

Cancer Patient Experience Survey

2022 Results

East Cheshire NHS Trust

Published July 2023

Executive Summary

Questions Above 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	100%	59%	96%	78%
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	87%	66%	86%	76%
Q13. Patient was definitely told sensitively that they had cancer	84%	64%	83%	74%

Questions Below Expected Range

	Case	Mix Adjusted S	cores		
	2022 Score	Lower Expected Range	Upper Expected Range	National Score	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	75%	75%	92%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	50%	69%	88%	78%	
Q57. Administration of care was very good or good	76%	79%	95%	87%	

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 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

77 patients responded out of a total of 105 patients, resulting in a response rate of 73%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	107	105	77	73%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

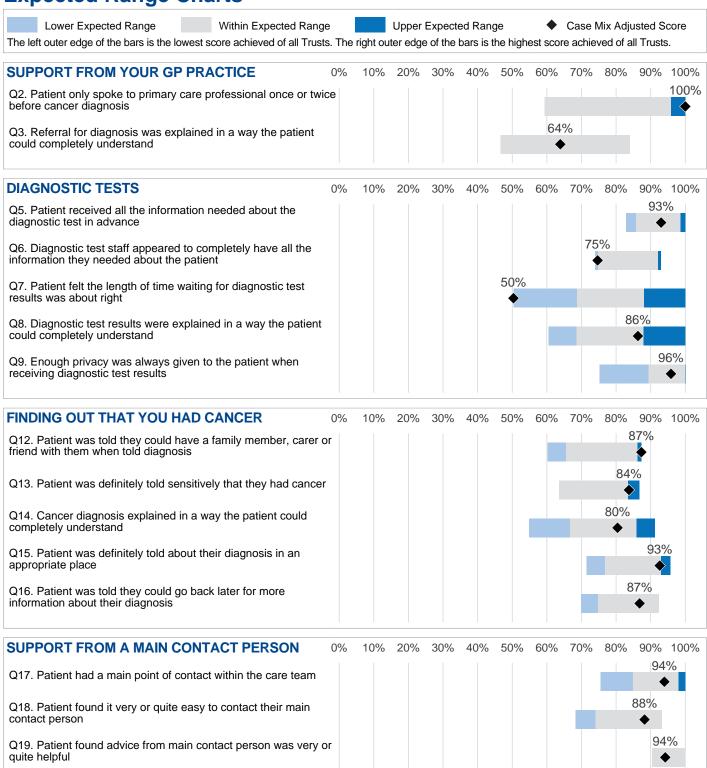
	Number of Respondents
Paper	67
Online	10
Phone	0
Translation Service	0
Total	77

