*	*	77%	64%	77%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	84%	82%	*	73%	*	60%	76%	*	*	83%	81%	73%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	90%	82%	*	83%	*	93%	89%	*	*	85%	93%	90%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	93%	82%	*	84%	*	79%	88%	*	*	80%	81%	74%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	84%	90%	*	82%	*	100%	96%	*	*	100%	74%	84%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	80%	84%	*	77%	*	100%	73%	*	*	83%	69%	78%	80%
Q19. Patient found advice from main contact person was very or quite helpful	*	98%	93%	*	87%	*	100%	94%	*	*	100%	100%	95%	95%

DECIDING ON THE BEST TREATMENT							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	72%	76%	*	70%	*	85%	80%	*	*	91%	89%	70%	77%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	70%	78%	*	78%	*	67%	91%	*	*	85%	75%	81%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	84%	79%	*	69%	*	93%	86%	*	*	83%	75%	73%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	47%	57%	*	50%	*	*	48%	*	*	*	70%	46%	51%

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	*	79%	71%	*	60%	*	80%	79%	*	*	91%	54%	63%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	97%	87%	*	91%	*	90%	100%	*	*	100%	100%	86%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	*	100%	*	*	100%	*	*	100%	100%	94%	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	*	90%	82%	*	89%	*	92%	92%	*	*	100%	89%	80%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	72%	78%	*	73%	*	67%	80%	*	*	69%	78%	65%	73%
Q29. Patient was offered information about how to get financial help or benefits	*	55%	25%	*	50%	*	*	48%	*	*	*	*	57%	54%

HOSPITAL CARE							Tumo	ur 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	*	67%	82%	*	82%	*	*	*	*	*	*	90%	74%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	50%	50%	*	69%	*	*	*	*	*	*	50%	67%	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	64%	59%	*	71%	*	*	*	*	*	80%	75%	68%	68%
Q34. Patient was always able to get help from ward staff when needed	*	67%	86%	*	68%	*	*	*	*	*	60%	74%	58%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	58%	75%	*	71%	*	*	*	*	*	*	72%	53%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	92%	*	85%	*	*	*	*	*	*	75%	63%	79%
Q37. Patient was always treated with respect and dignity while in hospital	*	83%	93%	*	100%	*	*	*	*	*	80%	95%	74%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	83%	85%	*	77%	*	*	*	*	*	100%	95%	72%	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	77%	82%	*	74%	*	80%	79%	*	*	85%	88%	63%	77%

YOUR TREATMENT							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	88%	89%	*	*	*	*	80%	*	*	*	100%	86%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	83%	79%	*	84%	*	83%	*	*	*	91%	*	76%	83%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	89%	*	*	*	*	*	88%	*	*	*	*	85%	87%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	63%	*	*	*	*	*	86%	*	*	*	*	71%	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	60%	*	*	*	*	*	*	*	*	82%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	86%	84%	*	*	*	*	80%	*	*	*	90%	79%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	77%	76%	*	78%	*	83%	*	*	*	64%	*	74%	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	86%	*	*	*	*	*	69%	*	*	*	*	92%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	52%	*	*	*	*	*	76%	*	*	*	*	65%	65%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	40%	*	*	*	*	*	*	*	*	71%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	70%	78%	*	61%	*	87%	80%	*	*	85%	74%	69%	73%

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	*	78%	71%	*	71%	*	73%	65%	*	*	83%	73%	70%	72%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	67%	64%	*	63%	*	87%	73%	*	*	92%	68%	64%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	76%	*	85%	*	93%	81%	*	*	*	94%	72%	84%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	55%	50%	*	47%	*	73%	74%	*	*	70%	65%	47%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	48%	38%	*	40%	*	80%	61%	*	*	73%	67%	44%	51%

SUPPORT WHILE AT HOME							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	48%	61%	*	49%	*	62%	50%	*	*	80%	57%	45%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	42%	36%	*	33%	*	*	*	*	*	*	50%	38%	43%

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	*	42%	45%	*	29%	*	*	42%	*	*	*	38%	32%	38%
Q52. Patient has had a review of cancer care by GP practice	*	23%	9%	*	19%	*	21%	10%	*	*	25%	15%	23%	18%

Tumour type tables

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	*	*	*	*	*	*	*	*	*	*	*	*	*	22%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	66%	83%	*	71%	*	*	78%	*	*	*	*	60%	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	56%	66%	*	64%	*	*	63%	*	*	*	68%	49%	60%

