

Cancer Patient Experience Survey

2022 Results

University Hospital Southampton NHS Foundation Trust

Published July 2023

Executive Summary

Questions Above Expected Range

	Case	Mix Adjusted S	Scores	
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q7. Patient felt the length of time waiting for diagnostic test results was about right	83%	75%	81%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	75%	81%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	83%	87%	85%
Q20. Treatment options were explained in a way the patient could completely understand	86%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	77%	82%	79%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	59%	47%	57%	52%
Q27. Staff provided the patient with relevant information on available support	93%	88%	92%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	80%	73%	78%	76%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	81%	87%	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	75%	81%	78%
Q41_1. Beforehand patient completely had enough understandable information about surgery	92%	87%	92%	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	82%	75%	82%	79%

Questions Below Expected Range

	Case	Mix Adjusted S	cores	
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	74%	74%	81%	78%

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.

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

1,037 patients responded out of a total of 1,838 patients, resulting in a response rate of 56%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	1,959	1,838	1,037	56%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

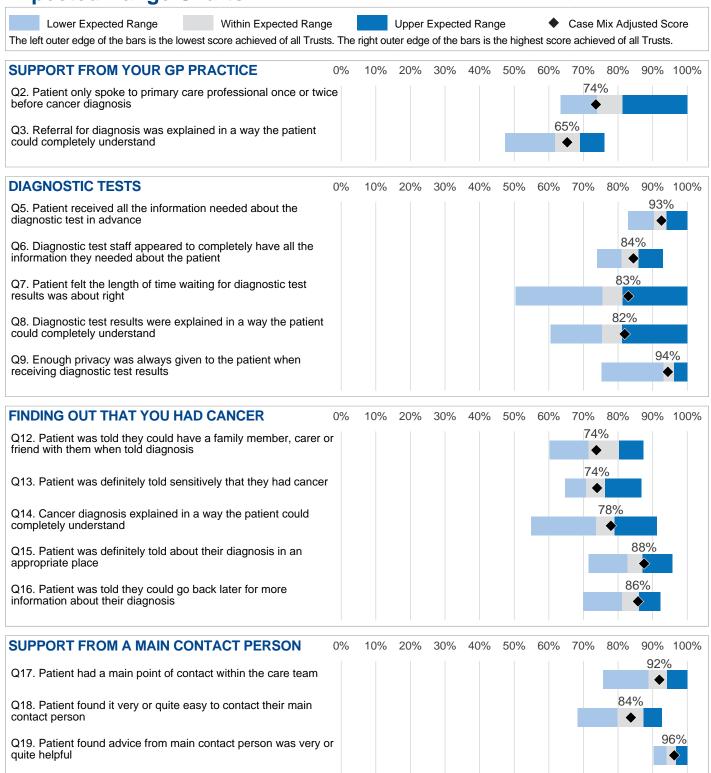
	Number of Respondents
Paper	829
Online	207
Phone	1
Translation Service	0
Total	1,037

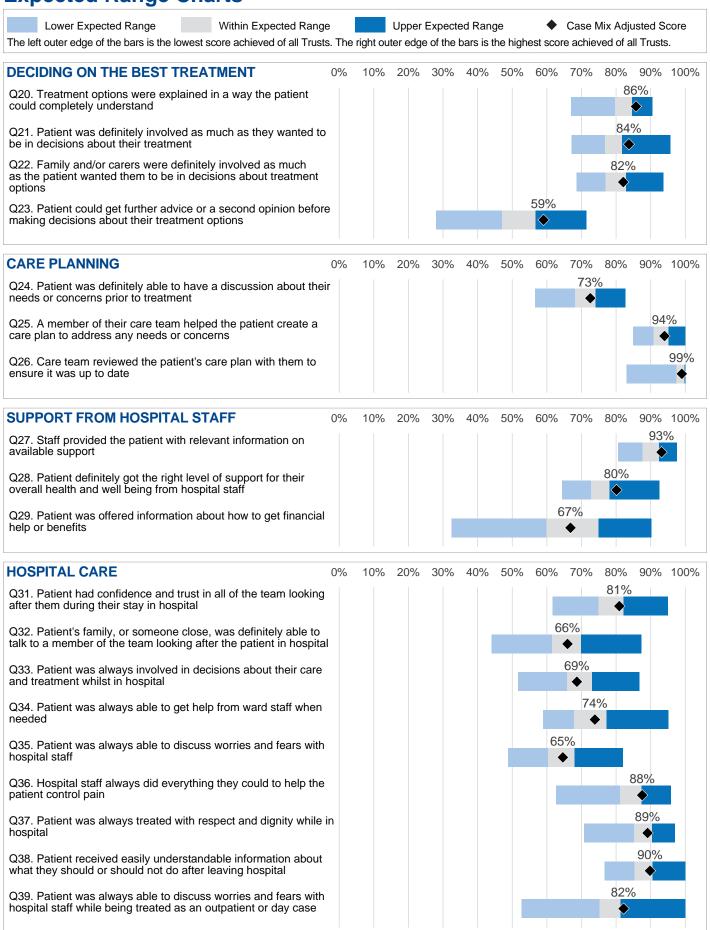
Respondents by Tumour Group

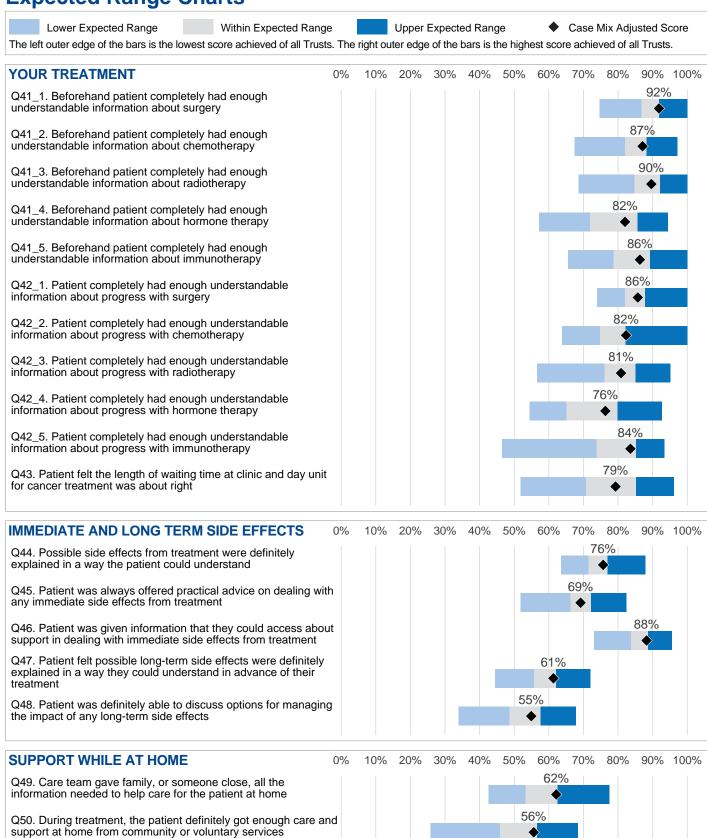
	Number of Respondents
Brain / CNS	9
Breast	187
Colorectal / LGT	96
Gynaecological	44
Haematological	168
Head and Neck	24
Lung	112
Prostate	115
Sarcoma	14
Skin	43
Upper Gastro	80
Urological	74
Other	71
Total	1,037