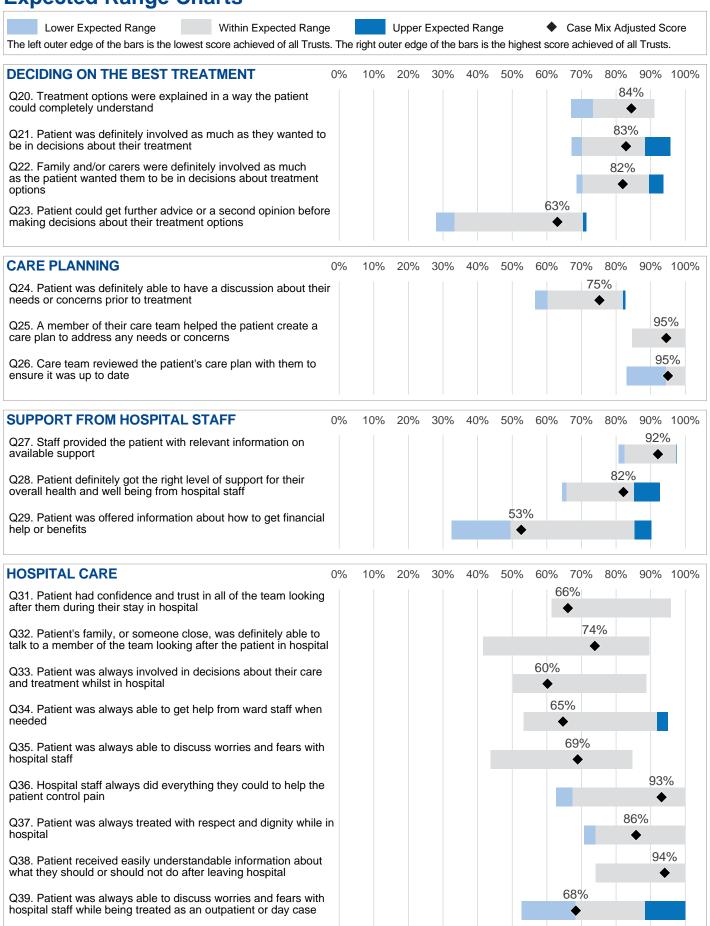
Respondents by Tumour Group

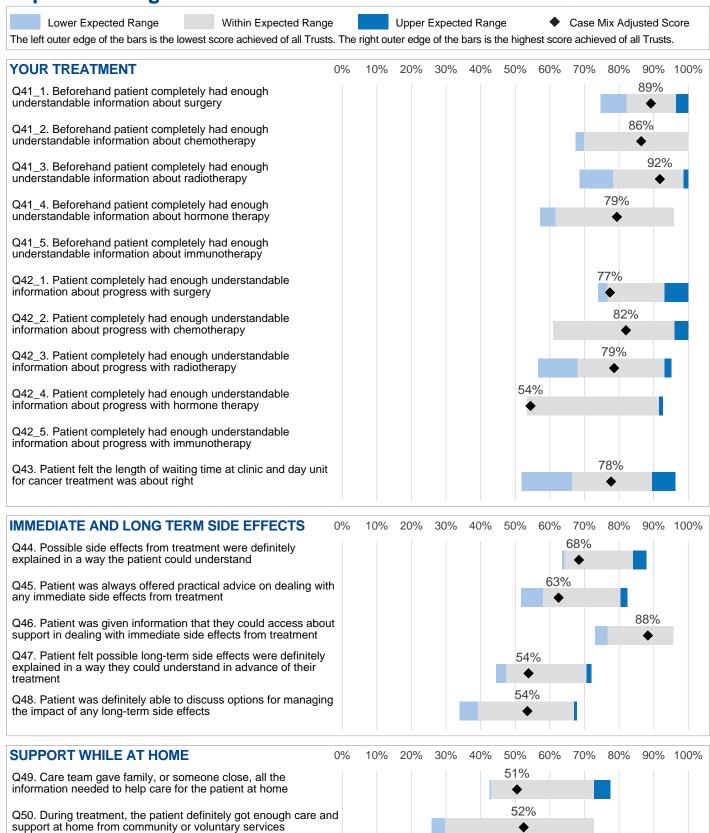
	Niconale and C
	Number of Respondents
Brain / CNS	0
Breast	59
Colorectal / LGT	15
Gynaecological	*
Haematological	0
Head and Neck	0
Lung	0
Prostate	0
Sarcoma	0
Skin	0
Upper Gastro	0
Urological	0
Other	*
Total	77

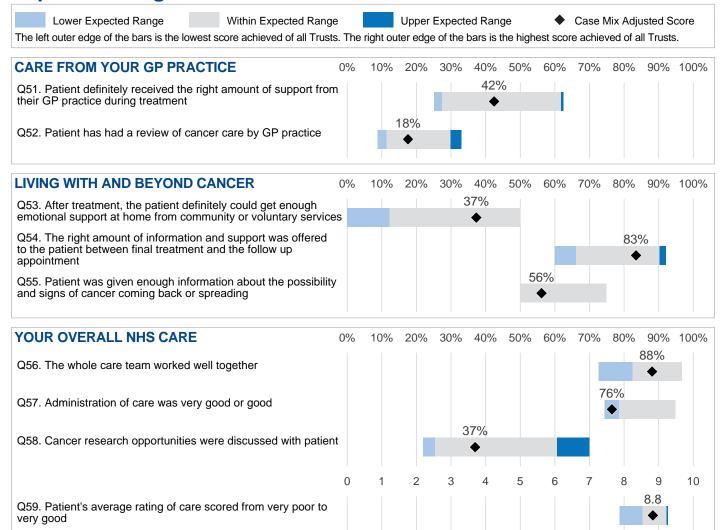
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	65
Irish	*
Gypsy or Irish Traveller	*
Any other White background	*
Mixed / Multiple Ethnicity	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	1
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	*
Total	77









