

# Cancer Patient Experience Survey

2022 Results

# Worcestershire Acute Hospitals NHS Trust

Published July 2023

# **Executive Summary**

### **Questions Above Expected Range**

	Case Mix Adjusted Scores			
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	97%	100%	99%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	87%	71%	85%	78%

### **Questions Below 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	75%	75%	81%	78%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	81%	86%	84%
Q19. Patient found advice from main contact person was very or quite helpful	94%	94%	97%	95%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	46%	47%	57%	52%
Q27. Staff provided the patient with relevant information on available support	83%	87%	93%	90%
Q29. Patient was offered information about how to get financial help or benefits	58%	60%	75%	67%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	55%	56%	62%	59%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	57%	59%	66%	62%

### 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.

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 <a href="www.ncpes.co.uk">www.ncpes.co.uk</a>. For all other outputs at Trust level, please see the Excel tables and dashboards at <a href="www.ncpes.co.uk">www.ncpes.co.uk</a>.

### **Response Rate**

### **Overall Response Rate**

951 patients responded out of a total of 1,730 patients, resulting in a response rate of 55%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	1,864	1,730	951	55%
National	123,632	115,662	61,268	53%

### **Respondents by Survey Type**

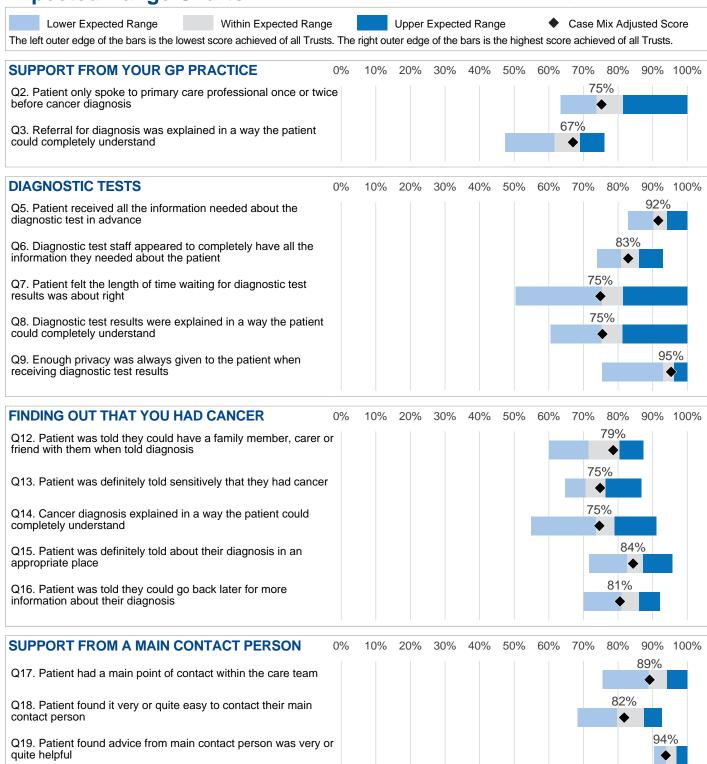
	Number of Respondents
Paper	786
Online	165
Phone	0
Translation Service	0
Total	951