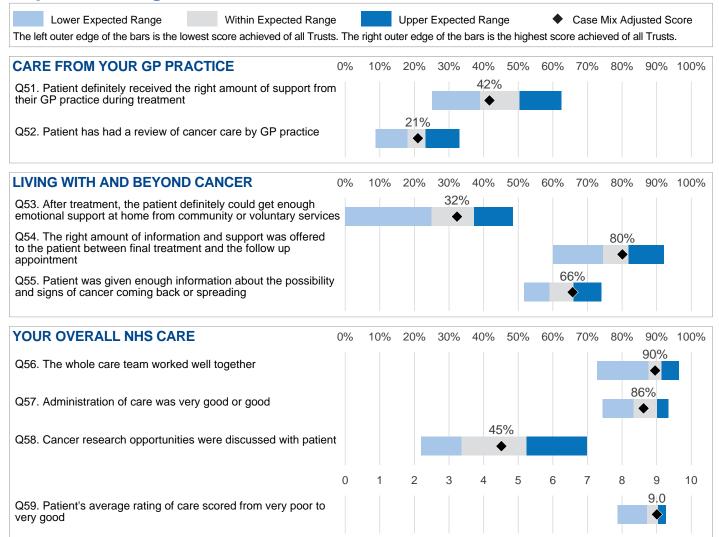
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	927
Irish	*
Gypsy or Irish Traveller	*
Any other White background	18
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	8
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	54
Total	1,037









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					
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	386	71%	516	73%		74%	74%	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	516	63%	679	64%		65%	62%	69%	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	669	94%	841	93%		93%	90%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	699	81%	885	84%		84%	81%	86%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	690	83%	888	83%		83%	75%	81%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	695	80%	888	82%		82%	75%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	697	95%	892	94%		94%	93%	96%	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	756	64%	949	73%	A	74%	72%	80%	76%
Q13. Patient was definitely told sensitively that they had cancer	794	71%	1031	73%		74%	71%	76%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	791	76%	1027	77%		78%	74%	79%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	785	84%	1026	87%		88%	83%	87%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	686	84%	899	85%		86%	81%	86%	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	769	93%	996	92%		92%	89%	94%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	666	85%	824	84%		84%	80%	87%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	690	96%	871	96%		96%	94%	97%	95%	

Comparability tables

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

**	No score	available	for 2021.
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		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	National Score
Q20. Treatment options were explained in a way the patient could completely understand	746	82%	964	86%		86%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	786	81%	1019	83%		84%	77%	82%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	624	73%	859	82%	•	82%	77%	83%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	374	52%	464	58%		59%	47%	57%	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	701	69%	926	72%		73%	68%	74%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	377	94%	536	94%		94%	91%	95%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	284	100%	410	99%		99%	98%	100%	99%

		Una	djusted So	cores		Case M	d Scores	ļ., ., .	
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	661	91%	875	93%		93%	88%	92%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	786	76%	1023	80%		80%	73%	78%	76%
Q29. Patient was offered information about how to get financial help or benefits	367	66%	522	68%		67%	60%	75%	67%

		Una	djusted So	cores		Case M			
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	490	80%	631	81%		81%	75%	82%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	385	61%	511	66%		66%	61%	70%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	484	70%	625	68%		69%	66%	73%	70%
Q34. Patient was always able to get help from ward staff when needed	485	78%	623	74%		74%	68%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	469	67%	614	65%		65%	60%	68%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	422	85%	539	88%		88%	81%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	491	89%	631	89%		89%	85%	90%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	477	89%	617	90%		90%	85%	91%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	647	76%	854	82%		82%	75%	81%	78%

Comparability tables

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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 N	d Scores		
YOUR TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	Nationa Score
Q41_1. Beforehand patient completely had enough understandable information about surgery	479	88%	615	91%		92%	87%	92%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	383	86%	500	87%		87%	82%	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	251	86%	307	89%		90%	85%	92%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	118	82%	139	81%		82%	72%	86%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	107	84%	191	86%		86%	79%	89%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	472	85%	611	85%		86%	82%	88%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	377	79%	501	82%		82%	75%	82%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	246	74%	303	80%		81%	76%	85%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	117	77%	139	76%		76%	65%	80%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	105	75%	190	84%		84%	74%	85%	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	774	80%	1008	79%		79%	71%	85%	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	761	74%	975	75%		76%	71%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	716	70%	954	69%		69%	66%	72%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	582	86%	791	88%		88%	84%	89%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	695	59%	932	61%		61%	56%	62%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	589	53%	791	54%		55%	49%	58%	53%

		Una	djusted So	cores		Case M			
SUPPORT WHILE AT HOME	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	507	53%	686	62%	•	62%	53%	62%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	321	53%	431	55%		56%	46%	57%	51%

Comparability tables

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

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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	National Score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	411	37%	558	42%		42%	39%	50%	45%
Q52. Patient has had a review of cancer care by GP practice	763	17%	972	21%		21%	18%	23%	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	National Score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	197	34%	228	32%		32%	25%	37%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	404	82%	492	79%		80%	74%	82%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	626	65%	813	66%		66%	59%	66%	62%

		Una	djusted So	cores		Case M	ix Adjuste	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	National Score
Q56. The whole care team worked well together	757	91%	973	89%		90%	88%	91%	90%
Q57. Administration of care was very good or good	782	87%	1013	86%		86%	83%	90%	87%
Q58. Cancer research opportunities were discussed with patient	492	51%	676	46%		45%	34%	52%	43%
Q59. Patient's average rating of care scored from very poor to very good	763	9.0	990	9.0		9.0	8.7	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumour Type							
	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	*	90%	72%	64%	50%	74%	83%	75%	*	75%	68%	71%	77%	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	80%	72%	74%	38%	67%	64%	67%	*	62%	60%	70%	66%	64%

DIAGNOSTIC TESTS							Tumo	ur Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All Cancers
Q5. Patient received all the information needed about the diagnostic test in advance	*	93%	96%	88%	87%	90%	95%	93%	*	94%	94%	89%	98%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	89%	90%	69%	78%	90%	81%	86%	73%	84%	88%	83%	86%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	77%	91%	81%	86%	55%	87%	85%	55%	73%	89%	89%	77%	83%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	87%	86%	76%	74%	73%	82%	79%	80%	89%	81%	83%	84%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	97%	92%	92%	91%	95%	98%	94%	91%	95%	95%	94%	95%	94%

FINDING OUT THAT YOU HAD CANCER							Tumo	ur Ty _l	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	*	74%	82%	58%	70%	73%	80%	69%	62%	64%	75%	68%	79%	73%
Q13. Patient was definitely told sensitively that they had cancer	*	79%	79%	72%	66%	63%	80%	71%	71%	69%	65%	64%	76%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	83%	84%	74%	67%	71%	77%	80%	57%	79%	77%	78%	79%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	92%	88%	88%	75%	92%	92%	91%	86%	95%	83%	85%	83%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	*	86%	83%	91%	76%	68%	94%	96%	75%	83%	82%	80%	82%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	ur Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	82%	97%	100%	93%	78%	96%	93%	86%	95%	92%	96%	94%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	81%	84%	97%	83%	75%	85%	69%	73%	91%	91%	93%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	97%	97%	95%	88%	96%	94%	100%	97%	97%	98%	96%	96%