* 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

Adjusted Score above Upper Expected Range

	low base size.
**	No score available for 2021.

		Una	djusted So	cores	Case M				
SUPPORT FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021-2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	57	82%	20	100%		100%	59%	96%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	80	68%	25	72%		64%	47%	84%	65%

		Una	djusted So	cores	Case M				
DIAGNOSTIC TESTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q5. Patient received all the information needed about the diagnostic test in advance	113	96%	66	94%		93%	86%	99%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	125	87%	71	77%		75%	75%	92%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right		85%	71	51%	•	50%	69%	88%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	124	83%	71	89%		86%	69%	88%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	126	97%	71	97%		96%	89%	100%	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	129	74%	75	89%		87%	66%	86%	76%
Q13. Patient was definitely told sensitively that they had cancer	135	80%	76	87%		84%	64%	83%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	135	84%	76	84%		80%	67%	86%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	136	87%	76	95%		93%	77%	93%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	125	90%	68	91%		87%	75%	92%	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	131	94%	76	95%		94%	85%	98%	91%
Q18. Patient found it very or quite easy to contact their main contact person	112	91%	63	89%		88%	74%	93%	84%
Q19. Patient found advice from main contact person was very or quite helpful	117	97%	69	94%		94%	90%	100%	95%

* 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	127	83%	72	86%		84%	73%	91%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	133	85%	77	84%		83%	70%	88%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	105	74%	68	82%		82%	70%	90%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	52	42%	28	61%		63%	33%	70%	52%

		Una	djusted So	cores	Case M				
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	121	77%	67	78%		75%	60%	82%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	70	96%	36	94%		95%	85%	100%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	58	100%	28	93%		95%	94%	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	111	94%	63	94%		92%	83%	98%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	133	80%	76	82%		82%	66%	85%	76%
Q29. Patient was offered information about how to get financial help or benefits	55	71%	30	57%		53%	50%	85%	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	38	84%	22	68%		66%	61%	96%	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	33	61%	15	73%		74%	42%	90%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	37	73%	22	64%		60%	50%	89%	70%
Q34. Patient was always able to get help from ward staff when needed	38	84%	21	67%		65%	53%	92%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	37	65%	21	71%		69%	44%	85%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	31	90%	18	94%		93%	67%	100%	84%
Q37. Patient was always treated with respect and dignity while in hospital	38	92%	22	86%		86%	74%	100%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	36	94%	21	95%		94%	74%	100%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	122	83%	66	67%		68%	68%	88%	78%

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
	INO SCOLE	avallable	101 2021

		Una	djusted S	cores		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	72	90%	73	90%		89%	82%	96%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	61	90%	21	86%		86%	70%	100%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	52	88%	38	92%		92%	78%	99%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	28	89%	22	77%		79%	62%	96%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*		*		*			84%
Q42_1. Patient completely had enough understandable information about progress with surgery	71	82%	73	79%		77%	77%	93%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	60	82%	21	81%		82%	61%	96%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	52	71%	38	82%		79%	68%	93%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	27	74%	21	52%		54%	53%	92%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*		*		*			80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	129	75%	76	76%		78%	66%	89%	78%

		Una	djusted So	cores		Case M			
IMMEDIATE AND LONG TERM SIDE EFFECTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	122	70%	75	69%		68%	64%	84%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	116	73%	65	63%		63%	58%	80%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	94	93%	51	90%		88%	77%	96%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	119	55%	69	55%		54%	47%	71%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	95	61%	52	54%		54%	39%	67%	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	76	61%	44	50%		51%	43%	73%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	36	61%	21	52%		52%	30%	73%	51%