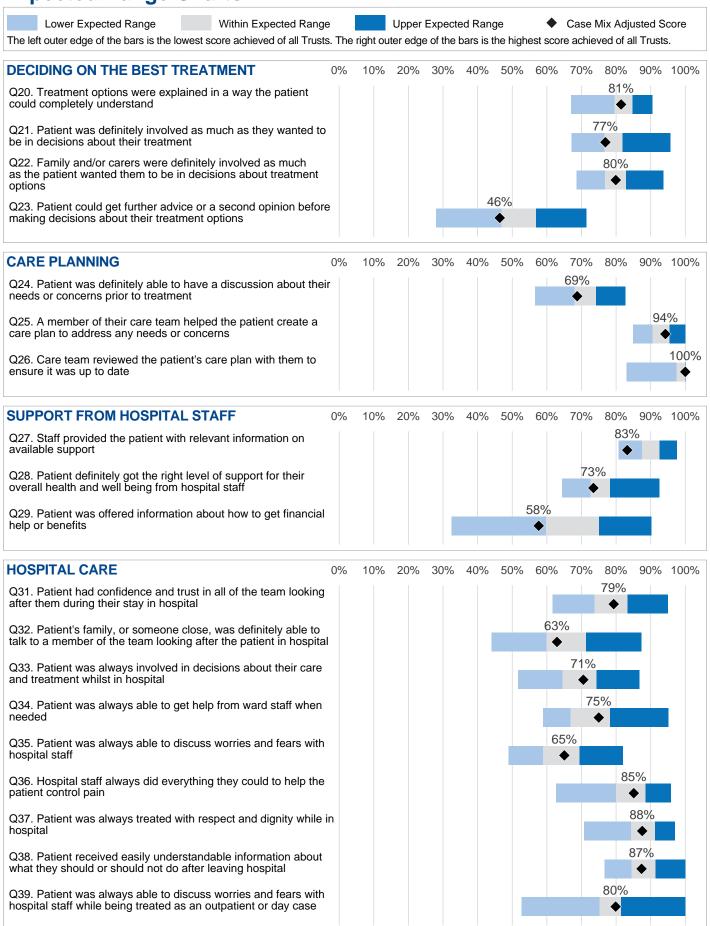
### **Respondents by Tumour Group**

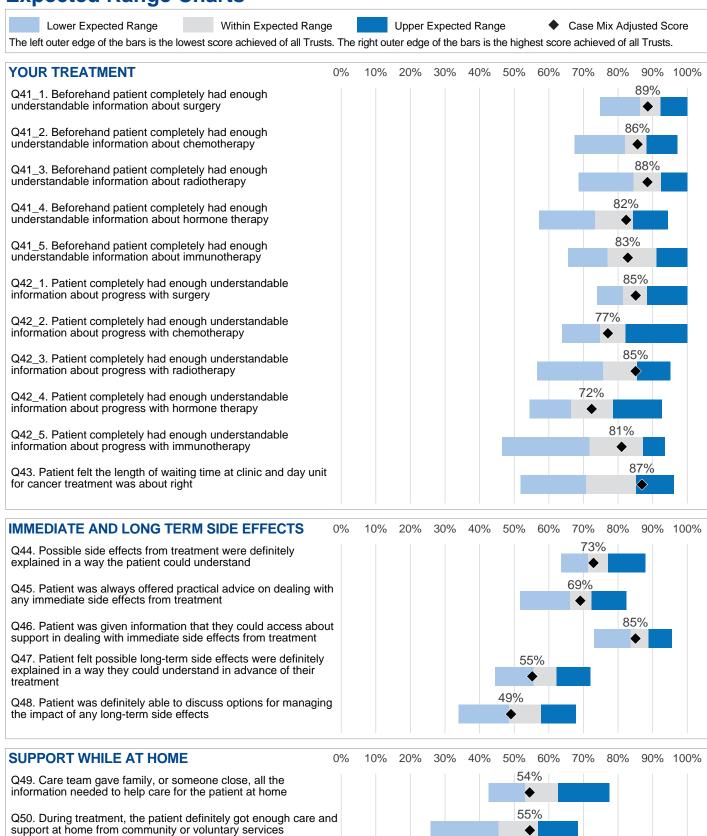
	Number of Respondents
Brain / CNS	0
Breast	213
Colorectal / LGT	142
Gynaecological	32
Haematological	103
Head and Neck	15
Lung	41
Prostate	150
Sarcoma	2
Skin	28
Upper Gastro	42
Urological	80
Other	103
Total	951

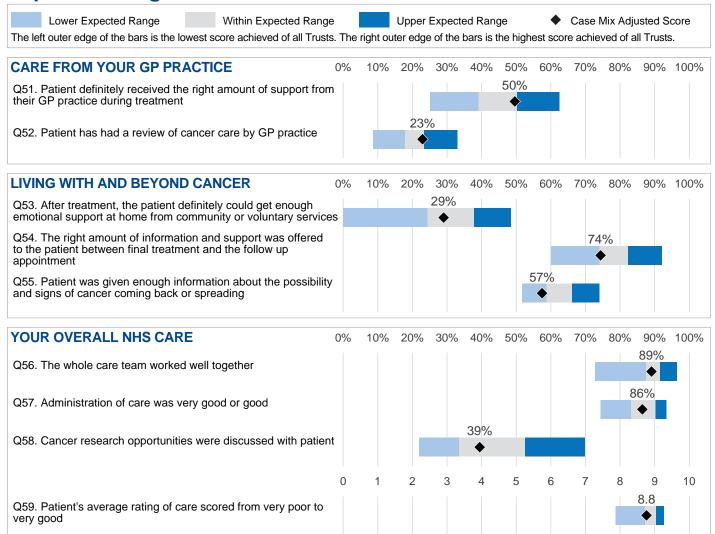
### **Respondents by Ethnicity**

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	847
Irish	*
Gypsy or Irish Traveller	*
Any other White background	20
Mixed / Multiple Ethnicity	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	66
Total	951









# **Comparability tables**

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

**▲** or ▼

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

Adjusted Score below Lower Expected Range

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

**	No score	available	for 2021.
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	Unadjusted Scores					Case M			
SUPPORT FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	532	75%	449	77%		75%	74%	82%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	709	68%	647	68%		67%	62%	69%	65%

		Unadjusted Scores					Case Mix Adjusted Scores			
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	748	93%	738	92%		92%	90%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	789	83%	771	84%		83%	81%	86%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	786	79%	783	76%		75%	75%	81%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	794	77%	788	76%		75%	75%	81%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	794	94%	782	96%		95%	93%	96%	95%	