YOUR OVERALL NHS CARE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q56. The whole care team worked well together	*	90%	89%	*	87%	*	100%	87%	*	*	100%	96%	78%	89%
Q57. Administration of care was very good or good	*	86%	96%	*	91%	*	86%	80%	*	*	75%	96%	83%	87%
Q58. Cancer research opportunities were discussed with patient	*	24%	38%	*	50%	*	18%	50%	*	*	50%	36%	41%	38%
Q59. Patient's average rating of care scored from very poor to very good	*	8.7	8.9	*	9.0	*	9.2	8.7	*	*	8.9	8.8	8.6	8.8

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	*	*	*	68%	74%	72%	68%	*	70%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	68%	67%	67%	57%	*	64%

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	*	*	*	93%	94%	95%	91%	89%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	93%	91%	86%	79%	72%	85%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	90%	71%	75%	82%	76%	79%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	79%	77%	76%	71%	76%	75%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	93%	91%	94%	95%	100%	94%		

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	*	*	*	91%	92%	80%	90%	88%	87%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	75%	78%	70%	72%	72%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	72%	82%	77%	80%	72%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	81%	87%	86%	89%	100%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	83%	91%	81%	83%	87%	85%

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	*	*	*	87%	92%	85%	90%	87%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	84%	80%	78%	83%	83%	80%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	96%	92%	96%	94%	100%	95%

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	*	*	*	77%	78%	73%	80%	80%	77%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	67%	81%	79%	83%	75%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	75%	82%	79%	80%	79%	80%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	56%	62%	49%	47%	*	51%	

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	*	*	*	79%	81%	65%	73%	50%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	95%	95%	90%	98%	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	100%	98%	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	*	*	*	88%	91%	86%	91%	91%	89%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	76%	67%	69%	82%	82%	73%		
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	64%	64%	48%	51%	*	54%		

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	*	*	*	*	78%	73%	92%	80%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	67%	66%	66%	*	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	70%	72%	70%	*	68%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	74%	73%	75%	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	73%	67%	67%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	70%	75%	93%	*	79%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	87%	88%	95%	100%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	86%	79%	90%	*	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	72%	77%	75%	81%	83%	77%

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	*	*	*	88%	91%	88%	93%	100%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	84%	77%	82%	90%	*	83%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	77%	83%	86%	100%	*	87%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	64%	58%	81%	84%	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	80%	80%	*	82%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	*	88%	84%	86%	78%	100%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	85%	74%	72%	85%	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	85%	78%	79%	84%	*	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	55%	42%	74%	70%	*	65%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	63%	*	*	71%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	67%	77%	67%	78%	72%	73%

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	*	*	*	71%	70%	71%	73%	69%	72%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	73%	68%	65%	76%	75%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	88%	83%	83%	85%	80%	84%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	60%	47%	56%	63%	55%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	57%	43%	51%	51%	*	51%

SUPPORT WHILE AT HOME				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	52%	51%	52%	58%	*	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	42%	28%	45%	61%	*	43%

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	*	*	*	32%	36%	37%	43%	*	38%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	20%	26%	13%	20%	8%	18%

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	*	*	*	*	9%	24%	27%	*	22%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	76%	70%	84%	*	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	59%	63%	57%	59%	73%	60%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	*	77%	93%	90%	90%	83%	89%
Q57. Administration of care was very good or good	*	*	*	81%	86%	86%	90%	88%	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	39%	35%	41%	35%	*	38%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.7	8.9	8.9	8.9	8.3	8.8

SUPPORT FROM YOUR GP PRACTICE		Male/Female/Non-binary/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	69%	70%	*	*	*	*	70%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	71%	57%	*	*	*	*	64%

DIAGNOSTIC TESTS			Male/Female/Non-binary/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%	93%	*	*	*	*	92%			
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	86%	83%	*	*	*	*	85%			
Q7. Patient felt the length of time waiting for diagnostic test results was about right	81%	76%	*	*	*	*	79%			
Q8. Diagnostic test results were explained in a way the patient could completely understand	76%	73%	*	*	*	*	75%			
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	96%	*	*	*	*	94%			