DECIDING ON THE BEST TREATMENT							Tumo	our Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	88%	88%	100%	82%	79%	88%	85%	83%	93%	84%	90%	75%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	84%	83%	79%	76%	67%	89%	89%	86%	93%	86%	82%	83%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	80%	86%	83%	80%	89%	89%	77%	86%	93%	86%	78%	82%	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	44%	57%	72%	51%	69%	58%	77%	*	72%	60%	59%	62%	58%

CARE PLANNING							Tumo	our Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	67%	79%	87%	65%	78%	73%	71%	92%	81%	75%	71%	72%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	98%	96%	94%	86%	97%	91%	*	91%	96%	91%	92%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	99%	98%	100%	97%	*	100%	100%	*	100%	100%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Ty _l	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	*	93%	94%	97%	90%	91%	93%	91%	100%	100%	95%	88%	97%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	76%	81%	84%	75%	88%	84%	78%	50%	88%	88%	80%	86%	80%
Q29. Patient was offered information about how to get financial help or benefits	*	68%	76%	74%	65%	77%	76%	48%	*	61%	70%	50%	67%	68%

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	*	81%	80%	85%	74%	79%	83%	88%	*	90%	88%	73%	73%	81%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	71%	66%	74%	57%	58%	77%	57%	*	69%	81%	52%	61%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	67%	66%	71%	62%	71%	72%	78%	*	67%	78%	45%	65%	68%
Q34. Patient was always able to get help from ward staff when needed	*	65%	68%	85%	74%	85%	75%	79%	*	95%	84%	65%	51%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	61%	61%	75%	65%	64%	63%	69%	*	70%	80%	59%	50%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	87%	93%	83%	90%	92%	85%	89%	*	94%	90%	85%	79%	88%
Q37. Patient was always treated with respect and dignity while in hospital	*	79%	93%	85%	90%	93%	88%	90%	*	95%	95%	89%	88%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	85%	91%	88%	86%	92%	95%	93%	*	76%	97%	88%	88%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	78%	84%	91%	80%	83%	79%	87%	75%	90%	91%	80%	81%	82%

YOUR TREATMENT							Tumo	ur Ty	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	*	91%	91%	94%	79%	93%	96%	91%	*	89%	92%	91%	91%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	86%	84%	92%	85%	80%	94%	91%	*	*	89%	90%	81%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	83%	96%	93%	100%	79%	97%	82%	*	*	93%	*	96%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	80%	*	*	*	*	*	78%	*	*	*	*	86%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	73%	*	*	87%	*	94%	*	*	93%	82%	96%	72%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	84%	87%	80%	92%	86%	81%	86%	*	85%	88%	82%	89%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	77%	81%	92%	82%	*	91%	91%	*	*	86%	71%	81%	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	75%	88%	80%	90%	74%	84%	70%	*	*	93%	*	88%	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	74%	*	*	*	*	*	82%	*	*	*	*	71%	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	63%	*	*	82%	*	94%	*	*	93%	73%	92%	78%	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	74%	82%	83%	73%	70%	86%	82%	57%	73%	83%	92%	82%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	78%	78%	90%	63%	67%	82%	81%	71%	78%	77%	70%	73%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	65%	81%	76%	58%	70%	72%	70%	71%	67%	73%	66%	75%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	87%	96%	95%	84%	90%	87%	87%	92%	83%	92%	90%	85%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	60%	62%	68%	49%	48%	63%	70%	57%	60%	63%	61%	64%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	51%	55%	61%	48%	41%	61%	60%	27%	56%	60%	57%	56%	54%

SUPPORT WHILE AT HOME							Tumo	our Ty _l	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	*	62%	62%	48%	58%	47%	69%	62%	40%	71%	69%	62%	59%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	48%	59%	68%	45%	64%	69%	60%	*	60%	65%	45%	53%	55%

CARE FROM YOUR GP PRACTICE							Tumo	our Ty _l	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	*	38%	45%	55%	34%	60%	40%	35%	*	44%	51%	45%	41%	42%
Q52. Patient has had a review of cancer care by GP practice	*	17%	22%	24%	13%	14%	31%	20%	29%	14%	32%	26%	22%	21%

Tumour type tables

LIVING WITH AND BEYOND CANCER							Tumo	ur Ty	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	*	34%	42%	50%	19%	*	30%	22%	*	*	45%	27%	33%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	76%	87%	77%	83%	59%	82%	80%	*	70%	83%	79%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	59%	59%	68%	74%	44%	67%	68%	67%	79%	62%	69%	63%	66%

YOUR OVERALL NHS CARE							Tumo	our Ty _l	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	*	88%	92%	88%	87%	95%	92%	89%	69%	91%	96%	85%	93%	89%
Q57. Administration of care was very good or good	*	83%	88%	86%	87%	83%	87%	88%	64%	86%	89%	85%	85%	86%
Q58. Cancer research opportunities were discussed with patient	*	35%	34%	50%	52%	8%	55%	43%	50%	57%	56%	52%	49%	46%
Q59. Patient's average rating of care scored from very poor to very good	*	9.0	9.1	9.1	9.0	8.7	9.0	8.9	8.0	9.0	9.5	8.9	8.8	9.0

Age group tables

SUPPORT FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	71%	81%	68%	72%	75%	100%	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	70%	81%	60%	67%	65%	62%	62%	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	*	92%	91%	91%	94%	93%	92%	89%	93%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	77%	92%	93%	85%	85%	81%	89%	84%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	54%	52%	90%	81%	83%	86%	89%	83%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	69%	61%	82%	81%	82%	84%	85%	82%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	77%	75%	89%	94%	97%	94%	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	100%	93%	54%	51%	74%	72%	76%	96%	73%	
Q13. Patient was definitely told sensitively that they had cancer	60%	60%	58%	68%	74%	72%	76%	85%	73%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	90%	60%	57%	77%	76%	77%	80%	76%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	70%	80%	63%	74%	86%	89%	90%	94%	87%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	79%	68%	83%	84%	87%	86%	82%	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	*	92%	87%	84%	91%	94%	92%	97%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	82%	96%	87%	82%	83%	83%	96%	84%
Q19. Patient found advice from main contact person was very or quite helpful	*	100%	100%	93%	96%	97%	95%	97%	96%

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	*	92%	68%	86%	82%	87%	89%	87%	86%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	73%	74%	83%	79%	87%	84%	91%	83%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	77%	75%	79%	77%	84%	86%	89%	82%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	42%	61%	35%	58%	57%	64%	79%	58%	

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	*	71%	56%	74%	70%	72%	75%	82%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	82%	92%	95%	93%	95%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	90%	100%	100%	99%	99%	100%	99%