	Unadjusted Scores					Case M			
FINDING OUT THAT YOU HAD CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	930	72%	881	79%	•	79%	71%	80%	76%
Q13. Patient was definitely told sensitively that they had cancer	971	73%	936	75%		75%	71%	76%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	971	76%	937	75%		75%	74%	79%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	966	85%	933	85%		84%	83%	87%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	855	79%	819	81%		81%	81%	86%	84%

	Unadjusted Scores					Case M			
SUPPORT FROM A MAIN CONTACT PERSON	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q17. Patient had a main point of contact within the care team	945	88%	905	89%		89%	89%	94%	91%
Q18. Patient found it very or quite easy to contact their main contact person	737	84%	717	82%		82%	80%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	780	95%	761	94%		94%	94%	97%	95%

# **Comparability tables**

Indicates where a score is not

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

	available due to suppression or a low base size.
**	No score available for 2021.

		Una	djusted So	cores	Case M				
DECIDING ON THE BEST TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q20. Treatment options were explained in a way the patient could completely understand	890	82%	860	82%		81%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	957	76%	919	77%		77%	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	795	76%	781	80%		80%	77%	83%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	437	45%	409	46%		46%	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	841	68%	822	69%		69%	68%	74%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	459	91%	434	94%		94%	91%	95%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	356	99%	344	100%		100%	97%	100%	99%

		Una	djusted So	cores		Case M			
SUPPORT FROM HOSPITAL STAFF	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q27. Staff provided the patient with relevant information on available support	744	86%	716	83%		83%	87%	93%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	962	75%	928	74%		73%	73%	78%	76%
Q29. Patient was offered information about how to get financial help or benefits	425	61%	447	56%		58%	60%	75%	67%

	Unadjusted Scores						Case Mix Adjusted Scores				
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score		
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	359	84%	334	80%		79%	74%	83%	79%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	278	56%	266	63%		63%	60%	71%	66%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	344	72%	333	71%		71%	65%	74%	70%		
Q34. Patient was always able to get help from ward staff when needed	354	82%	332	75%		75%	67%	78%	73%		
Q35. Patient was always able to discuss worries and fears with hospital staff	342	73%	321	65%		65%	59%	69%	64%		
Q36. Hospital staff always did everything they could to help the patient control pain	303	91%	282	85%		85%	80%	89%	84%		
Q37. Patient was always treated with respect and dignity while in hospital	357	92%	334	88%		88%	84%	91%	88%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	342	91%	331	88%		87%	84%	91%	88%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	842	81%	790	80%		80%	75%	81%	78%		

# **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

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	Unadjusted Scores					Case M			
YOUR TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q41_1. Beforehand patient completely had enough understandable information about surgery	453	91%	422	89%		89%	86%	92%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	507	82%	496	86%		86%	82%	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	237	86%	254	89%		88%	85%	92%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	200	74%	214	84%		82%	73%	84%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	101	72%	104	83%		83%	77%	91%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	448	85%	416	85%		85%	81%	88%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	504	76%	495	77%		77%	75%	82%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	236	78%	252	85%		85%	76%	85%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	200	67%	211	73%		72%	66%	79%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	101	73%	105	81%		81%	72%	87%	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	947	90%	910	88%		87%	71%	85%	78%

		Una	djusted So	cores		Case M	d Scores	Netional	
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	914	72%	890	73%		73%	71%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	866	68%	836	69%		69%	66%	72%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	699	85%	688	85%		85%	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	850	54%	832	55%		55%	56%	62%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	697	50%	702	49%		49%	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	616	54%	601	54%		54%	53%	63%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	383	52%	355	55%		55%	46%	57%	51%

# **Comparability tables**

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

\*\* No score available for 2021.

		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	588	53%	605	50%		50%	39%	50%	45%
Q52. Patient has had a review of cancer care by GP practice	924	17%	891	23%	•	23%	18%	23%	21%

		Una	djusted So	cores		Case M	N1-61		
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	178	29%	179	29%		29%	24%	38%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	361	73%	379	75%		74%	74%	82%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	732	59%	714	57%		57%	59%	66%	62%

		Una	djusted So	cores		Case M	N1-61		
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	921	92%	885	89%		89%	88%	92%	90%
Q57. Administration of care was very good or good	948	88%	922	86%		86%	83%	90%	87%
Q58. Cancer research opportunities were discussed with patient	571	38%	551	39%		39%	33%	53%	43%
Q59. Patient's average rating of care scored from very poor to very good	919	8.9	891	8.8		8.8	8.7	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	95%	71%	61%	60%	*	71%	78%	*	82%	67%	81%	71%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	78%	67%	69%	63%	64%	67%	65%	*	65%	63%	67%	65%	68%

