

Cancer Patient Experience Survey

2022 Results

Tameside and Glossop Integrated Care NHS Foundation 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
Q13. Patient was definitely told sensitively that they had cancer	85%	62%	85%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	91%	65%	87%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	96%	76%	94%	85%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	93%	68%	91%	80%

Tameside and Glossop Integrated Care NHS Foundation Trust has no scores below expected range

Introduction

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

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.

Tameside and Glossop Integrated Care NHS Foundation Trust

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

Additional suppression

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

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

Understanding the results

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

Expected range charts

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

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

Comparability tables

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

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

Sub-group breakdowns

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

Tumour type tables

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

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

Further information

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

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

Response Rate

Overall Response Rate

57 patients responded out of a total of 114 patients, resulting in a response rate of 50%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	126	114	57	50%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

	Number of Respondents
Paper	50
Online	7
Phone	0
Translation Service	0
Total	57

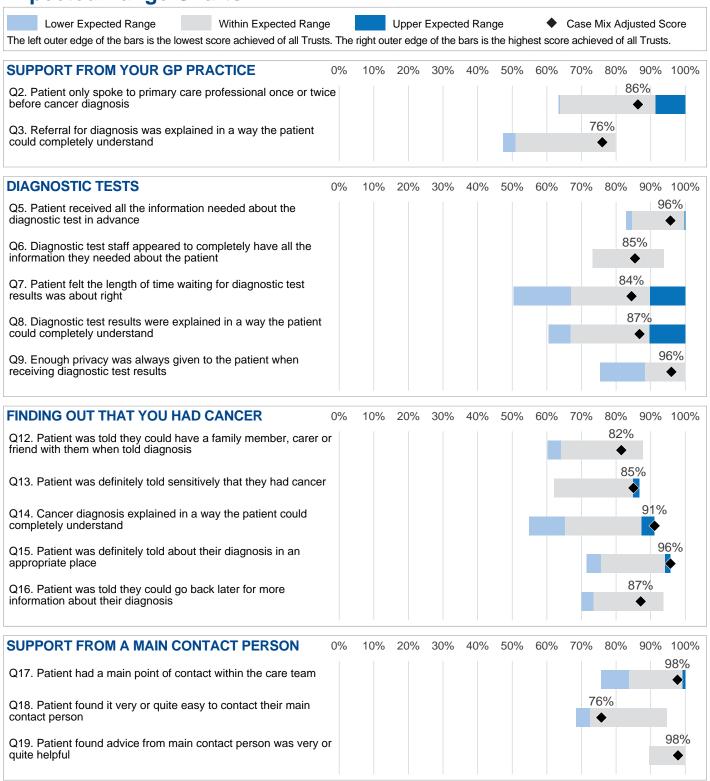
Respondents by Tumour Group

	Number of Respondents
Brain / CNS	0
Breast	20
Colorectal / LGT	27
Gynaecological	*
Haematological	0
Head and Neck	*
Lung	*
Prostate	0
Sarcoma	0
Skin	0
Upper Gastro	*
Urological	0
Other	*
Total	57

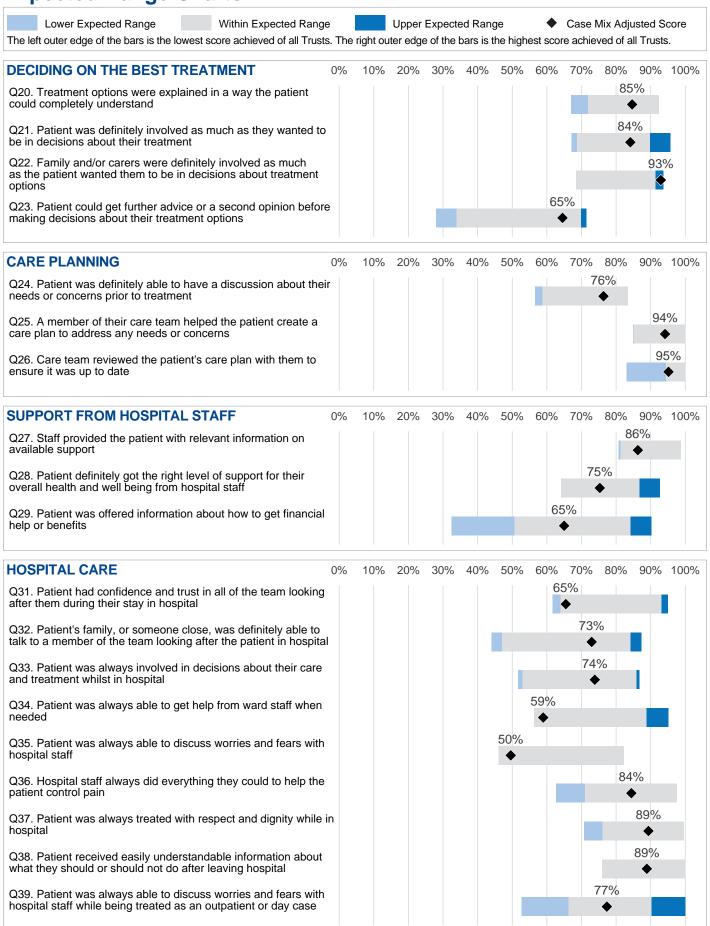
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	50
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	<u>'</u>
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	57