FINDING OUT THAT YOU HAD CANCER				Male/Fema	ale/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	85%	91%	*	*	*	*	87%
Q13. Patient was definitely told sensitively that they had cancer	77%	70%	*	*	*	*	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	81%	*	*	*	*	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	91%	*	*	*	*	88%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	89%	*	*	*	*	85%

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Fema	ile/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	88%	89%	*	*	*	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	83%	75%	*	*	*	*	80%
Q19. Patient found advice from main contact person was very or quite helpful	96%	94%	*	*	*	*	95%

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	74%	82%	*	*	*	*	77%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	84%	*	*	*	*	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	77%	83%	*	*	*	*	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	49%	52%	*	*	*	*	51%

CARE PLANNING		Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	70%	70%	*	*	*	*	71%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	91%	96%	*	*	*	*	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	98%	*	*	*	*	99%		

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	87%	90%	*	*	*	*	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	69%	80%	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	57%	50%	*	*	*	*	54%

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	75%	85%	*	*	*	*	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	60%	63%	*	*	*	*	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	61%	76%	*	*	*	*	68%
Q34. Patient was always able to get help from ward staff when needed	64%	82%	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	60%	76%	*	*	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	78%	83%	*	*	*	*	79%
Q37. Patient was always treated with respect and dignity while in hospital	83%	95%	*	*	*	*	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	80%	89%	*	*	*	*	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	69%	85%	*	*	*	*	77%

YOUR TREATMENT				Male/Fema	le/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	89%	94%	*	*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	80%	88%	*	*	*	*	83%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	87%	*	*	*	*	87%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	67%	84%	*	*	*	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	71%	100%	*	*	*	*	82%
Q42_1. Patient completely had enough understandable information about progress with surgery	87%	83%	*	*	*	*	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	75%	83%	*	*	*	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	72%	*	*	*	*	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	56%	75%	*	*	*	*	65%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	61%	92%	*	*	*	*	71%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	70%	75%	*	*	*	*	73%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS			Male/Fema	ale/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	71%	74%	*	*	*	*	72%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	73%	*	*	*	*	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	83%	85%	*	*	*	*	84%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	50%	66%	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	47%	56%	*	*	*	*	51%

SUPPORT WHILE AT HOME				Male/Fema	le/Non-bina	ry/Other	
	Female Male Non-binary Prefer to self-describe Prefer not to say Not giv						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	48%	59%	*	*	*	*	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	42%	43%	*	*	*	*	43%

CARE FROM YOUR GP PRACTICE	Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	38%	38%	*	*	*	*	38%
Q52. Patient has had a review of cancer care by GP practice	22%	15%	*	*	*	*	18%

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	17%	30%	*	*	*	*	22%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	68%	83%	*	*	*	*	75%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	57%	63%	*	*	*	*	60%	

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	86%	92%	*	*	*	*	89%
Q57. Administration of care was very good or good	85%	89%	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	35%	41%	*	*	*	*	38%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.9	*	*	*	*	8.8

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	67%	*	*	91%	*	*	70%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	62%	*	*	79%	*	60%	64%

DIAGNOSTIC TESTS		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	93%	*	*	100%	*	82%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	*	86%	*	94%	85%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	*	*	64%	*	76%	79%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	*	*	69%	*	76%	75%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	*	*	100%	*	79%	94%		

FINDING OUT THAT YOU HAD CANCER				Ethr	icity		
	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	87%	*	*	93%	*	70%	87%
Q13. Patient was definitely told sensitively that they had cancer	72%	*	*	93%	*	65%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	*	100%	*	53%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	*	*	100%	*	75%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	*	*	86%	*	78%	85%

SUPPORT FROM A MAIN CONTACT PERSO	RSON Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	89%	*	*	93%	*	76%	88%
Q18. Patient found it very or quite easy to contact their main contact person	79%	*	*	69%	*	91%	80%
Q19. Patient found advice from main contact person was very or quite helpful	95%	*	*	93%	*	92%	95%

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	78%	*	*	80%	*	63%	77%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	*	*	69%	*	67%	79%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	*	*	87%	*	72%	80%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	47%	*	*	87%	*	*	51%		

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	70%	*	*	85%	*	80%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	*	*	90%	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	*	*	*	*	99%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	89%	*	*	88%	*	93%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	*	*	69%	*	56%	73%
Q29. Patient was offered information about how to get financial help or benefits	57%	*	*	50%	*	45%	54%