Adjusted Score below Lower

* 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.	Expected Range Adjusted Score between Upper and Lower Expected Ranges
** No score available for 2021.				Adjusted Score above Upper Expected Range

		Una	ajustea 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	60	48%	34	44%		42%	27%	62%	45%
Q52. Patient has had a review of cancer care by GP practice	130	21%	74	18%		18%	11%	30%	21%

	Unadjusted Scores						Case Mix Adjusted 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	23	39%	23	35%		37%	12%	50%	31%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	69	77%	45	84%		83%	66%	90%	78%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	95	61%	58	53%		56%	50%	75%	62%	

	Unadjusted Scores						Case Mix Adjusted 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	131	92%	71	89%		88%	82%	97%	90%	
Q57. Administration of care was very good or good	134	92%	76	78%	•	76%	79%	95%	87%	
Q58. Cancer research opportunities were discussed with patient	74	34%	40	30%		37%	25%	61%	43%	
Q59. Patient's average rating of care scored from very poor to very good	132	9.0	75	8.9		8.8	8.5	9.2	8.9	

SUPPORT FROM YOUR GP PRACTICE							Tumo	our Ty	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	*	100%	*	*	*	*	*	*	*	*	*	*	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	87%	*	*	*	*	*	*	*	*	*	*	*	72%

DIAGNOSTIC TESTS							Tumo	ur Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	94%	93%	*	*	*	*	*	*	*	*	*	*	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	76%	80%	*	*	*	*	*	*	*	*	*	*	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	48%	67%	*	*	*	*	*	*	*	*	*	*	51%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	87%	93%	*	*	*	*	*	*	*	*	*	*	89%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	96%	100%	*	*	*	*	*	*	*	*	*	*	97%

FINDING OUT THAT YOU HAD CANCER							Tumo	ur Ty _l	эе					
	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	*	93%	87%	*	*	*	*	*	*	*	*	*	*	89%
Q13. Patient was definitely told sensitively that they had cancer	*	90%	80%	*	*	*	*	*	*	*	*	*	*	87%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	83%	87%	*	*	*	*	*	*	*	*	*	*	84%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	97%	87%	*	*	*	*	*	*	*	*	*	*	95%
Q16. Patient was told they could go back later for more information about their diagnosis	*	91%	90%	*	*	*	*	*	*	*	*	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Ty _l	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	*	93%	100%	*	*	*	*	*	*	*	*	*	*	95%
Q18. Patient found it very or quite easy to contact their main contact person	*	87%	92%	*	*	*	*	*	*	*	*	*	*	89%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	93%	*	*	*	*	*	*	*	*	*	*	94%

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	*	84%	100%	*	*	*	*	*	*	*	*	*	*	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	85%	87%	*	*	*	*	*	*	*	*	*	*	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	76%	100%	*	*	*	*	*	*	*	*	*	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	62%	*	*	*	*	*	*	*	*	*	*	*	61%

CARE PLANNING							Tumo	our Ty	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	*	77%	75%	*	*	*	*	*	*	*	*	*	*	78%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	96%	*	*	*	*	*	*	*	*	*	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	90%	*	*	*	*	*	*	*	*	*	*	*	93%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Ty	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	*	92%	100%	*	*	*	*	*	*	*	*	*	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	80%	93%	*	*	*	*	*	*	*	*	*	*	82%
Q29. Patient was offered information about how to get financial help or benefits	*	58%	*	*	*	*	*	*	*	*	*	*	*	57%

HOSPITAL CARE							Tumo	ur Ty _l	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	*	58%	*	*	*	*	*	*	*	*	*	*	*	68%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	58%	*	*	*	*	*	*	*	*	*	*	*	64%
Q34. Patient was always able to get help from ward staff when needed	*	64%	*	*	*	*	*	*	*	*	*	*	*	67%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	73%	*	*	*	*	*	*	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	*	*	*	*	*	94%
Q37. Patient was always treated with respect and dignity while in hospital	*	92%	*	*	*	*	*	*	*	*	*	*	*	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	100%	*	*	*	*	*	*	*	*	*	*	*	95%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	62%	82%	*	*	*	*	*	*	*	*	*	*	67%