SUPPORT FROM HOSPITAL STAFF	Age										
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All		
Q27. Staff provided the patient with relevant information on available support	100%	93%	97%	94%	94%	93%	92%	86%	93%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	60%	58%	80%	76%	82%	82%	91%	80%		
Q29. Patient was offered information about how to get financial help or benefits	100%	80%	68%	84%	72%	66%	57%	31%	68%		

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%	52%	87%	78%	82%	82%	94%	81%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	29%	59%	61%	66%	73%	79%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	67%	43%	69%	63%	71%	71%	81%	68%
Q34. Patient was always able to get help from ward staff when needed	*	83%	43%	69%	69%	76%	78%	93%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	75%	43%	61%	64%	66%	66%	81%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	100%	83%	92%	85%	85%	90%	100%	88%
Q37. Patient was always treated with respect and dignity while in hospital	*	83%	81%	80%	86%	91%	90%	100%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	100%	81%	86%	87%	92%	89%	93%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	79%	70%	81%	78%	84%	82%	100%	82%

Age group tables

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	67%	100%	83%	95%	95%	95%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	75%	56%	93%	84%	89%	89%	*	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	94%	85%	86%	96%	90%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	95%	70%	77%	89%	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	95%	83%	87%	88%	*	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	71%	93%	75%	87%	88%	89%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	83%	56%	85%	81%	85%	83%	*	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	86%	74%	77%	85%	100%	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	77%	77%	71%	83%	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	85%	83%	89%	76%	*	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	30%	73%	65%	85%	77%	81%	80%	88%	79%

IMMEDIATE AND LONG TERM SIDE EFFEC	IMMEDIATE AND LONG TERM SIDE EFFECTS									
	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	40%	80%	52%	89%	73%	77%	77%	67%	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	79%	45%	74%	70%	69%	67%	79%	69%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	92%	73%	90%	90%	88%	87%	100%	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	67%	43%	63%	60%	62%	61%	75%	61%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	69%	36%	58%	53%	55%	56%	56%	54%	

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	*	45%	50%	59%	63%	63%	60%	72%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	29%	53%	55%	59%	58%	38%	55%

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	*	80%	41%	45%	46%	41%	35%	47%	42%
Q52. Patient has had a review of cancer care by GP practice	*	20%	20%	27%	21%	22%	20%	10%	21%

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	*	*	33%	14%	35%	29%	41%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	50%	71%	76%	84%	81%	93%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	50%	46%	53%	67%	70%	64%	88%	66%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	100%	87%	79%	90%	90%	89%	90%	93%	89%
Q57. Administration of care was very good or good	90%	67%	65%	83%	86%	89%	85%	88%	86%
Q58. Cancer research opportunities were discussed with patient	*	45%	30%	45%	46%	51%	41%	54%	46%
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.3	8.3	9.0	8.9	9.1	9.1	9.1	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	77%	69%	*	*	*	68%	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	61%	*	*	*	77%	64%

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	93%	92%	*	*	*	95%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	86%	*	*	*	78%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	87%	*	*	*	76%	83%
Q8. Diagnostic test results were explained in a way the patient could completely understand	81%	82%	*	*	*	80%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	95%	*	*	*	95%	94%

FINDING OUT THAT YOU HAD CANCER				Male/Fema	ile/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	72%	74%	*	*	*	70%	73%
Q13. Patient was definitely told sensitively that they had cancer	75%	71%	*	*	*	71%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	77%	*	*	*	67%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	88%	*	*	*	92%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	86%	*	*	*	90%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Fema	ıle/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	90%	94%	*	*	*	91%	92%
Q18. Patient found it very or quite easy to contact their main contact person	86%	83%	*	*	*	77%	84%
Q19. Patient found advice from main contact person was very or quite helpful	96%	96%	*	*	*	95%	96%

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	87%	86%	*	*	*	78%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	85%	*	*	*	76%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	83%	*	*	*	78%	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	50%	67%	*	*	*	60%	58%

CARE PLANNING				Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	71%	74%	*	*	*	64%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	93%	*	*	*	89%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	*	*	*	100%	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	93%	93%	*	*	*	89%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	84%	*	*	*	73%	80%
Q29. Patient was offered information about how to get financial help or benefits	71%	65%	*	*	*	59%	68%

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	79%	83%	*	*	*	64%	81%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	68%	*	*	*	47%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	67%	*	*	*	77%	68%
Q34. Patient was always able to get help from ward staff when needed	70%	77%	*	*	*	82%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	67%	*	*	*	68%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	86%	90%	*	*	*	78%	88%
Q37. Patient was always treated with respect and dignity while in hospital	86%	92%	*	*	*	86%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	92%	*	*	*	85%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	84%	*	*	*	78%	82%

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	90%	93%	*	*	*	79%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	89%	*	*	*	85%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	94%	*	*	*	73%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	83%	77%	*	*	*	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	91%	*	*	*	80%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	87%	*	*	*	70%	85%
Q42_2. Patient completely had enough understandable nformation about progress with chemotherapy	83%	82%	*	*	*	79%	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	80%	84%	*	*	*	40%	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	73%	82%	*	*	*	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	75%	94%	*	*	*	*	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	83%	*	*	*	74%	79%

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	76%	75%	*	*	*	83%	75%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	67%	71%	*	*	*	68%	69%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	91%	*	*	*	77%	88%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	63%	*	*	*	56%	61%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	57%	*	*	*	50%	54%		

SUPPORT WHILE AT HOME				Male/Fema	le/Non-bina	ry/Other	
	Female Male Non-binary Prefer to self-describe Prefer not to say						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	61%	63%	*	*	*	50%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	55%	57%	*	*	*	48%	55%

CARE FROM YOUR GP PRACTICE		Male/Female/Non-binary/Other					
	Female Male Non-binary Prefer to self-describe Prefer not to say Not give					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	40%	46%	*	*	*	16%	42%
Q52. Patient has had a review of cancer care by GP practice	20%	22%	*	*	*	19%	21%

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	34%	32%	*	*	*	*	32%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	82%	*	*	*	63%	79%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	70%	*	*	*	48%	66%		

Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE				Male/Fema	ale/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	89%	90%	*	*	*	87%	89%
Q57. Administration of care was very good or good	85%	87%	*	*	*	88%	86%
Q58. Cancer research opportunities were discussed with patient	40%	53%	*	*	*	50%	46%
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.0	*	*	*	8.8	9.0

Ethnicity tables

SUPPORT FROM YOUR GP PRACTICE				Ethr	nicity		
	White Mixed Asian Black Other Not given						All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	73%	*	*	*	*	67%	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	64%	*	*	*	*	73%	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%	*	91%	*	*	91%	93%			
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	*	92%	*	*	73%	84%			
Q7. Patient felt the length of time waiting for diagnostic test results was about right	83%	*	83%	*	*	77%	83%			
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	*	83%	*	*	77%	82%			
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	*	100%	*	*	89%	94%			

FINDING OUT THAT YOU HAD CANCER		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	73%	*	86%	*	*	74%	73%		
Q13. Patient was definitely told sensitively that they had cancer	73%	*	88%	*	*	72%	73%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	88%	*	*	71%	77%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	*	93%	*	*	87%	87%		
Q16. Patient was told they could go back later for more information about their diagnosis	85%	*	93%	*	*	86%	85%		