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	79%	*	*	*	*	*	80%
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%	*	*	*	*	*	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	*	*	*	*	*	68%
Q34. Patient was always able to get help from ward staff when needed	72%	*	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	68%	*	*	*	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	80%	*	*	*	*	*	79%
Q37. Patient was always treated with respect and dignity while in hospital	89%	*	*	*	*	*	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	84%	*	*	*	*	*	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	*	*	75%	*	87%	77%

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	92%	*	*	70%	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	*	*	*	*	*	83%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	*	*	*	*	*	87%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	*	*	*	*	*	75%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	*	*	*	*	*	82%
Q42_1. Patient completely had enough understandable information about progress with surgery	86%	*	*	80%	*	70%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	*	*	*	*	*	78%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	79%	*	*	*	*	*	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	66%	*	*	*	*	*	65%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	69%	*	*	*	*	*	71%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	72%	*	*	67%	*	78%	73%

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	72%	*	*	81%	*	67%	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	*	*	67%	*	53%	70%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	*	*	88%	*	82%	84%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	*	*	69%	*	46%	57%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	*	*	69%	*	38%	51%	

SUPPORT WHILE AT HOME				Ethr	nicity		
	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%	*	*	43%	*	45%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	43%	*	*	*	*	*	43%

CARE FROM YOUR GP PRACTICE				Ethr	nicity		
	White Mixed Asian Black Other Not given					All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	35%	*	*	27%	*	*	38%
Q52. Patient has had a review of cancer care by GP practice	19%	*	*	14%	*	12%	18%

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	19%	*	*	*	*	*	22%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75%	*	*	*	*	*	75%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	*	*	53%	*	69%	60%		

YOUR OVERALL NHS CARE				Ethr	icity		
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	89%	*	*	86%	*	94%	89%
Q57. Administration of care was very good or good	86%	*	*	88%	*	94%	87%
Q58. Cancer research opportunities were discussed with patient	38%	*	*	50%	*	*	38%
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	8.4	*	8.8	8.8

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE				IMD Quinti	е		
	1 (most deprived) 2 3 4 5 (least deprived) England						All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	77%	68%	70%	66%	*	70%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	71%	54%	64%	63%	*	64%

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	92%	100%	96%	90%	91%	*	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	86%	84%	87%	82%	87%	*	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	71%	79%	88%	78%	75%	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	71%	81%	73%	77%	73%	*	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	100%	94%	90%	92%	97%	*	94%

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	100%	89%	83%	83%	91%	*	87%	
Q13. Patient was definitely told sensitively that they had cancer	80%	77%	73%	68%	78%	*	73%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	85%	87%	76%	77%	78%	*	79%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	82%	89%	87%	91%	*	88%	
Q16. Patient was told they could go back later for more information about their diagnosis	69%	90%	80%	82%	91%	*	85%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quinti	IMD Quintile		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	73%	91%	87%	87%	90%	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	80%	90%	77%	77%	81%	*	80%
Q19. Patient found advice from main contact person was very or quite helpful	100%	94%	89%	95%	98%	*	95%

IMD quintile tables

DECIDING ON THE BEST TREATMENT				IMD Quinti	IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q20. Treatment options were explained in a way the patient could completely understand	79%	82%	78%	75%	77%	*	77%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	76%	78%	78%	81%	*	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	79%	81%	77%	82%	*	80%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	50%	65%	48%	52%	46%	*	51%	

CARE PLANNING				IMD Quinti	е		
	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	82%	84%	65%	66%	75%	*	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	95%	88%	94%	96%	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	98%	100%	*	99%

SUPPORT FROM HOSPITAL STAFF	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	77%	91%	89%	89%	89%	*	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	60%	87%	72%	71%	74%	*	73%	
Q29. Patient was offered information about how to get financial help or benefits	*	59%	52%	54%	58%	*	54%	

OSPITAL 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	*	82%	70%	82%	81%	*	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	50%	64%	59%	*	62%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	75%	67%	65%	70%	*	68%
Q34. Patient was always able to get help from ward staff when needed	*	65%	67%	73%	77%	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	60%	63%	67%	77%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	54%	80%	84%	85%	*	79%
Q37. Patient was always treated with respect and dignity while in hospital	*	94%	71%	91%	97%	*	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	75%	79%	91%	83%	*	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	85%	77%	78%	74%	81%	*	77%