DIAGNOSTIC TESTS							Tumo	ur Typ	е					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	90%	95%	100%	92%	100%	93%	92%	*	92%	86%	89%	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	83%	88%	76%	87%	80%	87%	88%	*	88%	77%	78%	77%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	77%	77%	83%	89%	64%	73%	72%	*	67%	71%	72%	73%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	81%	85%	79%	78%	82%	76%	70%	*	88%	62%	71%	66%	76%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	95%	96%	100%	96%	100%	100%	96%	*	100%	92%	93%	93%	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	82%	85%	75%	77%	86%	77%	79%	*	68%	78%	66%	80%	79%
Q13. Patient was definitely told sensitively that they had cancer	*	84%	77%	78%	76%	80%	78%	67%	*	70%	64%	67%	73%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	82%	83%	84%	74%	73%	76%	71%	*	89%	51%	62%	74%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	92%	86%	84%	82%	93%	85%	89%	*	85%	73%	68%	81%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	*	89%	84%	89%	78%	64%	91%	72%	*	92%	74%	73%	76%	81%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	89%	99%	93%	86%	80%	98%	89%	*	89%	98%	76%	80%	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	75%	89%	96%	89%	100%	89%	74%	*	82%	83%	62%	88%	82%
Q19. Patient found advice from main contact person was very or quite helpful	*	90%	97%	96%	98%	100%	97%	92%	*	100%	85%	92%	99%	94%

DECIDING ON THE BEST TREATMENT							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	80%	87%	85%	81%	93%	87%	85%	*	100%	76%	76%	71%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	80%	85%	81%	81%	93%	73%	76%	*	85%	73%	66%	66%	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	76%	89%	88%	83%	92%	91%	81%	*	82%	78%	66%	75%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	49%	63%	69%	63%	*	53%	34%	*	*	36%	23%	30%	46%

CARE PLANNING							Tumo	ur Typ	е					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	66%	73%	71%	75%	92%	83%	70%	*	81%	61%	55%	62%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	97%	92%	100%	100%	100%	94%	*	*	100%	87%	84%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	100%	100%	100%	100%	100%	*	*	100%	100%	100%	100%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	88%	90%	92%	80%	83%	91%	83%	*	87%	84%	67%	69%	83%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	75%	76%	71%	74%	87%	88%	72%	*	78%	66%	65%	73%	74%
Q29. Patient was offered information about how to get financial help or benefits	*	59%	62%	71%	65%	*	70%	30%	*	*	69%	24%	59%	56%

HOSPITAL CARE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	73%	84%	*	79%	*	*	89%	*	*	76%	78%	76%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	63%	66%	*	63%	*	*	53%	*	*	69%	38%	58%	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	72%	78%	*	63%	*	80%	83%	*	*	59%	60%	58%	71%
Q34. Patient was always able to get help from ward staff when needed	*	77%	70%	*	79%	*	80%	89%	*	*	47%	79%	84%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	68%	66%	*	66%	*	70%	76%	*	*	56%	50%	71%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	91%	83%	*	85%	*	*	100%	*	*	62%	81%	90%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	91%	84%	*	82%	*	90%	100%	*	*	76%	90%	88%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	89%	90%	*	83%	*	100%	100%	*	*	88%	85%	76%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	77%	87%	85%	82%	93%	89%	81%	*	88%	78%	74%	73%	80%

YOUR TREATMENT							Tumo	ur Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	90%	90%	100%	*	100%	*	85%	*	100%	80%	76%	90%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	76%	89%	88%	88%	*	96%	93%	*	*	88%	85%	85%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	88%	95%	*	*	90%	100%	90%	*	*	71%	82%	85%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	81%	*	*	*	*	*	84%	*	*	*	*	81%	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	67%	*	*	74%	*	90%	*	*	*	*	85%	85%	83%
${\tt Q42\_1}.$ Patient completely had enough understandable information about progress with surgery	*	85%	91%	100%	*	100%	*	83%	*	91%	80%	64%	83%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	73%	74%	73%	82%	*	88%	79%	*	*	76%	81%	73%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	84%	84%	*	*	90%	100%	82%	*	*	71%	90%	89%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	68%	*	*	*	*	*	77%	*	*	*	*	67%	73%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	60%	*	*	80%	*	89%	*	*	*	*	83%	86%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	85%	89%	91%	85%	93%	80%	90%	*	96%	98%	88%	84%	88%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	67%	79%	74%	71%	87%	80%	73%	*	88%	73%	65%	76%	73%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	66%	74%	70%	68%	75%	86%	64%	*	75%	70%	62%	70%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	84%	92%	90%	84%	80%	93%	80%	*	100%	83%	77%	82%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	47%	61%	52%	52%	62%	72%	61%	*	75%	55%	59%	46%	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	43%	58%	44%	50%	50%	69%	51%	*	58%	47%	47%	39%	49%