SUPPORT FROM A MAIN CONTACT PERSO	ON Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	92%	*	94%	*	*	90%	92%
Q18. Patient found it very or quite easy to contact their main contact person	84%	*	80%	*	*	76%	84%
Q19. Patient found advice from main contact person was very or quite helpful	96%	*	100%	*	*	95%	96%

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	86%	*	94%	*	*	83%	86%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	*	94%	*	*	73%	83%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	*	80%	*	*	72%	82%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	58%	*	64%	*	*	68%	58%		

Ethnicity tables

CARE PLANNING	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	72%	*	86%	*	*	70%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	100%	*	*	93%	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	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	94%	*	93%	*	*	90%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	80%	*	93%	*	*	80%	80%
Q29. Patient was offered information about how to get financial help or benefits	68%	*	92%	*	*	54%	68%

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	81%	*	92%	*	*	66%	81%
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%	*	80%	*	*	46%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	67%	*	92%	*	*	79%	68%
Q34. Patient was always able to get help from ward staff when needed	73%	*	100%	*	*	69%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	*	92%	*	*	59%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	*	100%	*	*	75%	88%
Q37. Patient was always treated with respect and dignity while in hospital	89%	*	92%	*	*	79%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	*	82%	*	*	79%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	*	87%	*	*	82%	82%

Ethnicity tables

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	92%	*	*	90%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	92%	*	*	89%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	86%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	*	*	*	*	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	87%	*	*	*	*	*	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	*	92%	*	*	79%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	83%	*	85%	*	*	83%	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	*	*	*	*	62%	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	77%	*	*	*	*	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	84%	*	*	*	*	*	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	*	80%	*	*	75%	79%

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	75%	*	100%	*	*	80%	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	*	93%	*	*	64%	69%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	*	100%	*	*	85%	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	*	80%	*	*	57%	61%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	*	85%	*	*	49%	54%	

SUPPORT WHILE AT HOME	Ethnicity						
	White Mixed Asian Black Other Not given						
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	*	80%	*	*	54%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	55%	*	90%	*	*	48%	55%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not given					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	43%	*	45%	*	*	21%	42%
Q52. Patient has had a review of cancer care by GP practice	21%	*	9%	*	*	21%	21%

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	33%	*	*	*	*	18%	32%			
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	*	*	*	*	70%	79%			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	*	50%	*	*	61%	66%			

YOUR OVERALL NHS CARE		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q56. The whole care team worked well together	90%	*	100%	*	*	84%	89%		
Q57. Administration of care was very good or good	86%	*	93%	*	*	84%	86%		
Q58. Cancer research opportunities were discussed with patient	46%	*	77%	*	*	48%	46%		
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	9.1	*	*	8.7	9.0		

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	65%	71%	72%	76%	73%	*	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	38%	71%	60%	61%	71%	58%	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	89%	90%	92%	93%	95%	100%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	79%	85%	86%	87%	83%	86%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	82%	82%	82%	83%	100%	83%
Q8. Diagnostic test results were explained in a way the patient could completely understand	86%	82%	82%	82%	81%	80%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	91%	93%	92%	98%	95%	93%	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	76%	74%	69%	75%	73%	63%	73%	
Q13. Patient was definitely told sensitively that they had cancer	81%	75%	68%	70%	75%	65%	73%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	86%	75%	78%	76%	77%	70%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	86%	85%	90%	86%	90%	87%	
Q16. Patient was told they could go back later for more information about their diagnosis	86%	91%	81%	85%	86%	59%	85%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quinti	le		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	89%	92%	89%	90%	95%	85%	92%
Q18. Patient found it very or quite easy to contact their main contact person	83%	89%	83%	82%	83%	87%	84%
Q19. Patient found advice from main contact person was very or quite helpful	93%	97%	95%	97%	97%	88%	96%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q20. Treatment options were explained in a way the patient could completely understand	89%	86%	87%	83%	86%	94%	86%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	86%	82%	80%	84%	86%	75%	83%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	73%	78%	82%	84%	86%	83%	82%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	47%	64%	58%	65%	53%	50%	58%		

CARE PLANNING	ANNING 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	75%	72%	74%	72%	71%	68%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	97%	89%	95%	94%	86%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	100%	98%	98%	*	99%

SUPPORT FROM HOSPITAL STAFF			IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q27. Staff provided the patient with relevant information on available support	89%	91%	94%	94%	94%	87%	93%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	82%	79%	80%	80%	80%	80%		
Q29. Patient was offered information about how to get financial help or benefits	71%	73%	64%	64%	69%	62%	68%		

HOSPITAL CARE	IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	84%	87%	78%	81%	78%	67%	81%	
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%	70%	64%	65%	67%	67%	66%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	70%	68%	65%	69%	67%	68%	
Q34. Patient was always able to get help from ward staff when needed	73%	74%	76%	68%	77%	67%	74%	
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	65%	67%	58%	69%	67%	65%	
Q36. Hospital staff always did everything they could to help the patient control pain	92%	86%	89%	85%	89%	86%	88%	
Q37. Patient was always treated with respect and dignity while in hospital	87%	90%	88%	89%	90%	80%	89%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	93%	88%	88%	90%	90%	93%	90%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	81%	87%	82%	81%	73%	82%	

IMD quintile tables

YOUR TREATMENT				IMD Quinti	ile		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	92%	91%	92%	91%	77%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	97%	85%	93%	82%	86%	*	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	89%	92%	93%	86%	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	74%	94%	75%	84%	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	100%	85%	83%	86%	86%	*	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	79%	86%	83%	83%	88%	69%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	88%	79%	87%	79%	83%	*	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	76%	81%	82%	79%	*	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	63%	82%	70%	82%	*	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	91%	80%	86%	84%	83%	*	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	81%	81%	78%	79%	79%	80%	79%

IMMEDIATE AND LONG TERM SIDE EFFECTS					MD 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	83%	80%	79%	74%	71%	74%	75%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	77%	73%	63%	66%	63%	69%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	89%	88%	88%	88%	93%	88%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	69%	65%	65%	60%	55%	55%	61%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	73%	59%	59%	51%	48%	47%	54%		

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	60%	65%	60%	63%	62%	38%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	52%	55%	56%	52%	60%	42%	55%

CARE FROM YOUR GP PRACTICE	P 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	21%	43%	50%	42%	39%	64%	42%		
Q52. Patient has had a review of cancer care by GP practice	25%	21%	26%	18%	18%	42%	21%		

Cancer Patient Experience Survey 2022 University Hospital Southampton NHS Foundation Trust

IMD quintile tables

LIVING WITH AND BEYOND CANCER	<u> </u>			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	20%	39%	44%	26%	31%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	85%	80%	78%	79%	63%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	64%	66%	65%	66%	72%	66%

YOUR OVERALL NHS CARE				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q56. The whole care team worked well together	87%	88%	90%	92%	88%	95%	89%
Q57. Administration of care was very good or good	83%	90%	83%	89%	84%	80%	86%
Q58. Cancer research opportunities were discussed with patient	62%	46%	41%	51%	44%	46%	46%
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.0	9.0	9.0	9.0	8.9	9.0