YOUR TREATMENT							Tumo	our 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	*	89%	93%	*	*	*	*	*	*	*	*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	100%	70%	*	*	*	*	*	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	92%	*	*	*	*	*	*	*	*	*	*	*	92%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	77%	*	*	*	*	*	*	*	*	*	*	*	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	*	78%	93%	*	*	*	*	*	*	*	*	*	*	79%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	73%	90%	*	*	*	*	*	*	*	*	*	*	81%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	81%	*	*	*	*	*	*	*	*	*	*	*	82%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	52%	*	*	*	*	*	*	*	*	*	*	*	52%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	72%	87%	*	*	*	*	*	*	*	*	*	*	76%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	74%	57%	*	*	*	*	*	*	*	*	*	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	62%	71%	*	*	*	*	*	*	*	*	*	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	*	*	*	*	*	*	*	*	*	*	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	58%	57%	*	*	*	*	*	*	*	*	*	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	55%	50%	*	*	*	*	*	*	*	*	*	*	54%

SUPPORT WHILE AT HOME							Tumo	our Ty	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	*	43%	75%	*	*	*	*	*	*	*	*	*	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	46%	*	*	*	*	*	*	*	*	*	*	*	52%

CARE FROM YOUR GP PRACTICE							Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	57%	20%	*	*	*	*	*	*	*	*	*	*	44%
Q52. Patient has had a review of cancer care by GP practice	*	19%	13%	*	*	*	*	*	*	*	*	*	*	18%

LIVING WITH AND BEYOND CANCER							Tumo	our 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	*	32%	*	*	*	*	*	*	*	*	*	*	*	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	84%	*	*	*	*	*	*	*	*	*	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	48%	73%	*	*	*	*	*	*	*	*	*	*	53%

YOUR OVERALL NHS CARE							Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q56. The whole care team worked well together	*	91%	83%	*	*	*	*	*	*	*	*	*	*	89%
Q57. Administration of care was very good or good	*	76%	86%	*	*	*	*	*	*	*	*	*	*	78%
Q58. Cancer research opportunities were discussed with patient	*	19%	*	*	*	*	*	*	*	*	*	*	*	30%
Q59. Patient's average rating of care scored from very poor to very good	*	8.9	9.3	*	*	*	*	*	*	*	*	*	*	8.9

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	*	*	*	*	*	*	*	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	72%

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	*	*	*	*	96%	92%	*	*	94%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	71%	83%	*	*	77%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	42%	58%	*	*	51%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	88%	92%	*	*	89%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	96%	100%	*	*	97%	

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	*	*	*	*	92%	89%	*	*	89%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	84%	89%	*	*	87%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	84%	81%	*	*	84%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	96%	96%	*	*	95%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	92%	92%	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSO	N			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	96%	93%	*	*	95%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	86%	91%	*	*	89%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	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	*	*	*	*	80%	92%	*	*	86%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	81%	93%	*	*	84%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	75%	100%	*	*	82%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	*	64%	70%	*	*	61%		

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	*	*	*	*	74%	83%	*	*	78%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	86%	100%	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	80%	*	*	*	93%

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	*	*	*	*	95%	100%	*	*	94%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	69%	85%	*	*	82%		
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	58%	*	*	*	57%		

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	*	*	*	*	*	*	*	*	68%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	64%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	67%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	94%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	95%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	64%	71%	*	*	67%

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	88%	92%	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	89%	90%	*	*	92%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	*	*	77%	88%	*	*	79%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	*	*	*	*	*	81%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	*	79%	90%	*	*	82%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*	*	52%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	69%	77%	*	*	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	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	*	*	*	*	73%	78%	*	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	52%	73%	*	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	95%	88%	*	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	58%	64%	*	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	53%	59%	*	*	54%