Expected Range Charts

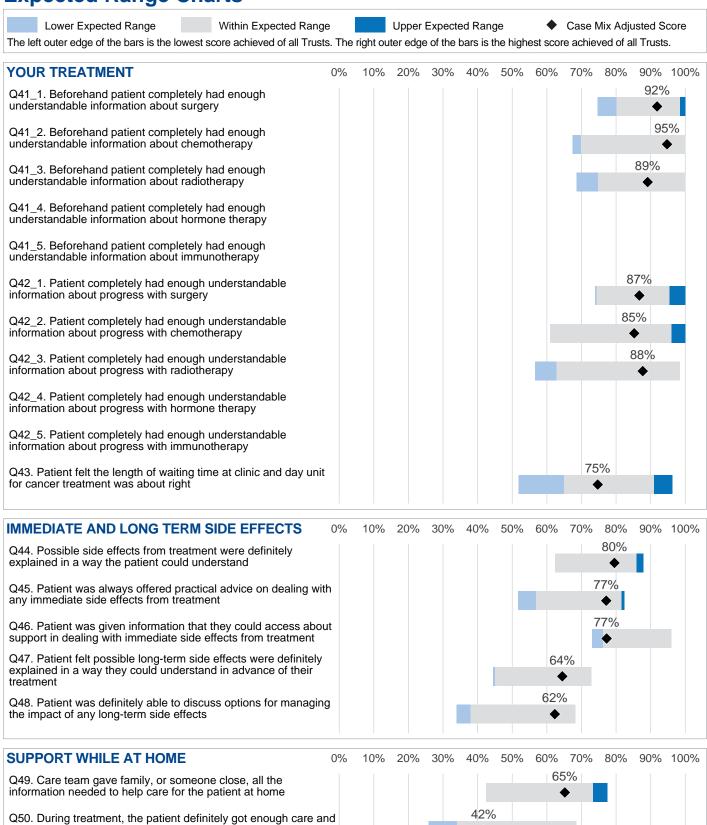


Expected Range Charts

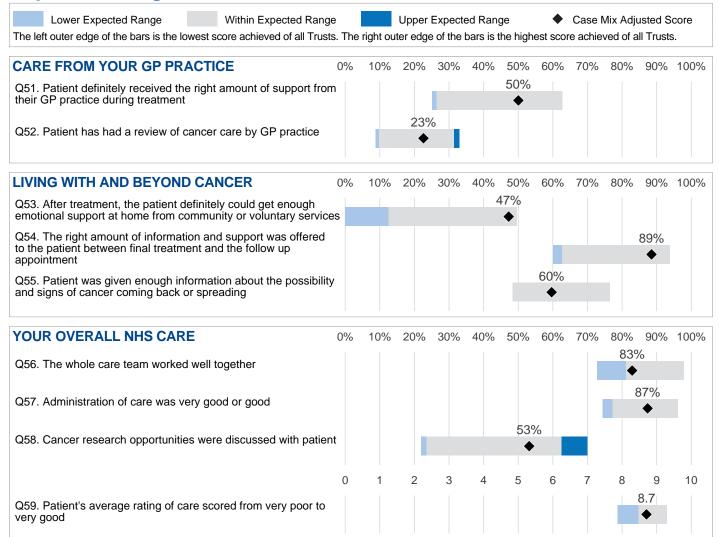


Expected Range Charts

support at home from community or voluntary services



Expected Range Charts



Comparability tables

Adjusted Score below Lower Expected Range

isted Score between Upper Lower Expected Ranges

Adjusted Score above Upper Expected Range

 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.	Exped Adjust and Lo
** No score available for 2021.		, ,	Adjust

		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	24	92%	35	89%		86%	64%	91%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	32	69%	42	79%		76%	51%	80%	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	29	93%	48	96%	•	96%	85%	100%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	34	91%	50	86%		85%	73%	94%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	34	88%	51	86%		84%	67%	90%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	34	82%	51	88%		87%	67%	90%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	34	97%	51	96%		96%	88%	100%	95%

		Una	djusted So	cores		Case M	d Scores		
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	39	69%	55	85%		82%	64%	88%	76%
Q13. Patient was definitely told sensitively that they had cancer	39	85%	57	88%		85%	62%	85%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	39	77%	57	93%		91%	65%	87%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	39	95%	57	96%		96%	76%	94%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	33	88%	52	88%		87%	74%	94%	84%

	Unadjusted Scores Case Mix Adjusted Scores								
SUPPORT FROM A MAIN CONTACT PERSON	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q17. Patient had a main point of contact within the care team	38	100%	54	98%	•	98%	84%	99%	91%
Q18. Patient found it very or quite easy to contact their main contact person	36	81%	46	78%		76%	73%	95%	84%
Q19. Patient found advice from main contact person was very or quite helpful	38	100%	50	98%		98%	90%	100%	95%

Comparability tables

* Indicates where a score is not

Adjusted Score below Lower Expected Range

available due to suppression or a low base size. ** No score available for 2021.	or ▼	Change 2021-2022 significantly higher	2: Indicate or lower	es where than 202	2022 sco 1 score.	ore is		Adjust and Lo Adjust	ed Score I ower Expe ed Score a ted Range	between lected Rang above Up	ges	
				Una	djusted So	cores		Case M	1ix Adjuste	_]
DECIDING ON THE BEST TREA	ATME	NT	2021	2021	2022	2022	Change	2022	Lower	Upper	National Score	

	Unadjusted Scores Case Mix Adjusted Scores								
DECIDING ON THE BEST TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021-2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q20. Treatment options were explained in a way the patient could completely understand	38	82%	54	87%		85%	72%	92%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	39	77%	56	86%		84%	69%	90%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	32	72%	47	94%		93%	68%	91%	80%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	18	61%	30	67%		65%	34%	70%	52%

		Unad	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	39	69%	52	79%		76%	59%	83%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	18	89%	39	95%	A	94%	85%	100%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	13	100%	29	97%		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	29	86%	47	87%		86%	81%	99%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	37	78%	56	77%		75%	64%	87%	76%
Q29. Patient was offered information about how to get financial help or benefits	20	55%	35	66%		65%	51%	84%	67%

		Una	djusted So	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	25	72%	31	68%		65%	64%	93%	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	19	58%	25	76%		73%	47%	84%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	22	59%	30	77%		74%	53%	86%	70%
Q34. Patient was always able to get help from ward staff when needed	23	87%	30	60%		59%	56%	89%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	22	86%	27	52%		50%	46%	82%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	20	85%	29	86%		84%	71%	98%	84%
Q37. Patient was always treated with respect and dignity while in hospital	23	96%	30	90%		89%	76%	100%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	23	83%	28	89%		89%	76%	100%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	30	80%	46	78%		77%	66%	90%	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