SUPPORT FROM YOUR GP PRACTICE				
	Yes	No	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	72%	75%	63%	73%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	68%	75%	64%

DIAGNOSTIC TESTS		Long term condition status		
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	93%	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	88%	72%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	85%	80%	79%	83%
Q8. Diagnostic test results were explained in a way the patient could completely understand	83%	80%	78%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	94%	95%	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	74%	71%	77%	73%
Q13. Patient was definitely told sensitively that they had cancer	74%	71%	71%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	77%	70%	77%
Q15. Patient was definitely told about their diagnosis in appropriate place	88%	85%	87%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	85%	86%	85%

SUPPORT FROM A MAIN CONTACT PERSO	Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	92%	92%	86%	92%	
Q18. Patient found it very or quite easy to contact their main contact person	85%	82%	81%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	97%	94%	96%	

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	86%	86%	79%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	85%	77%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	82%	76%	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	59%	59%	51%	58%

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	71%	74%	71%	72%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	93%	95%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	98%	97%	99%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	92%	95%	91%	93%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	80%	81%	81%	80%
Q29. Patient was offered information about how to get financial help or benefits	66%	74%	57%	68%

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	79%	85%	72%	81%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	70%	50%	66%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	66%	71%	75%	68%	
Q34. Patient was always able to get help from ward staff when needed	73%	73%	86%	74%	
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	68%	69%	65%	
Q36. Hospital staff always did everything they could to help the patient control pain	85%	92%	86%	88%	
Q37. Patient was always treated with respect and dignity while in hospital	88%	92%	86%	89%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	91%	89%	90%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	82%	88%	82%	

YOUR TREATMENT	Long term condition	ong term condition status		
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	94%	79%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	89%	89%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	88%	80%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	83%	70%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	94%	79%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	89%	76%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	88%	89%	82%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	83%	50%	80%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	77%	74%	70%	76%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	81%	92%	73%	84%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	79%	82%	73%	79%

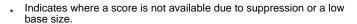
IMMEDIATE AND LONG TERM SIDE EFFECTS		Long term condition status		
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	81%	69%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	67%	72%	68%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	91%	83%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	65%	57%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	59%	40%	54%

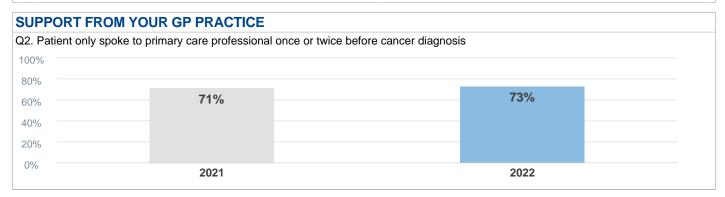
SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	63%	56%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	57%	51%	61%	55%

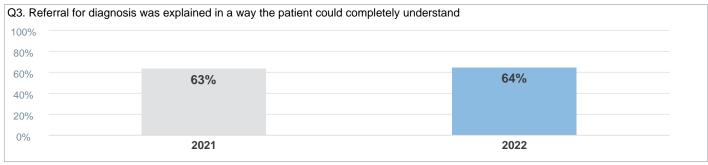
CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	42%	45%	22%	42%
Q52. Patient has had a review of cancer care by GP practice	22%	20%	20%	21%

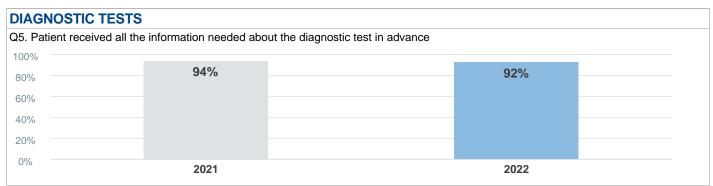
LIVING WITH AND BEYOND CANCER		Long term condition status			
	Yes	No	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	33%	25%	32%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	80%	69%	79%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	66%	61%	66%	

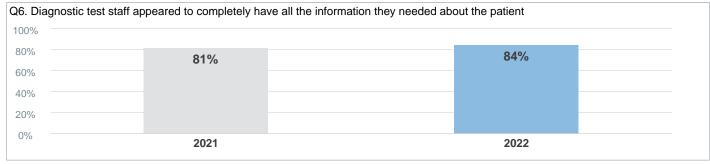
YOUR OVERALL NHS CARE	Long term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	88%	92%	89%	89%
Q57. Administration of care was very good or good	85%	86%	88%	86%
Q58. Cancer research opportunities were discussed with patient	46%	49%	38%	46%
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.0	8.8	9.0