SUPPORT WHILE AT HOME							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	51%	63%	46%	66%	73%	62%	49%	*	67%	50%	41%	47%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	49%	56%	36%	62%	*	75%	43%	*	*	74%	36%	58%	55%

CARE FROM YOUR GP PRACTICE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	50%	46%	71%	58%	*	58%	53%	*	53%	38%	41%	42%	50%
Q52. Patient has had a review of cancer care by GP practice	*	24%	23%	13%	20%	20%	28%	23%	*	38%	33%	26%	13%	23%

LIVING WITH AND BEYOND CANCER							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	24%	44%	*	33%	*	*	17%	*	*	40%	13%	15%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	75%	85%	87%	70%	*	*	80%	*	81%	80%	56%	50%	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	48%	61%	54%	71%	67%	58%	55%	*	80%	52%	56%	54%	57%

YOUR OVERALL NHS CARE							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q56. The whole care team worked well together	*	90%	91%	87%	92%	93%	95%	86%	*	96%	83%	86%	88%	89%
Q57. Administration of care was very good or good	*	90%	89%	84%	93%	93%	95%	78%	*	93%	81%	75%	85%	86%
Q58. Cancer research opportunities were discussed with patient	*	26%	32%	57%	70%	*	35%	44%	*	60%	47%	21%	33%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	8.8	8.9	8.9	8.9	8.8	9.2	8.5	*	9.1	8.7	8.4	8.7	8.8

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	*	*	73%	68%	78%	77%	79%	80%	77%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	78%	74%	73%	64%	67%	61%	68%	

DIAGNOSTIC TESTS				Age							
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All		
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	94%	92%	93%	94%	90%	86%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	94%	86%	84%	85%	81%	82%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	67%	67%	75%	74%	80%	81%	76%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	89%	78%	78%	77%	75%	67%	76%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	94%	90%	97%	97%	95%	94%	96%		

FINDING OUT THAT YOU HAD CANCER	DING OUT THAT YOU HAD CANCER									
	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	*	*	70%	71%	73%	81%	81%	85%	79%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	86%	73%	76%	76%	72%	76%	75%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	71%	77%	79%	76%	72%	73%	75%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	86%	84%	83%	86%	85%	87%	85%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	88%	84%	86%	81%	78%	64%	81%	

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	*	*	90%	85%	88%	92%	88%	84%	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	82%	79%	81%	85%	80%	78%	82%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	94%	90%	96%	95%	92%	92%	94%

DECIDING ON THE BEST TREATMENT				Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All	
Q20. Treatment options were explained in a way the patient could completely understand	*	*	74%	76%	85%	82%	82%	71%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	65%	77%	77%	79%	76%	78%	77%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	76%	77%	80%	81%	80%	88%	80%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	38%	53%	46%	45%	36%	46%	

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	*	*	68%	66%	70%	69%	68%	67%	69%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	100%	94%	94%	95%	92%	100%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	100%	100%	100%	100%	100%	100%	100%		

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	*	*	78%	86%	91%	85%	78%	71%	83%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	62%	71%	73%	75%	74%	74%	74%
Q29. Patient was offered information about how to get financial help or benefits	*	*	75%	61%	66%	54%	48%	46%	56%

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	*	*	*	72%	71%	87%	82%	69%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	72%	52%	64%	70%	36%	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	69%	71%	72%	73%	54%	71%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	52%	73%	79%	81%	62%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	54%	59%	71%	68%	46%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	78%	84%	85%	91%	80%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	86%	84%	90%	93%	69%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	83%	90%	90%	88%	62%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	71%	76%	83%	82%	78%	84%	80%

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	86%	82%	89%	93%	86%	88%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	92%	76%	86%	89%	84%	80%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	96%	88%	92%	84%	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	85%	85%	81%	88%	80%	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	64%	93%	85%	76%	*	83%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	86%	82%	88%	85%	83%	75%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	62%	65%	79%	81%	78%	53%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	77%	85%	92%	80%	*	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	85%	64%	74%	81%	60%	73%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	64%	93%	81%	80%	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	85%	80%	88%	89%	85%	96%	88%

<b>IMMEDIATE AND LONG TERM SIDE EFFEC</b>	ΓS			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	80%	72%	76%	73%	71%	70%	73%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	75%	68%	71%	67%	70%	68%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	94%	83%	84%	87%	84%	85%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	65%	51%	54%	59%	55%	40%	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	44%	53%	47%	50%	49%	55%	49%

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	*	*	42%	50%	50%	56%	56%	63%	54%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	60%	52%	58%	52%	56%	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	*	*	40%	51%	56%	49%	47%	58%	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	21%	25%	27%	21%	22%	20%	23%

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	*	*	*	15%	26%	31%	35%	20%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	60%	71%	76%	77%	74%	76%	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	39%	42%	55%	62%	56%	71%	57%