SUPPORT WHILE AT HOME	E 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	*	*	*	*	36%	44%	*	*	50%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	52%	

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	*	*	*	*	75%	*	*	*	44%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	25%	12%	*	*	18%

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	*	*	*	*	*	*	*	*	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	71%	89%	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	50%	58%	*	*	53%

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	*	*	*	*	96%	85%	*	*	89%
Q57. Administration of care was very good or good	*	*	*	*	73%	85%	*	*	78%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	29%	33%	*	*	30%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	8.8	8.9	*	*	8.9

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	100%	*	*	*	*	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	83%	*	*	*	*	*	72%

DIAGNOSTIC TESTS				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	94%	*	*	*	*	*	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	75%	*	*	*	*	*	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	45%	*	*	*	*	*	51%
Q8. Diagnostic test results were explained in a way the patient could completely understand	88%	*	*	*	*	*	89%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	*	97%

FINDING OUT THAT YOU HAD CANCER			Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All			
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	90%	*	*	*	*	*	89%			
Q13. Patient was definitely told sensitively that they had cancer	87%	*	*	*	*	*	87%			
Q14. Cancer diagnosis explained in a way the patient could completely understand	84%	*	*	*	*	*	84%			
Q15. Patient was definitely told about their diagnosis in an appropriate place	95%	*	*	*	*	*	95%			
Q16. Patient was told they could go back later for more information about their diagnosis	91%	*	*	*	*	*	91%			

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/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	93%	*	*	*	*	*	95%		
Q18. Patient found it very or quite easy to contact their main contact person	88%	*	*	*	*	*	89%		
Q19. Patient found advice from main contact person was very or quite helpful	95%	*	*	*	*	*	94%		

DECIDING ON THE BEST TREATMENT		Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	83%	*	*	*	*	*	86%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	*	*	*	*	*	84%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	78%	*	*	*	*	*	82%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	65%	*	*	*	*	*	61%		

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	78%	*	*	*	*	*	78%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	*	*	*	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	90%	*	*	*	*	*	93%

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	92%	*	*	*	*	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	*	*	*	*	*	82%
Q29. Patient was offered information about how to get financial help or benefits	56%	*	*	*	*	*	57%

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	50%	*	*	*	*	*	68%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	57%	*	*	*	*	*	64%
Q34. Patient was always able to get help from ward staff when needed	54%	*	*	*	*	*	67%
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	90%	*	*	*	*	*	94%
Q37. Patient was always treated with respect and dignity while in hospital	79%	*	*	*	*	*	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	*	*	*	*	*	95%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	64%	*	*	*	*	*	67%

YOUR TREATMENT				Male/Fema	ıle/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	*	*	*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	92%	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	92%	*	*	*	*	*	92%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	76%	*	*	*	*	*	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	76%	*	*	*	*	*	79%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	77%	*	*	*	*	*	81%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	*	*	*	*	*	82%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	50%	*	*	*	*	*	52%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	74%	*	*	*	*	*	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS			Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	69%	*	*	*	*	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	60%	*	*	*	*	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	*	*	*	*	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	51%	*	*	*	*	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	*	*	*	*	*	54%

SUPPORT WHILE AT HOME				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	39%	*	*	*	*	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	*	*	*	*	*	52%

CARE FROM YOUR GP PRACTICE	Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	50%	*	*	*	*	*	44%
Q52. Patient has had a review of cancer care by GP practice	17%	*	*	*	*	*	18%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	32%	*	*	*	*	*	35%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	81%	*	*	*	*	*	84%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	48%	*	*	*	*	*	53%	

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	90%	*	*	*	*	*	89%	
Q57. Administration of care was very good or good	75%	*	*	*	*	*	78%	
Q58. Cancer research opportunities were discussed with patient	21%	*	*	*	*	*	30%	
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	*	8.9	

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	100%	*	*	*	*	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	77%	*	*	*	*	*	72%

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%	*	*	*	*	*	94%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	76%	*	*	*	*	*	77%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	48%	*	*	*	*	*	51%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	89%	*	*	*	*	*	89%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	*	*	*	*	*	97%		