**	No score	available	for 2021
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		Una	djusted So	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	33	97%	44	93%		92%	80%	98%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	21	90%	21	95%		95%	70%	100%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	18	89%	21	90%		89%	75%	100%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	12	75%		*		*			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	32	94%	44	89%		87%	74%	95%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	20	75%	21	86%		85%	61%	96%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	17	88%	19	89%		88%	63%	98%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	12	75%		*		*			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	37	68%	54	76%		75%	65%	91%	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	36	69%	53	81%		80%	62%	86%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	35	71%	53	79%		77%	57%	82%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	28	93%	47	79%		77%	76%	96%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	33	58%	48	67%		64%	45%	73%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	29	52%	43	65%		62%	38%	68%	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	27	63%	40	68%		65%	42%	73%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	17	65%	33	42%		42%	34%	68%	51%

Comparability tables

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



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

Adjusted Score below Lower Expected Range

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

** No score available for 2021.

		Una	djusted So	cores		Case M			
CARE FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	26	35%	30	50%		50%	26%	63%	45%
Q52. Patient has had a review of cancer care by GP practice	35	14%	54	24%		23%	10%	31%	21%

		Una	djusted So	cores		Case M			
LIVING WITH AND BEYOND CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	24	50%		47%	13%	50%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	18	78%	27	89%	•	89%	63%	94%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	35	57%	46	59%		60%	48%	76%	62%

		Una	djusted So	cores		Case M			
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	36	89%	52	85%		83%	81%	98%	90%
Q57. Administration of care was very good or good	37	86%	54	89%		87%	77%	96%	87%
Q58. Cancer research opportunities were discussed with patient	21	33%	31	52%		53%	24%	62%	43%
Q59. Patient's average rating of care scored from very poor to very good	37	9.1	53	8.8		8.7	8.5	9.3	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%	79%	*	*	*	*	*	*	*	*	*	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	88%	80%	*	*	*	*	*	*	*	*	*	*	79%

DIAGNOSTIC TESTS Tumour Type														
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	94%	100%	*	*	*	*	*	*	*	*	*	*	96%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	88%	92%	*	*	*	*	*	*	*	*	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	88%	88%	*	*	*	*	*	*	*	*	*	*	86%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	88%	92%	*	*	*	*	*	*	*	*	*	*	88%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	94%	100%	*	*	*	*	*	*	*	*	*	*	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	ur Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	84%	89%	*	*	*	*	*	*	*	*	*	*	85%
Q13. Patient was definitely told sensitively that they had cancer	*	90%	89%	*	*	*	*	*	*	*	*	*	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	100%	89%	*	*	*	*	*	*	*	*	*	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	100%	96%	*	*	*	*	*	*	*	*	*	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	*	95%	92%	*	*	*	*	*	*	*	*	*	*	88%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	95%	100%	*	*	*	*	*	*	*	*	*	*	98%
Q18. Patient found it very or quite easy to contact their main contact person	*	53%	95%	*	*	*	*	*	*	*	*	*	*	78%
Q19. Patient found advice from main contact person was very or quite helpful	*	94%	100%	*	*	*	*	*	*	*	*	*	*	98%

DECIDING ON THE BEST TREATMENT							Tumo	ur 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	*	90%	88%	*	*	*	*	*	*	*	*	*	*	87%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	80%	93%	*	*	*	*	*	*	*	*	*	*	86%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	88%	100%	*	*	*	*	*	*	*	*	*	*	94%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	58%	91%	*	*	*	*	*	*	*	*	*	*	67%

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	*	89%	77%	*	*	*	*	*	*	*	*	*	*	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	100%	95%	*	*	*	*	*	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	91%	100%	*	*	*	*	*	*	*	*	*	*	97%

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	*	94%	82%	*	*	*	*	*	*	*	*	*	*	87%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	70%	93%	*	*	*	*	*	*	*	*	*	*	77%
Q29. Patient was offered information about how to get financial help or benefits	*	58%	75%	*	*	*	*	*	*	*	*	*	*	66%

HOSPITAL CARE							Tumo	ur Ty	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	*	*	78%	*	*	*	*	*	*	*	*	*	*	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	*	*	82%	*	*	*	*	*	*	*	*	*	*	76%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	78%	*	*	*	*	*	*	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	*	*	61%	*	*	*	*	*	*	*	*	*	*	60%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	56%	*	*	*	*	*	*	*	*	*	*	52%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	82%	*	*	*	*	*	*	*	*	*	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	94%	*	*	*	*	*	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	94%	*	*	*	*	*	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	65%	95%	*	*	*	*	*	*	*	*	*	*	78%

YOUR 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
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	88%	95%	*	*	*	*	*	*	*	*	*	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	92%	*	*	*	*	*	*	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	*	82%	90%	*	*	*	*	*	*	*	*	*	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	86%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	91%	*	*	*	*	*	*	*	*	*	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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%	79%	*	*	*	*	*	*	*	*	*	*	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	*	90%	87%	*	*	*	*	*	*	*	*	*	*	81%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	70%	88%	*	*	*	*	*	*	*	*	*	*	79%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	89%	81%	*	*	*	*	*	*	*	*	*	*	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	67%	76%	*	*	*	*	*	*	*	*	*	*	67%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	71%	74%	*	*	*	*	*	*	*	*	*	*	65%

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	*	73%	83%	*	*	*	*	*	*	*	*	*	*	68%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	43%	58%	*	*	*	*	*	*	*	*	*	*	42%

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	*	*	67%	*	*	*	*	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	15%	29%	*	*	*	*	*	*	*	*	*	*	24%

Tumour type tables

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	*	50%	50%	*	*	*	*	*	*	*	*	*	*	50%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	82%	100%	*	*	*	*	*	*	*	*	*	*	89%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	50%	82%	*	*	*	*	*	*	*	*	*	*	59%

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	*	89%	88%	*	*	*	*	*	*	*	*	*	*	85%
Q57. Administration of care was very good or good	*	85%	96%	*	*	*	*	*	*	*	*	*	*	89%
Q58. Cancer research opportunities were discussed with patient	*	58%	62%	*	*	*	*	*	*	*	*	*	*	52%
Q59. Patient's average rating of care scored from very poor to very good	*	8.4	9.4	*	*	*	*	*	*	*	*	*	*	8.8

Age group tables

SUPPORT FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	*	*	91%	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	75%	93%	*	79%

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	*	*	*	*	100%	100%	93%	*	96%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	100%	79%	93%	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	64%	93%	100%	*	86%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	93%	86%	100%	*	88%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	93%	93%	100%	*	96%