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	*	*	80%	85%	87%	90%	91%	90%	89%
Q57. Administration of care was very good or good	*	*	86%	86%	90%	86%	85%	83%	86%
Q58. Cancer research opportunities were discussed with patient	*	*	17%	33%	38%	45%	37%	26%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	*	8.2	8.6	8.8	8.8	8.9	8.3	8.8

SUPPORT FROM YOUR GP PRACTICE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	77%	*	*	*	67%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	72%	63%	*	*	*	76%	68%

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%	91%	*	*	*	89%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	84%	*	*	*	85%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	77%	75%	*	*	*	73%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	75%	*	*	*	73%	76%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	96%	*	*	*	94%	96%

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	80%	79%	*	*	*	71%	79%
Q13. Patient was definitely told sensitively that they had cancer	79%	71%	*	*	*	83%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	73%	*	*	*	78%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	84%	*	*	*	82%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	79%	*	*	*	72%	81%

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q17. Patient had a main point of contact within the care team	89%	90%	*	*	*	82%	89%
Q18. Patient found it very or quite easy to contact their main contact person	81%	83%	*	*	*	81%	82%
Q19. Patient found advice from main contact person was very or quite helpful	91%	96%	*	*	*	98%	94%

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	82%	83%	*	*	*	78%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	78%	*	*	*	74%	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	83%	*	*	*	72%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	49%	43%	*	*	*	47%	46%

CARE PLANNING				Male/Fema	le/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	66%	72%	*	*	*	66%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	96%	*	*	*	92%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	*	*	*	100%	100%

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	82%	85%	*	*	*	86%	83%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	75%	*	*	*	72%	74%
Q29. Patient was offered information about how to get financial help or benefits	61%	51%	*	*	*	57%	56%

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	78%	81%	*	*	*	77%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	65%	60%	*	*	*	68%	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	72%	69%	*	*	*	77%	71%
Q34. Patient was always able to get help from ward staff when needed	70%	79%	*	*	*	77%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	66%	*	*	*	76%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	86%	83%	*	*	*	95%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	88%	*	*	*	91%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	90%	*	*	*	86%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	82%	*	*	*	84%	80%

YOUR TREATMENT				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	AII
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	86%	*	*	*	100%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	81%	91%	*	*	*	89%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	87%	*	*	*	76%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	87%	*	*	*	*	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	79%	87%	*	*	*	*	83%
Q42_1. Patient completely had enough understandable information about progress with surgery	88%	83%	*	*	*	87%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	75%	79%	*	*	*	76%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	87%	84%	*	*	*	71%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	69%	81%	*	*	*	*	73%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	74%	89%	*	*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	85%	91%	*	*	*	85%	88%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	70%	77%	*	*	*	68%	73%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	67%	72%	*	*	*	65%	69%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	85%	*	*	*	86%	85%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	48%	64%	*	*	*	45%	55%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	45%	54%	*	*	*	45%	49%		

SUPPORT WHILE AT HOME	Male/Female/Non-binary/Other						
	Female Male Non-binary Prefer to self-describe Prefer not to say Not given						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	50%	58%	*	*	*	64%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54%	58%	*	*	*	48%	55%

CARE FROM YOUR GP PRACTICE				Male/Fema	le/Non-bina	ry/Other	
	Female Male Non-binary Prefer to self-describe Prefer not to say Not giver						All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	48%	50%	*	*	*	63%	50%
Q52. Patient has had a review of cancer care by GP practice	21%	25%	*	*	*	21%	23%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	28%	30%	*	*	*	*	29%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	76%	*	*	*	75%	75%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	51%	63%	*	*	*	57%	57%		

YOUR OVERALL NHS CARE			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q56. The whole care team worked well together	88%	90%	*	*	*	94%	89%		
Q57. Administration of care was very good or good	88%	84%	*	*	*	90%	86%		
Q58. Cancer research opportunities were discussed with patient	39%	39%	*	*	*	33%	39%		
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.8	*	*	*	8.7	8.8		

SUPPORT FROM YOUR GP PRACTICE				Ethr	nicity		
	White Mixed Asian Black Other Not given						All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	*	*	*	*	65%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	*	*	*	*	73%	68%

DIAGNOSTIC TESTS		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	92%	*	*	*	*	85%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	*	*	*	80%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	*	*	*	*	71%	76%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	76%	*	*	*	*	71%	76%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	92%	96%		

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	80%	*	*	*	*	69%	79%	
Q13. Patient was definitely told sensitively that they had cancer	75%	*	*	*	*	77%	75%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	*	*	*	*	74%	75%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	*	*	*	*	80%	85%	
Q16. Patient was told they could go back later for more information about their diagnosis	81%	*	*	*	*	67%	81%	