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	89%	*	*	*	*	*	89%		
Q13. Patient was definitely told sensitively that they had cancer	87%	*	*	*	*	*	87%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	82%	*	*	*	*	*	84%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	94%	*	*	*	*	*	95%		
Q16. Patient was told they could go back later for more information about their diagnosis	92%	*	*	*	*	*	91%		

SUPPORT FROM A MAIN CONTACT PERSO	N			Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	96%	*	*	*	*	*	95%
Q18. Patient found it very or quite easy to contact their main contact person	88%	*	*	*	*	*	89%
Q19. Patient found advice from main contact person was very or quite helpful	94%	*	*	*	*	*	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	84%	*	*	*	*	*	86%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	82%	*	*	*	*	*	84%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	*	*	*	*	*	82%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	63%	*	*	*	*	*	61%		

CARE PLANNING				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	75%	*	*	*	*	*	78%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	*	*	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	92%	*	*	*	*	*	93%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	93%	*	*	*	*	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	*	*	*	*	*	82%
Q29. Patient was offered information about how to get financial help or benefits	59%	*	*	*	*	*	57%

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	65%	*	*	*	*	*	68%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	69%	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	60%	*	*	*	*	*	64%
Q34. Patient was always able to get help from ward staff when needed	63%	*	*	*	*	*	67%
Q35. Patient was always able to discuss worries and fears with hospital staff	68%	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	94%	*	*	*	*	*	94%
Q37. Patient was always treated with respect and dignity while in hospital	85%	*	*	*	*	*	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	95%	*	*	*	*	*	95%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	68%	*	*	*	*	*	67%

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	*	*	*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	92%	*	*	*	*	*	92%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	80%	*	*	*	*	*	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	78%	*	*	*	*	*	79%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	79%	*	*	*	*	*	81%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	*	*	*	*	*	82%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	53%	*	*	*	*	*	52%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	75%	*	*	*	*	*	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	67%	*	*	*	*	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	62%	*	*	*	*	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	89%	*	*	*	*	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	52%	*	*	*	*	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	*	*	*	*	*	54%

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	50%	*	*	*	*	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	*	*	*	*	*	52%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other				Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	48%	*	*	*	*	*	44%
Q52. Patient has had a review of cancer care by GP practice	17%	*	*	*	*	*	18%

LIVING WITH AND BEYOND CANCER	IVING 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	26%	*	*	*	*	*	35%				
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	*	*	*	*	*	84%				
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	48%	*	*	*	*	*	53%				

YOUR OVERALL NHS CARE			Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All		
Q56. The whole care team worked well together	88%	*	*	*	*	*	89%		
Q57. Administration of care was very good or good	75%	*	*	*	*	*	78%		
Q58. Cancer research opportunities were discussed with patient	29%	*	*	*	*	*	30%		
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	*	8.9		

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	*	*	*	*	100%	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	60%	*	72%

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	*	*	73%	100%	97%	*	94%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	45%	100%	82%	*	77%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	55%	54%	47%	*	51%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	82%	92%	91%	*	89%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	82%	100%	100%	*	97%		

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	*	*	92%	92%	86%	*	89%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	75%	100%	86%	*	87%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	75%	100%	83%	*	84%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	83%	100%	97%	*	95%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	82%	92%	94%	*	91%	

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	*	*	92%	100%	94%	*	95%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	80%	100%	87%	*	89%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	91%	92%	97%	*	94%

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	*	*	67%	93%	91%	*	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	75%	100%	81%	*	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	64%	100%	84%	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	*	46%	*	61%

CARE PLANNING				IMD Quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	87%	71%	*	78%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	88%	*	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	100%	*	93%	

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	*	*	90%	100%	94%	*	94%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	75%	93%	80%	*	82%	
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	64%	*	57%	

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	*	*	*	*	*	*	68%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	73%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	64%	
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	67%	
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	71%	
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	94%	
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	86%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	95%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	70%	91%	64%	*	67%	