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	*	*	*	*	93%	88%	95%	*	85%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	86%	88%	95%	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	93%	81%	100%	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	100%	88%	100%	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	79%	93%	94%	*	88%

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	*	*	*	*	100%	94%	100%	*	98%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	73%	77%	94%	*	78%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	100%	93%	100%	*	98%

DECIDING ON THE BEST TREATMENT				Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All	
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*	85%	88%	94%	*	87%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	79%	75%	95%	*	86%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	100%	85%	94%	*	94%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	*	*	*	*	*	67%	

Age group tables

CARE PLANNING				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*	85%	67%	83%	*	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	92%	*	100%	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	100%	*	97%

SUPPORT FROM HOSPITAL STAFF	Age											
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All			
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	86%	91%	87%	*	87%			
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	79%	69%	100%	*	77%			
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	80%	*	60%	*	66%			

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	*	*	*	*	*	*	80%	*	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	*	*	*	*	*	*	*	*	76%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	80%	*	77%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	60%	*	60%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	52%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	100%	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	90%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	83%	75%	87%	*	78%

Age group tables

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	83%	*	100%	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	*	*	75%	*	100%	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	*	*	*	*	*	86%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	*	*	*	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*	*	*
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	*	*	*	*	79%	73%	94%	*	76%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	77%	87%	83%	*	81%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	92%	79%	84%	*	79%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	83%	67%	88%	*	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	83%	58%	71%	*	67%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	73%	55%	73%	*	65%

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	*	*	*	*	55%	*	82%	*	68%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	40%	*	*	42%

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	*	*	*	*	*	50%	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	23%	25%	17%	*	24%

Age group tables

LIVING WITH AND BEYOND CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	90%	*	50%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	90%	*	89%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	69%	77%	50%	*	59%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	*	*	77%	87%	89%	*	85%
Q57. Administration of care was very good or good	*	*	*	*	92%	87%	95%	*	89%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	60%	*	*	52%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	8.8	8.5	9.5	*	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	92%	*	*	*	*	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	82%	*	*	*	*	*	79%

DIAGNOSTIC TESTS			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	94%	*	*	*	*	*	96%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	89%	*	*	*	*	*	86%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	81%	*	*	*	*	*	86%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	86%	*	*	*	*	*	88%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	*	*	*	*	*	96%		

FINDING OUT THAT YOU HAD CANCER				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	*	*	*	*	*	85%
Q13. Patient was definitely told sensitively that they had cancer	90%	*	*	*	*	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	95%	*	*	*	*	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	97%	*	*	*	*	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	89%	*	*	*	*	*	88%

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	97%	*	*	*	*	*	98%
Q18. Patient found it very or quite easy to contact their main contact person	71%	*	*	*	*	*	78%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	*	*	*	98%

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	87%	*	*	*	*	*	87%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	*	*	*	*	*	86%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	94%	*	*	*	*	*	94%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	61%	*	*	*	*	*	67%		

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	85%	*	*	*	*	*	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	95%	*	*	*	*	*	97%

SUPPORT FROM HOSPITAL STAFF				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	81%	*	*	*	*	*	87%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	*	*	*	*	*	77%
Q29. Patient was offered information about how to get financial help or benefits	57%	*	*	*	*	*	66%

HOSPITAL CARE				Male/Fema	ale/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	67%	*	*	*	*	*	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%	*	*	*	*	*	76%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	76%	*	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	52%	*	*	*	*	*	60%
Q35. Patient was always able to discuss worries and fears with hospital staff	39%	*	*	*	*	*	52%
Q36. Hospital staff always did everything they could to help the patient control pain	81%	*	*	*	*	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	86%	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	72%	*	*	*	*	*	78%

YOUR TREATMENT				Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	*	*	*	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	93%	*	*	*	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	88%	*	*	*	*	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	87%	*	*	*	*	*	86%
Q42_3. Patient completely had enough understandable nformation about progress with radiotherapy	92%	*	*	*	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*
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	ΓS			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	82%	*	*	*	*	*	81%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	79%	*	*	*	*	*	79%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	*	*	*	*	*	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	67%	*	*	*	*	*	67%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	69%	*	*	*	*	*	65%

SUPPORT WHILE AT HOME				Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	*	*	*	*	*	68%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	43%	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	19%	*	*	*	*	*	24%

LIVING WITH AND BEYOND CANCER				Male/Fema	le/Non-bina	ry/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	56%	*	*	*	*	*	50%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	*	*	*	*	*	89%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	52%	*	*	*	*	*	59%

Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE				Male/Fema	ale/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	83%	*	*	*	*	*	85%
Q57. Administration of care was very good or good	89%	*	*	*	*	*	89%
Q58. Cancer research opportunities were discussed with patient	45%	*	*	*	*	*	52%
Q59. Patient's average rating of care scored from very poor to very good	8.7	*	*	*	*	*	8.8

Ethnicity tables

SUPPORT FROM YOUR GP PRACTICE				Ethr	nicity		
	White Mixed Asian Black Other Not given					All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	94%	*	*	*	*	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	84%	*	*	*	*	*	79%

DIAGNOSTIC TESTS				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	98%	*	*	*	*	*	96%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	89%	*	*	*	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	89%	*	*	*	*	*	86%
Q8. Diagnostic test results were explained in a way the patient could completely understand	93%	*	*	*	*	*	88%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	*	96%

FINDING OUT THAT YOU HAD CANCER				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	92%	*	*	*	*	*	85%
Q13. Patient was definitely told sensitively that they had cancer	90%	*	*	*	*	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	94%	*	*	*	*	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	96%	*	*	*	*	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	91%	*	*	*	*	*	88%

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	98%	*	*	*	*	*	98%
Q18. Patient found it very or quite easy to contact their main contact person	80%	*	*	*	*	*	78%
Q19. Patient found advice from main contact person was very or quite helpful	98%	*	*	*	*	*	98%

DECIDING ON THE BEST TREATMENT		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	88%	*	*	*	*	*	87%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	*	*	*	*	*	86%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	93%	*	*	*	*	*	94%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	67%	*	*	*	*	*	67%		

Ethnicity tables

CARE PLANNING				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	80%	*	*	*	*	*	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	97%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	*	*	*	*	*	97%