<b>SUPPORT FROM A MAIN CONTACT PERSO</b>	<b>SON</b> Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	89%	*	*	*	*	81%	89%
Q18. Patient found it very or quite easy to contact their main contact person	81%	*	*	*	*	87%	82%
Q19. Patient found advice from main contact person was very or quite helpful	94%	*	*	*	*	96%	94%

DECIDING ON THE BEST TREATMENT		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	82%	*	*	*	*	79%	82%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	*	*	*	*	71%	77%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	*	*	*	*	71%	80%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	46%	*	*	*	*	39%	46%		

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	69%	*	*	*	*	65%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	*	*	*	92%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	*	*	*	*	100%	100%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	83%	*	*	*	*	86%	83%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	*	*	*	*	72%	74%
Q29. Patient was offered information about how to get financial help or benefits	56%	*	*	*	*	54%	56%

HOSPITAL CARE				Ethi	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	80%	*	*	*	*	73%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	63%	*	*	*	*	65%	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	*	*	*	*	73%	71%
Q34. Patient was always able to get help from ward staff when needed	75%	*	*	*	*	73%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	*	*	*	*	72%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	*	*	*	88%	85%
Q37. Patient was always treated with respect and dignity while in hospital	88%	*	*	*	*	85%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	*	*	*	*	84%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	*	*	*	*	82%	80%

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	88%	*	*	*	*	94%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	*	*	*	*	83%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	69%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	*	*	*	*	*	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	*	*	*	*	*	83%
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	*	*	*	*	79%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	*	*	*	*	73%	77%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	*	*	*	*	63%	85%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	74%	*	*	*	*	*	73%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	81%	*	*	*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	88%	*	*	*	*	79%	88%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	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	73%	*	*	*	*	66%	73%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	*	*	*	*	61%	69%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	*	*	*	*	82%	85%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	56%	*	*	*	*	50%	55%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	49%	*	*	*	*	46%	49%		

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	54%	*	*	*	*	62%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	55%	*	*	*	*	52%	55%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	49%	*	*	*	*	59%	50%
Q52. Patient has had a review of cancer care by GP practice	22%	*	*	*	*	23%	23%

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	29%	*	*	*	*	36%	29%			
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75%	*	*	*	*	75%	75%			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	58%	*	*	*	*	55%	57%			

YOUR OVERALL NHS CARE			Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All		
Q56. The whole care team worked well together	89%	*	*	*	*	89%	89%		
Q57. Administration of care was very good or good	86%	*	*	*	*	84%	86%		
Q58. Cancer research opportunities were discussed with patient	38%	*	*	*	*	38%	39%		
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	8.5	8.8		

# **IMD** quintile tables

SUPPORT FROM YOUR GP PRACTICE			IMD Quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	74%	72%	78%	79%	77%	*	77%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	63%	73%	66%	67%	*	68%	

DIAGNOSTIC TESTS		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q5. Patient received all the information needed about the diagnostic test in advance	91%	89%	93%	93%	91%	*	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	80%	83%	84%	86%	*	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	73%	78%	76%	76%	74%	*	76%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	73%	74%	77%	80%	74%	*	76%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	93%	96%	95%	97%	*	96%		

FINDING OUT THAT YOU HAD CANCER		IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	80%	78%	80%	78%	80%	*	79%	
Q13. Patient was definitely told sensitively that they had cancer	72%	80%	75%	75%	73%	*	75%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	75%	74%	78%	74%	*	75%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	87%	85%	87%	81%	*	85%	
Q16. Patient was told they could go back later for more information about their diagnosis	79%	76%	84%	81%	79%	*	81%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quintil			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	88%	86%	87%	90%	92%	*	89%
Q18. Patient found it very or quite easy to contact their main contact person	84%	81%	83%	81%	82%	*	82%
Q19. Patient found advice from main contact person was very or quite helpful	91%	95%	96%	93%	94%	*	94%

# **IMD** quintile tables

DECIDING ON THE BEST TREATMENT				IMD Quinti	le		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q20. Treatment options were explained in a way the patient could completely understand	81%	81%	84%	78%	84%	*	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	78%	78%	77%	78%	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	79%	79%	79%	84%	*	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	43%	48%	39%	48%	*	46%

CARE PLANNING	E PLANNING						
	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	65%	68%	72%	63%	74%	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	97%	90%	96%	96%	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	100%	100%	100%	*	100%

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%	79%	84%	84%	83%	*	83%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	72%	76%	72%	73%	*	74%		
Q29. Patient was offered information about how to get financial help or benefits	70%	44%	57%	60%	54%	*	56%		

HOSPITAL CARE	ARE 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	72%	81%	79%	82%	80%	*	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	66%	69%	54%	63%	*	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	62%	70%	70%	72%	73%	*	71%
Q34. Patient was always able to get help from ward staff when needed	59%	72%	75%	78%	79%	*	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	59%	55%	67%	64%	73%	*	65%
Q36. Hospital staff always did everything they could to help the patient control pain	67%	95%	82%	88%	88%	*	85%
Q37. Patient was always treated with respect and dignity while in hospital	66%	85%	90%	91%	90%	*	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	71%	91%	87%	90%	89%	*	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	77%	81%	82%	81%	*	80%