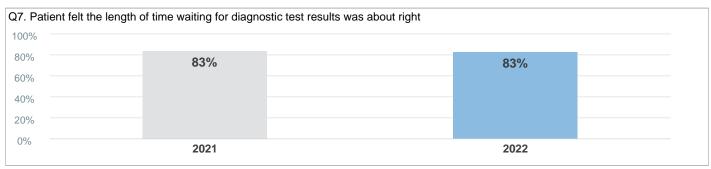


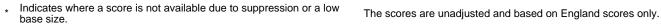


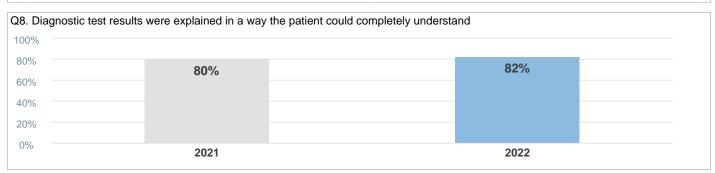


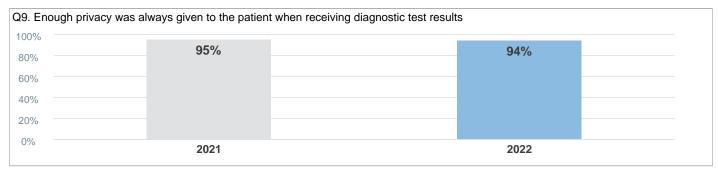








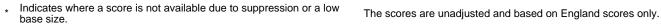




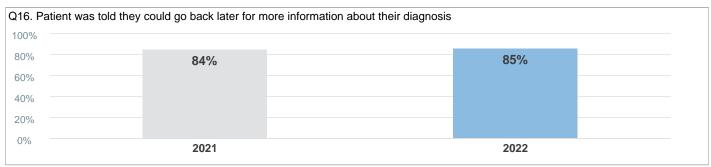


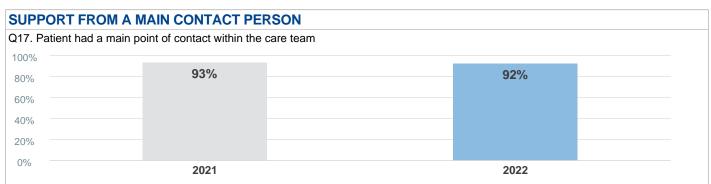






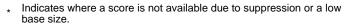


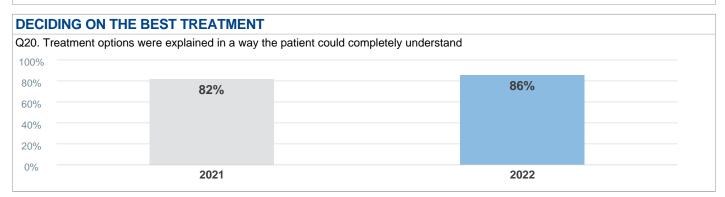




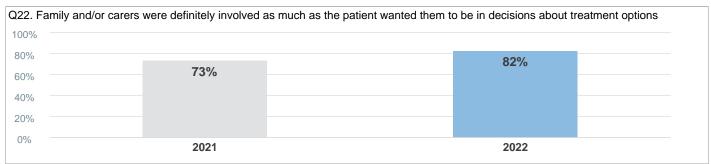


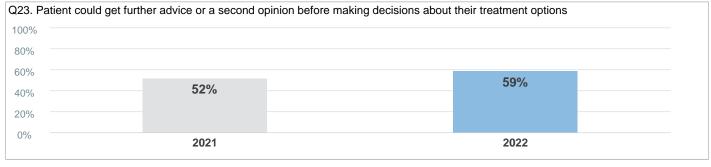




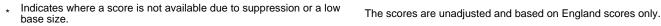






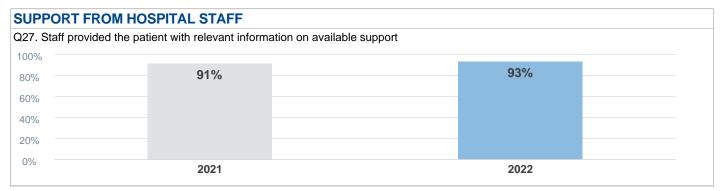


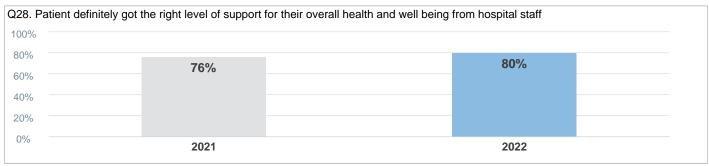






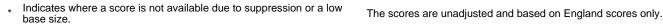




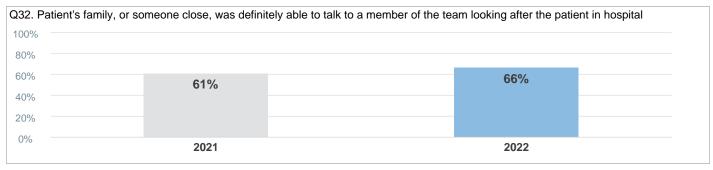


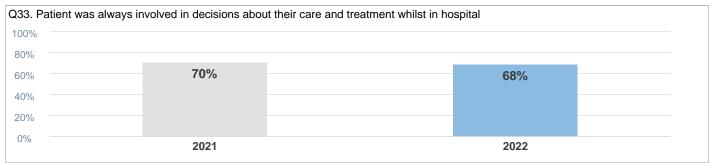


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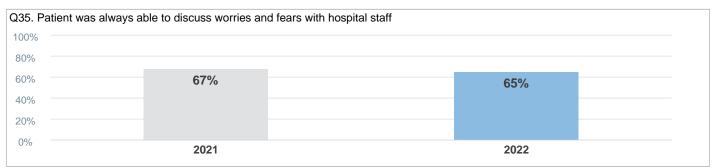


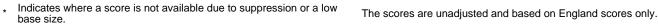


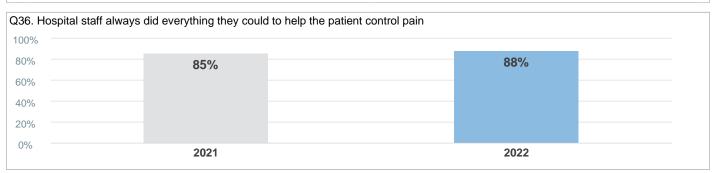


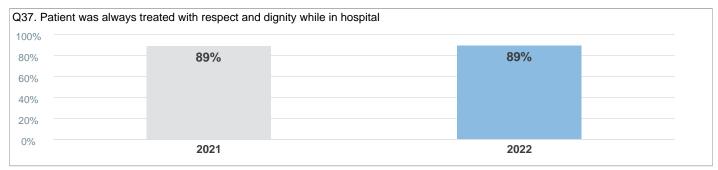


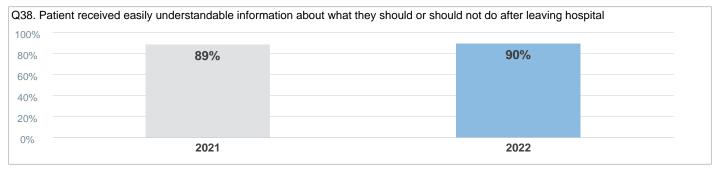




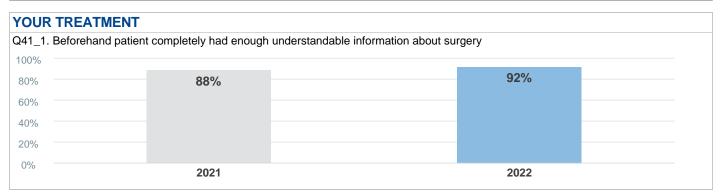




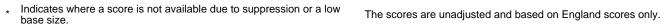


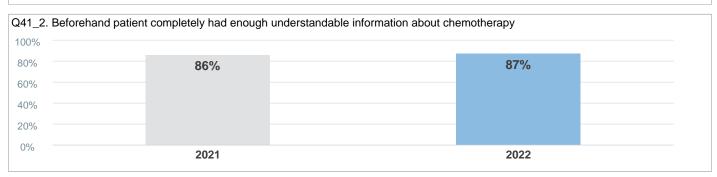


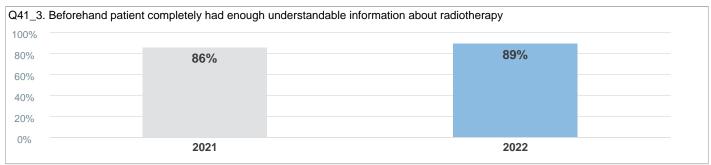


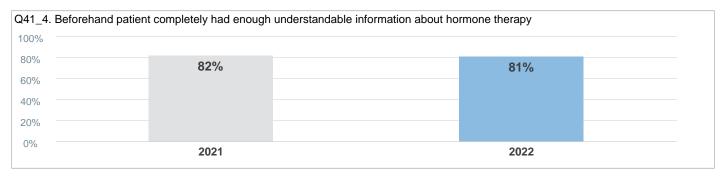


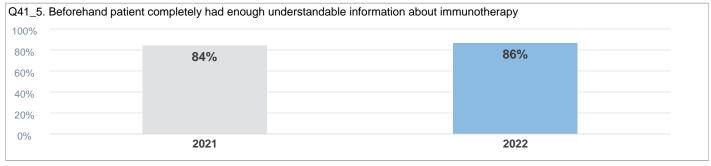
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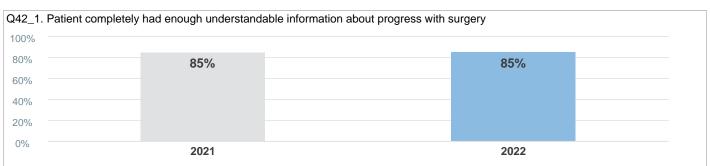