SUPPORT FROM HOSPITAL STAFF		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q27. Staff provided the patient with relevant information on available support	90%	*	*	*	*	*	87%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	82%	*	*	*	*	*	77%	
Q29. Patient was offered information about how to get financial help or benefits	65%	*	*	*	*	*	66%	

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	76%	*	*	*	*	*	76%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	76%	*	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	56%	*	*	*	*	*	60%
Q35. Patient was always able to discuss worries and fears with hospital staff	45%	*	*	*	*	*	52%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	*	*	*	*	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	92%	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	*	*	*	*	*	78%

Ethnicity tables

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	95%	*	*	*	*	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	95%	*	*	*	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	90%	*	*	*	*	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	84%	*	*	*	*	*	86%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	89%	*	*	*	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*
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	79%	*	*	*	*	*	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	83%	*	*	*	*	*	81%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	81%	*	*	*	*	*	79%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	83%	*	*	*	*	*	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	70%	*	*	*	*	*	67%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	67%	*	*	*	*	*	65%

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	71%	*	*	*	*	*	68%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	44%	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	50%	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	23%	*	*	*	*	*	24%

Ethnicity tables

LIVING WITH AND BEYOND CANCER		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	52%	*	*	*	*	*	50%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	92%	*	*	*	*	*	89%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	*	*	*	*	*	59%		

YOUR OVERALL NHS CARE		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q56. The whole care team worked well together	87%	*	*	*	*	*	85%	
Q57. Administration of care was very good or good	92%	*	*	*	*	*	89%	
Q58. Cancer research opportunities were discussed with patient	58%	*	*	*	*	*	52%	
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	*	*	*	*	8.8	

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE				IMD Quintil	е		
	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	85%	*	91%	*	*	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	69%	*	71%	*	*	*	79%

DIAGNOSTIC TESTS				IMD Quinti	le		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q5. Patient received all the information needed about the diagnostic test in advance	95%	*	93%	*	*	*	96%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	89%	*	81%	*	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	*	94%	*	*	*	86%
Q8. Diagnostic test results were explained in a way the patient could completely understand	85%	*	81%	*	*	*	88%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	*	94%	*	*	*	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	90%	*	81%	*	*	*	85%
Q13. Patient was definitely told sensitively that they had cancer	82%	*	88%	*	*	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	95%	*	81%	*	*	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	100%	*	88%	*	*	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	*	92%	*	*	*	88%

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quintil	е		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	100%	*	100%	*	*	*	98%
Q18. Patient found it very or quite easy to contact their main contact person	67%	*	77%	*	*	*	78%
Q19. Patient found advice from main contact person was very or quite helpful	95%	*	100%	*	*	*	98%

IMD quintile tables

DECIDING ON THE BEST TREATMENT				IMD Quinti	е		
	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	95%	*	73%	*	*	*	87%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	90%	*	75%	*	*	*	86%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	100%	*	85%	*	*	*	94%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	54%	*	*	*	*	*	67%

CARE PLANNING				IMD Quintil	е		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	70%	*	86%	*	*	*	79%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	93%	*	*	*	*	*	97%

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	79%	*	93%	*	*	*	87%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	71%	*	81%	*	*	*	77%		
Q29. Patient was offered information about how to get financial help or benefits	80%	*	45%	*	*	*	66%		

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	64%	*	*	*	*	*	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%	*	*	*	*	*	76%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	*	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	57%	*	*	*	*	*	60%
Q35. Patient was always able to discuss worries and fears with hospital staff	38%	*	*	*	*	*	52%
Q36. Hospital staff always did everything they could to help the patient control pain	69%	*	*	*	*	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	86%	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	61%	*	86%	*	*	*	78%

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	89%	*	90%	*	*	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	100%	*	*	*	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	89%	*	91%	*	*	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	90%	*	*	*	*	*	86%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	*	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	*	*	*
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	64%	*	87%	*	*	*	76%

MMEDIATE AND LONG TERM SIDE EFFECTS			IMD Quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	70%	*	93%	*	*	*	81%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	76%	*	85%	*	*	*	79%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	72%	*	91%	*	*	*	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	*	77%	*	*	*	67%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	*	82%	*	*	*	65%

SUPPORT WHILE AT HOME	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%	*	*	*	*	*	68%		
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	25%	*	*	*	*	*	42%		

CARE FROM YOUR GP PRACTICE				IMD Quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	27%	*	*	*	*	*	50%	
Q52. Patient has had a review of cancer care by GP practice	27%	*	19%	*	*	*	24%	

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	40%	*	*	*	*	*	50%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75%	*	*	*	*	*	89%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	*	54%	*	*	*	59%

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	70%	*	93%	*	*	*	85%
Q57. Administration of care was very good or good	81%	*	93%	*	*	*	89%
Q58. Cancer research opportunities were discussed with patient	50%	*	*	*	*	*	52%
Q59. Patient's average rating of care scored from very poor to very good	8.3	*	9.2	*	*	*	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	96%	*	*	89%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	83%	*	*	79%

DIAGNOSTIC TESTS		Long term condition status		
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	94%	*	*	96%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	86%	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	*	*	86%
Q8. Diagnostic test results were explained in a way the patient could completely understand	89%	*	*	88%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	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	88%	*	*	85%
Q13. Patient was definitely told sensitively that they had cancer	88%	*	*	88%
Q14. Cancer diagnosis explained in a way the patient could completely understand	93%	*	*	93%
Q15. Patient was definitely told about their diagnosis in an appropriate place	98%	*	*	96%
Q16. Patient was told they could go back later for more information about their diagnosis	87%	*	*	88%

SUPPORT FROM A MAIN CONTACT PERSOI	Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	97%	*	*	98%	
Q18. Patient found it very or quite easy to contact their main contact person	74%	*	*	78%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	98%	

DECIDING ON THE BEST TREATMENT		Long term condition s	status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	85%	*	*	87%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	85%	*	*	86%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	91%	*	*	94%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	62%	*	*	67%

CARE PLANNING	Long term condition status				
	Yes	No	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	73%	*	*	79%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	100%	*	*	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	95%	*	*	97%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	88%	*	*	87%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	*	*	77%
Q29. Patient was offered information about how to get financial help or benefits	73%	*	*	66%