IMD quintile tables

YOUR TREATMENT		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	92%	89%	92%	87%	*	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	91%	86%	89%	74%	*	83%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	89%	91%	83%	*	87%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	82%	66%	87%	*	75%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	86%	73%	*	82%		
Q42_1. Patient completely had enough understandable information about progress with surgery	*	86%	85%	82%	89%	*	85%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	87%	79%	80%	73%	*	78%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	82%	84%	81%	*	81%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	73%	57%	71%	*	65%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	74%	*	*	71%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	75%	76%	72%	72%	73%	*	73%		

MMEDIATE 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	86%	77%	69%	68%	76%	*	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	84%	65%	67%	70%	*	70%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	73%	84%	83%	84%	86%	*	84%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	46%	71%	49%	55%	60%	*	57%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	64%	42%	53%	49%	*	51%	

SUPPORT WHILE AT HOME	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	58%	48%	50%	54%	56%	*	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	60%	31%	37%	46%	43%	*	43%

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	*	39%	39%	36%	37%	*	38%	
Q52. Patient has had a review of cancer care by GP practice	29%	22%	21%	19%	13%	*	18%	

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	*	*	*	21%	18%	*	22%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	90%	79%	78%	71%	*	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	40%	71%	63%	56%	64%	*	60%

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	100%	92%	83%	88%	90%	*	89%
Q57. Administration of care was very good or good	93%	82%	83%	88%	90%	*	87%
Q58. Cancer research opportunities were discussed with patient	20%	60%	33%	32%	44%	*	38%
Q59. Patient's average rating of care scored from very poor to very good	8.6	8.8	8.8	8.8	8.9	*	8.8

SUPPORT FROM YOUR GP PRACTICE	Long term condition status				
	Yes No Not given A				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	66%	74%	*	70%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	69%	67%	64%	

DIAGNOSTIC TESTS				
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	94%	81%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	89%	94%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	81%	82%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	71%	82%	82%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	97%	89%	94%

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	88%	86%	80%	87%
Q13. Patient was definitely told sensitively that they had cancer	71%	78%	70%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	88%	60%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	91%	80%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	87%	82%	85%

SUPPORT FROM A MAIN CONTACT PERSOI	Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	87%	91%	71%	88%	
Q18. Patient found it very or quite easy to contact their main contact person	79%	81%	80%	80%	
Q19. Patient found advice from main contact person was very or quite helpful	95%	95%	92%	95%	

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	78%	78%	67%	77%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	80%	74%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	78%	81%	83%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	47%	55%	64%	51%

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	67%	77%	87%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	95%	100%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	100%	100%	99%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	87%	91%	94%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	72%	79%	58%	73%
Q29. Patient was offered information about how to get financial help or benefits	53%	61%	45%	54%

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	80%	82%	*	80%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	61%	64%	*	62%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	64%	*	68%	
Q34. Patient was always able to get help from ward staff when needed	70%	82%	*	72%	
Q35. Patient was always able to discuss worries and fears with hospital staff	68%	68%	*	67%	
Q36. Hospital staff always did everything they could to help the patient control pain	77%	86%	*	79%	
Q37. Patient was always treated with respect and dignity while in hospital	88%	92%	*	89%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	84%	86%	*	84%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	74%	80%	94%	77%	

YOUR TREATMENT Long term condition status					
	Yes	No	Not given	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	90%	*	90%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	83%	84%	*	83%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	86%	*	87%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	72%	*	75%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	86%	*	82%	
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	87%	*	85%	
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	81%	*	78%	
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	78%	83%	*	81%	
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	62%	72%	*	65%	
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	75%	62%	*	71%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	70%	78%	76%	73%	

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	68%	81%	67%	72%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	74%	53%	70%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	89%	77%	84%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	55%	62%	38%	57%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	48%	56%	50%	51%	

SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	51%	60%	45%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	40%	56%	*	43%

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	34%	41%	*	38%
Q52. Patient has had a review of cancer care by GP practice	18%	19%	13%	18%

LIVING WITH AND BEYOND CANCER		Long term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	17%	*	*	22%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	69%	83%	*	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	58%	63%	75%	60%

YOUR OVERALL NHS CARE	Long term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	87%	92%	93%	89%
Q57. Administration of care was very good or good	88%	86%	88%	87%
Q58. Cancer research opportunities were discussed with patient	32%	46%	50%	38%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	8.4	8.8