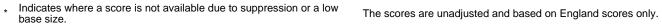


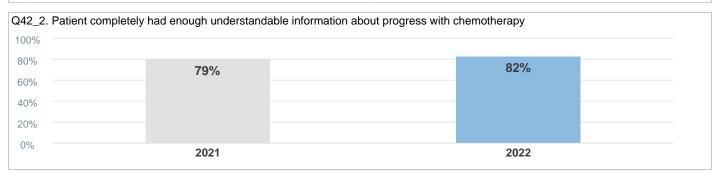


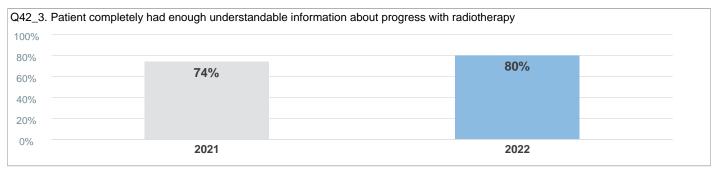


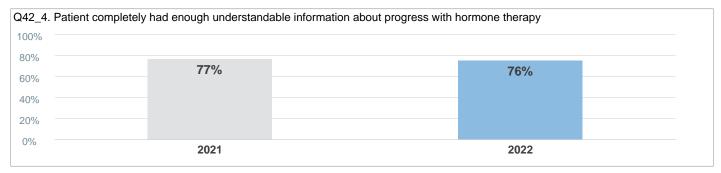


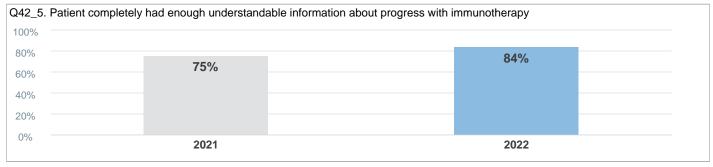


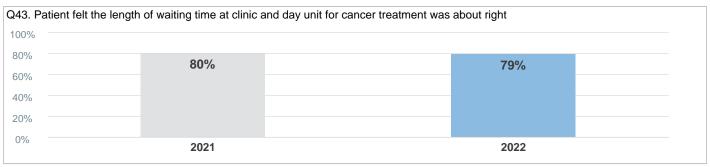


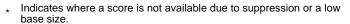


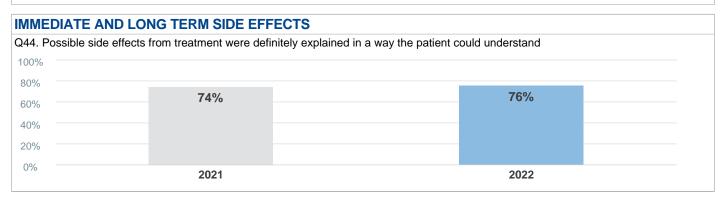


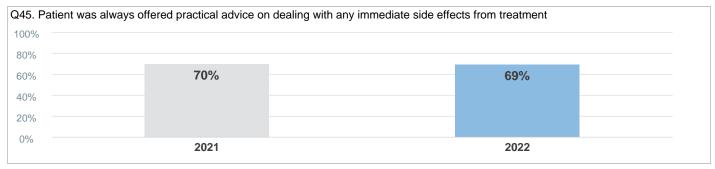




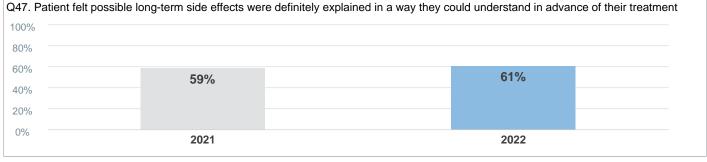




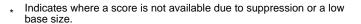


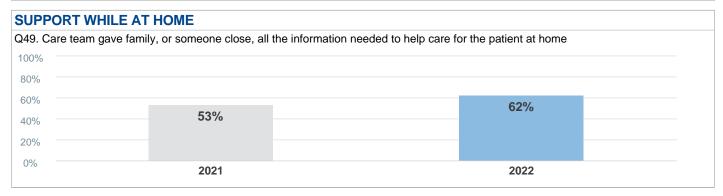


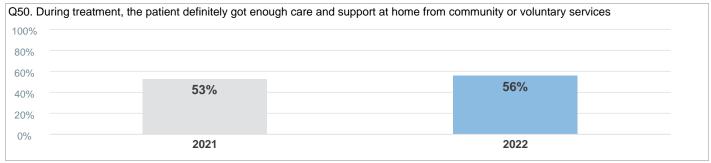


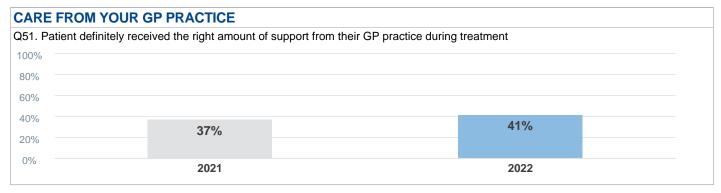




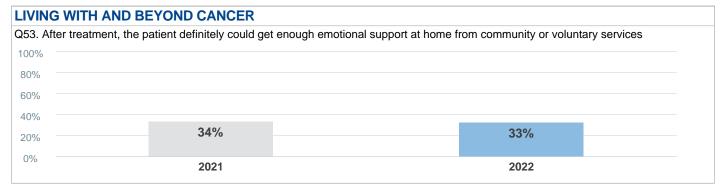


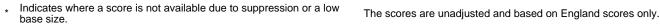


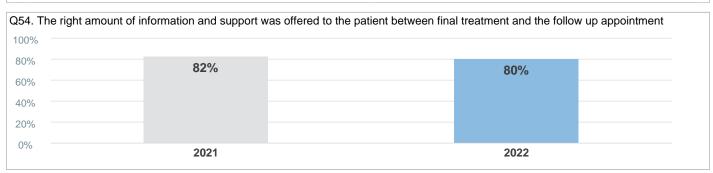


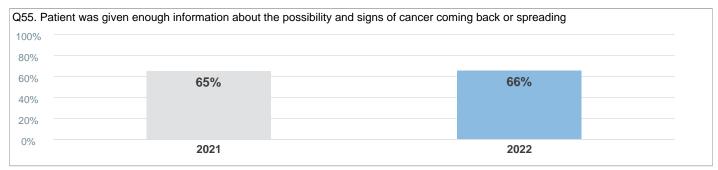






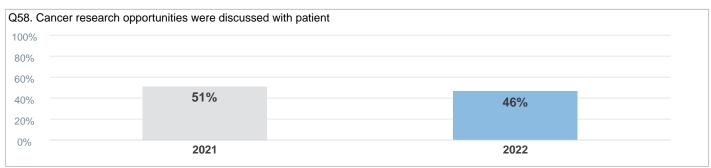












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