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	60%	*	*	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	71%	*	*	76%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	74%	*	*	77%	
Q34. Patient was always able to get help from ward staff when needed	58%	*	*	60%	
Q35. Patient was always able to discuss worries and fears with hospital staff	41%	*	*	52%	
Q36. Hospital staff always did everything they could to help the patient control pain	84%	*	*	86%	
Q37. Patient was always treated with respect and dignity while in hospital	84%	*	*	90%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	83%	*	*	89%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	74%	*	*	78%	

YOUR TREATMENT		Long term condition status		
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	*	93%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	100%	*	*	95%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*
Q42_1. Patient completely had enough understandable information about progress with surgery	88%	*	*	89%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	88%	*	*	86%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	86%	*	*	89%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*
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	77%	*	*	76%

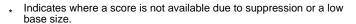
IMMEDIATE AND LONG TERM SIDE EFFECTS		Long term condition status			
	Yes	No	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	*	*	81%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	77%	*	*	79%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	74%	*	*	79%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	*	*	67%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	*	*	65%	

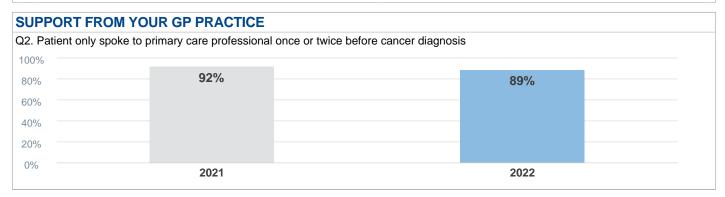
SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	*	*	68%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	36%	*	*	42%

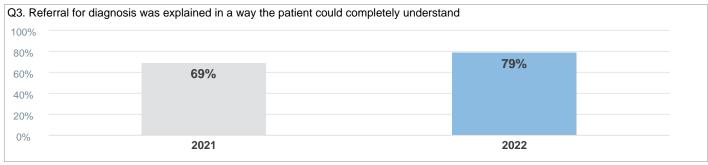
CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	42%	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	25%	*	*	24%

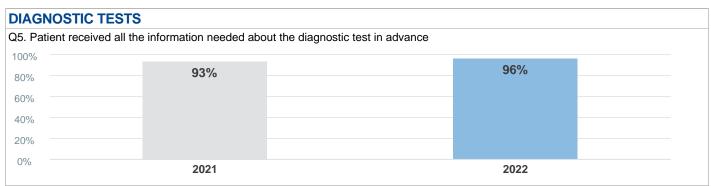
NG WITH AND BEYOND CANCER Long term condition status				
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	44%	*	*	50%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	*	*	89%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	52%	*	*	59%

YOUR OVERALL NHS CARE		Long term condition status		
	Yes	No	Not given	All
Q56. The whole care team worked well together	82%	*	*	85%
Q57. Administration of care was very good or good	88%	*	*	89%
Q58. Cancer research opportunities were discussed with patient	45%	*	*	52%
Q59. Patient's average rating of care scored from very poor to very good	8.7	*	*	8.8