# **IMD** quintile tables

YOUR TREATMENT		IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	85%	86%	93%	*	89%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	85%	86%	83%	87%	*	86%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	81%	97%	85%	89%	90%	*	89%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	100%	77%	84%	89%	78%	*	84%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	90%	85%	73%	88%	*	83%		
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	82%	87%	84%	87%	*	85%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	78%	82%	74%	73%	*	77%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	89%	95%	84%	81%	82%	*	85%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	75%	69%	71%	74%	77%	*	73%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	73%	90%	86%	68%	89%	*	81%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	92%	86%	86%	89%	87%	*	88%		

MMEDIATE AND LONG TERM SIDE EFFECTS					le				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	72%	75%	70%	73%	*	73%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	62%	69%	72%	66%	71%	*	69%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	81%	87%	81%	90%	*	85%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	64%	53%	51%	55%	*	55%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	50%	48%	51%	47%	*	49%		

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	66%	54%	53%	54%	52%	*	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	48%	59%	53%	56%	56%	*	55%

CARE FROM YOUR GP PRACTICE				IMD Quinti			
	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	48%	49%	55%	48%	47%	*	50%
Q52. Patient has had a review of cancer care by GP practice	22%	26%	27%	22%	17%	*	23%

# **IMD** quintile tables

IVING WITH AND BEYOND CANCER				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	39%	23%	28%	31%	28%	*	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	82%	79%	69%	74%	*	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	53%	59%	58%	56%	*	57%

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	86%	92%	93%	89%	85%	*	89%
Q57. Administration of care was very good or good	89%	88%	87%	84%	85%	*	86%
Q58. Cancer research opportunities were discussed with patient	30%	42%	40%	39%	37%	*	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	8.8	8.7	8.7	*	8.8

SUPPORT FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	75%	81%	68%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	66%	71%	71%	68%

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%	88%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	86%	88%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	74%	78%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	83%	75%	76%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	97%	95%	96%

FINDING OUT THAT YOU HAD CANCER	Long term condition status			
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	80%	79%	67%	79%
Q13. Patient was definitely told sensitively that they had cancer	75%	75%	80%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	80%	77%	75%
Q15. Patient was definitely told about their diagnosis in appropriate place	85%	86%	81%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	80%	82%	77%	81%

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	89%	89%	85%	89%	
Q18. Patient found it very or quite easy to contact their main contact person	80%	85%	90%	82%	
Q19. Patient found advice from main contact person was very or quite helpful	93%	95%	98%	94%	

DECIDING ON THE BEST TREATMENT				
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	81%	83%	83%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	76%	79%	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	79%	73%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	44%	50%	46%	46%

CARE PLANNING	Long term condition status				
	Yes	No	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	67%	73%	67%	69%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	94%	94%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	100%	100%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	81%	89%	81%	83%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	76%	73%	74%
Q29. Patient was offered information about how to get financial help or benefits	55%	62%	45%	56%

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	76%	85%	81%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	60%	66%	72%	63%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	72%	76%	71%
Q34. Patient was always able to get help from ward staff when needed	71%	82%	76%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	60%	72%	75%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	88%	95%	85%
Q37. Patient was always treated with respect and dignity while in hospital	86%	90%	90%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	88%	84%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	84%	81%	80%

YOUR TREATMENT Long term condition status					
	Yes	No	Not given	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	92%	95%	89%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	89%	86%	86%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	92%	82%	89%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	89%	*	84%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	89%	*	83%	
Q42_1. Patient completely had enough understandable information about progress with surgery	83%	88%	85%	85%	
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	76%	81%	68%	77%	
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	86%	73%	85%	
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	71%	84%	*	73%	
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	79%	88%	*	81%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	88%	89%	78%	88%	

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	71%	78%	72%	73%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	74%	60%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	83%	89%	86%	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	56%	56%	47%	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	48%	51%	47%	49%

SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	54%	54%	55%	54%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	56%	54%	48%	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	50%	47%	57%	50%
Q52. Patient has had a review of cancer care by GP practice	22%	24%	21%	23%

LIVING WITH AND BEYOND CANCER	TH 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	31%	22%	36%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	79%	75%	75%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	56%	60%	58%	57%

YOUR OVERALL NHS CARE		Long term condition status		
	Yes	No	Not given	All
Q56. The whole care team worked well together	88%	92%	95%	89%
Q57. Administration of care was very good or good	86%	87%	89%	86%
Q58. Cancer research opportunities were discussed with patient	36%	43%	42%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.9	8.5	8.8