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	*	*	75%	100%	89%	*	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	92%	*	86%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	94%	*	92%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	75%	*	77%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*		
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	83%	86%	71%	*	79%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	*	83%	*	81%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	*	78%	*	82%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	45%	*	52%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	55%	80%	83%	*	76%		

IMEDIATE AND LONG TERM SIDE EFFECTS			IMD Quint				
	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	*	*	67%	85%	67%	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	60%	77%	62%	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	95%	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	58%	69%	53%	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	60%	*	44%	*	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	*	*	50%	*	53%	*	50%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	52%	

CARE FROM YOUR GP PRACTICE	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	*	*	*	*	33%	*	44%
Q52. Patient has had a review of cancer care by GP practice	*	*	33%	0%	21%	*	18%

IMD quintile tables

LIVING WITH AND BEYOND CANCER				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	80%	94%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	55%	52%	*	53%

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	*	*	80%	93%	91%	*	89%
Q57. Administration of care was very good or good	*	*	67%	80%	81%	*	78%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	22%	*	30%
Q59. Patient's average rating of care scored from very poor to very good	*	*	8.5	9.1	9.0	*	8.9

SUPPORT FROM YOUR GP PRACTICE				
	Yes	No	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	100%	100%	*	100%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	83%	67%	*	72%

DIAGNOSTIC TESTS				
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	97%	*	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	75%	78%	*	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	59%	44%	*	51%
Q8. Diagnostic test results were explained in a way the patient could completely understand	88%	88%	*	89%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	97%	*	97%

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	89%	88%	*	89%
Q13. Patient was definitely told sensitively that they had cancer	89%	81%	*	87%
Q14. Cancer diagnosis explained in a way the patient could completely understand	84%	81%	*	84%
Q15. Patient was definitely told about their diagnosis in an appropriate place	95%	94%	*	95%
Q16. Patient was told they could go back later for more information about their diagnosis	88%	93%	*	91%

SUPPORT FROM A MAIN CONTACT PERSON	SON Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	94%	94%	*	95%	
Q18. Patient found it very or quite easy to contact their main contact person	94%	84%	*	89%	
Q19. Patient found advice from main contact person was very or quite helpful	91%	96%	*	94%	

DECIDING ON THE BEST TREATMENT				
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	88%	*	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	89%	79%	*	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	76%	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	75%	54%	*	61%

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	82%	69%	*	78%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	92%	*	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	86%	100%	*	93%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	90%	96%	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	85%	*	82%
Q29. Patient was offered information about how to get financial help or benefits	50%	60%	*	57%

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	69%	*	*	68%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	80%	*	*	73%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	*	*	64%	
Q34. Patient was always able to get help from ward staff when needed	67%	*	*	67%	
Q35. Patient was always able to discuss worries and fears with hospital staff	67%	*	*	71%	
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	94%	
Q37. Patient was always treated with respect and dignity while in hospital	85%	*	*	86%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	*	*	95%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	73%	63%	*	67%	

YOUR TREATMENT Long term condition status					
	Yes	No	Not given	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	94%	85%	*	90%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	92%	*	86%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	94%	*	92%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	73%	*	77%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	
Q42_1. Patient completely had enough understandable information about progress with surgery	79%	79%	*	79%	
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	77%	*	81%	
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	81%	82%	*	82%	
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	55%	*	52%	
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	72%	76%	*	76%	

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	66%	70%	*	69%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	63%	57%	*	63%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	90%	*	90%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	48%	*	55%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	59%	*	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	54%	43%	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	64%	*	*	52%

CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	53%	33%	*	44%
Q52. Patient has had a review of cancer care by GP practice	20%	13%	*	18%

LIVING WITH AND BEYOND CANCER		Long term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	*	*	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	93%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	48%	52%	*	53%

YOUR OVERALL NHS CARE	Long term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	86%	90%	*	89%
Q57. Administration of care was very good or good	76%	78%	*	78%
Q58. Cancer research opportunities were discussed with patient	14%	41%	*	30%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	*	8.9