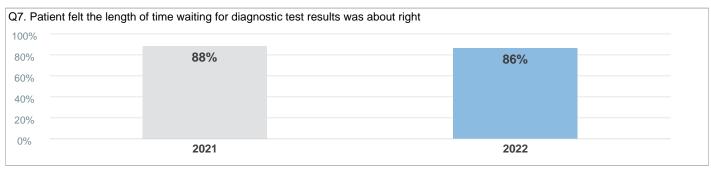


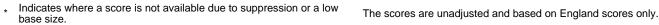


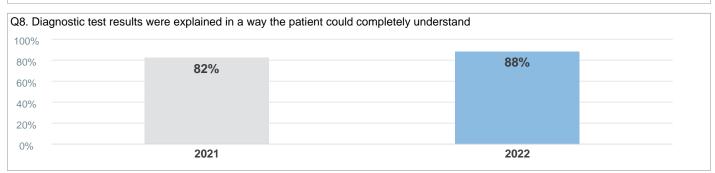


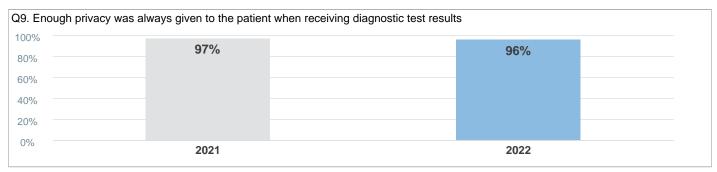


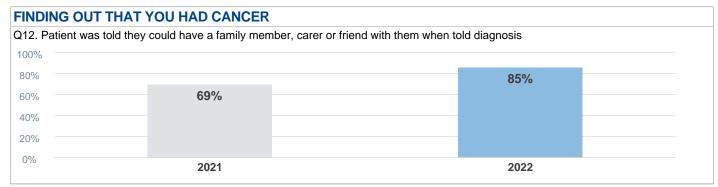


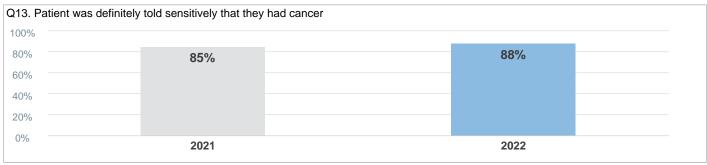


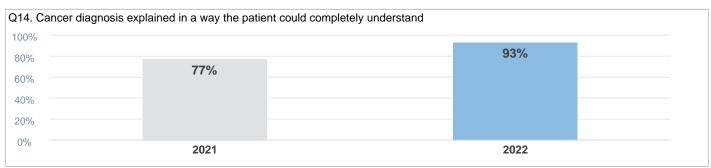


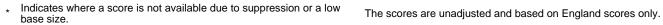




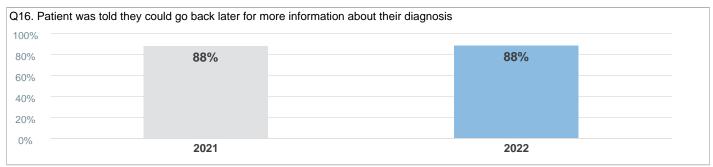






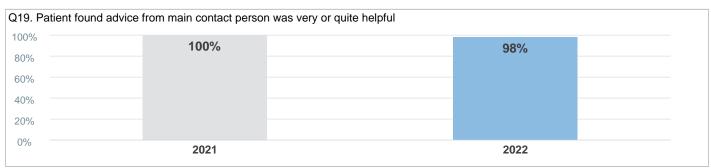


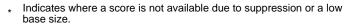


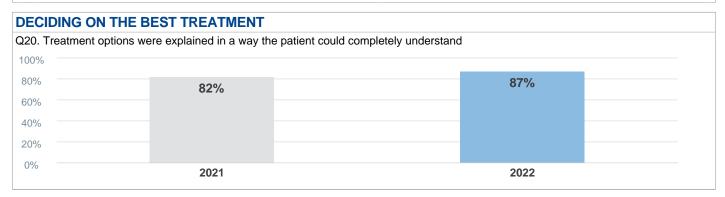




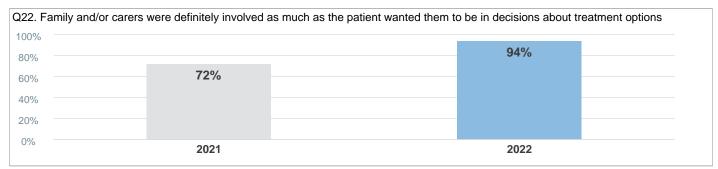




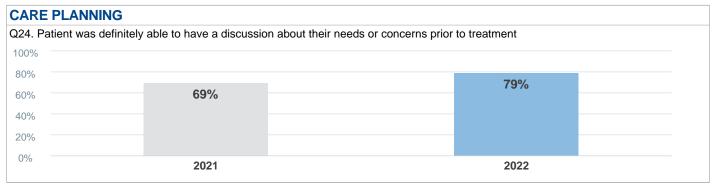


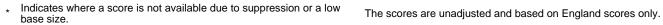


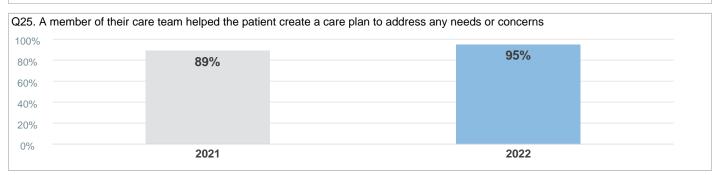




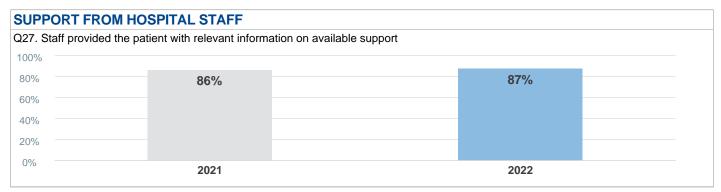


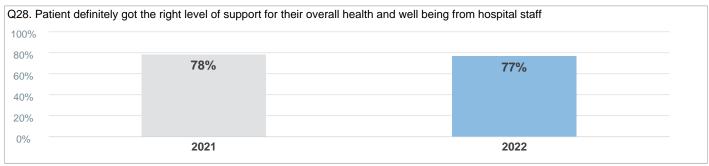




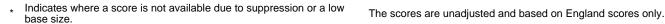


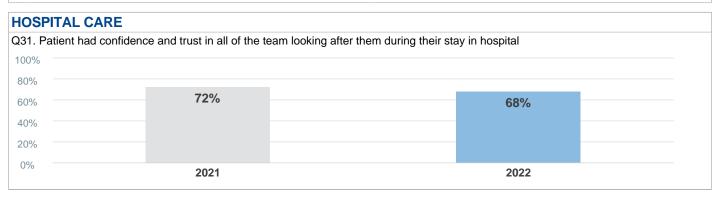




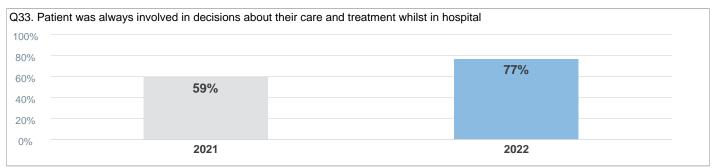




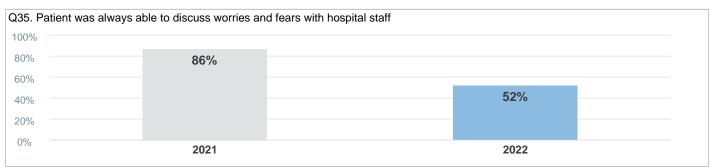




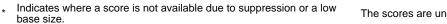


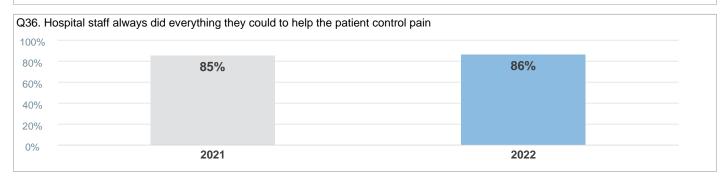


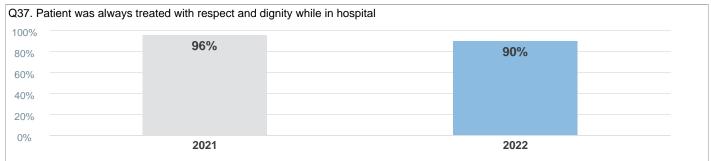


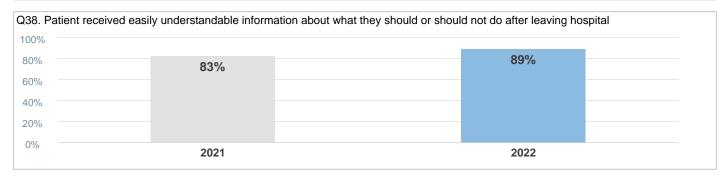


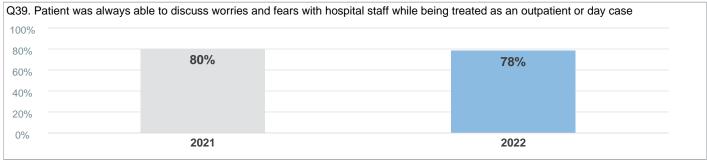
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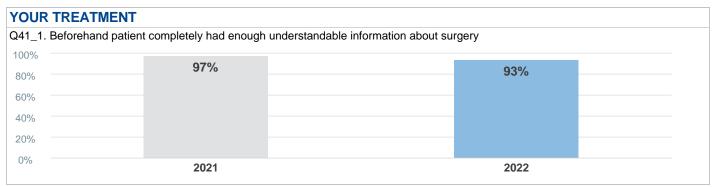


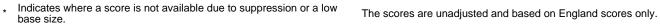


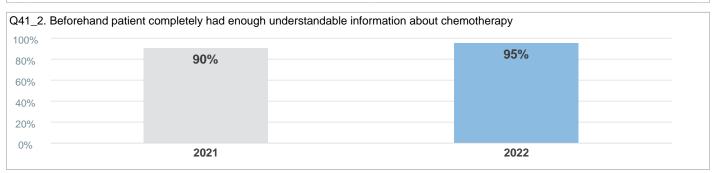


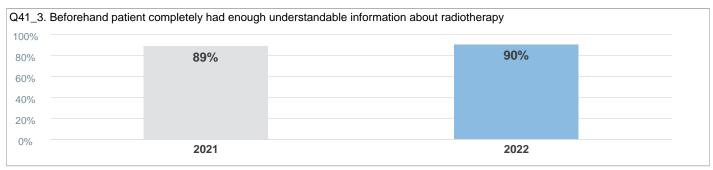


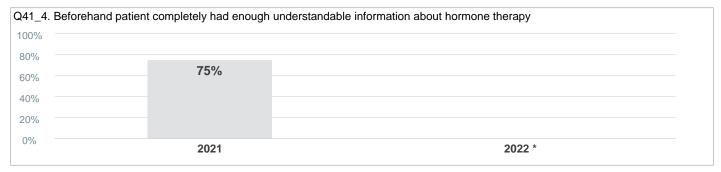


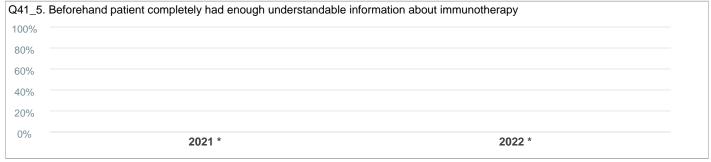




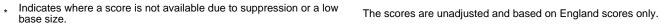


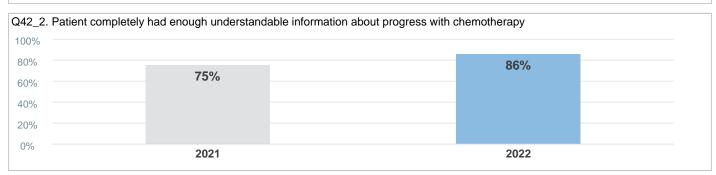


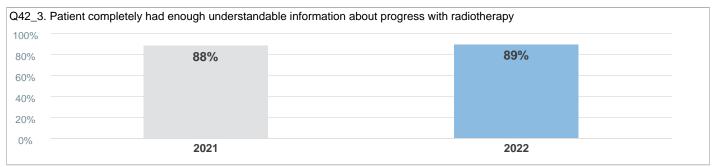


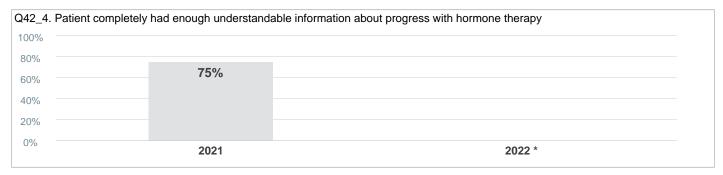


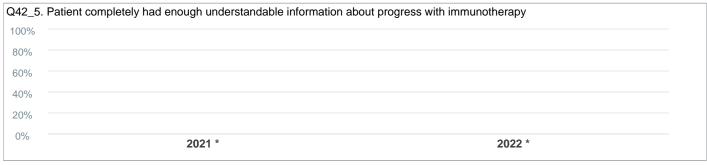


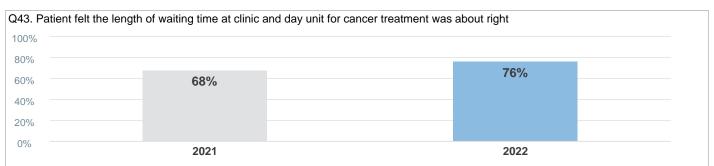




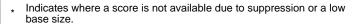


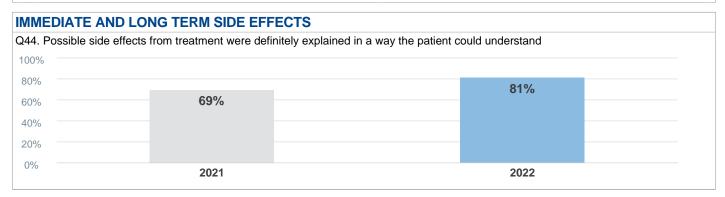




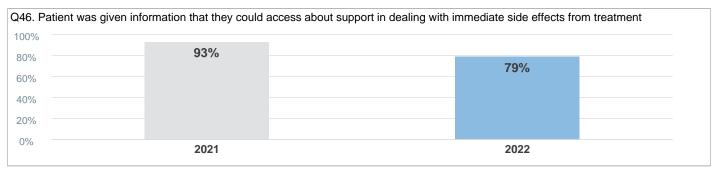


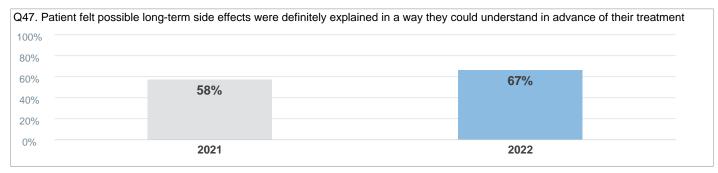
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