

Cancer Patient Experience Survey

2023 Results

South Yorkshire and Bassetlaw Cancer Alliance

Published July 2024

Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

Contents

xecutive summary	3
troduction	4
lethodology	4
nderstanding the results	5
urther information	6
esponse rate	8
xpected range charts	10
omparability tables	14
umour group tables	18
ge group tables	23
ale/Female/Non-binary/Other tables	27
thnicity tables	32
/ID quintile tables	36
ong-term condition status tables	40
ear on year charts	44
rust expected range summary	57

Executive summary

Questions above expected range

	Case mix adjusted scores			
	2023 score	Lower expected range	Upper expected range	England score
Q17. Patient had a main point of contact within the care team	94%	89%	93%	91%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	75%	66%	74%	70%

Questions below expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q7. Patient felt the length of time waiting for diagnostic test results was about right	74%	75%	81%	78%

Introduction

The National Cancer Patient Experience Survey 2023 is the thirteenth 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 undertaken by Picker on behalf of NHS England and it 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 2023 survey involved 132 NHS Trusts. Out of 121,121 people, 63,428 people responded to the survey, yielding a response rate of 52%.

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 2023. The fieldwork for the survey was undertaken between November 2023 and February 2024.

As in the previous eight 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.

Note on question comparability

The questionnaire was redeveloped for the 2021 National Cancer Patient Experience Survey. Year on year comparisons between 2021, 2022 and 2023 are included in this report for most questions. A review of the questionnaire in 2023 saw four changes being made:

- The question text for Q23 and Q42 were amended. These questions are no longer deemed comparable to 2021 and 2022.
- The long-term condition question (Q67) was amended to include "Autism or autism spectrum condition" as a response option. And the "Neurological condition" answer option was updated to include an example condition changing it to "Neurological condition, such as epilepsy". These changes see the answer option "Neurological condition, such as epilepsy" as no longer being deemed comparable to 2021 and 2022.
- The ethnic group question (Q71) was amended to include "Roma" as an answer option. The ethnic group question is still deemed comparable to 2021 and 2022.

How Alliance results are generated

Alliance results are derived using the post code of each patient, rather than by mapping trust results to alliances. This mapping is achieved using lookup files released by the Office for National Statistics.

Alliance results therefore reflect the experience of people referred from within the geographical footprint.

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 an Alliance 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 Alliance. Case-mix 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%.

In 2022, 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 and is now scored as negative.

Statistical significance

In the reporting of 2023 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 Alliance, the results are not shown for that question for that Alliance.

For Alliances 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** Alliance has a score suppressed. If this happens, we will suppress another Alliance's results (both the Alliance level and sub-group 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 Alliance.

The same rule applies to groups in each sub-group breakdown. For example, if only one Alliance has the 85+ age group suppressed for Q25 we will need to suppress another Alliance'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 Alliance scored for each question in the survey compared with England results. It is aimed at helping individual Alliances 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 Alliance.

Alliances 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 Alliance performs better than what Alliances 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 Alliance's size and demographics.

Comparability tables

The comparability tables show the 2022 and 2023 unadjusted scores for this Alliance for each scored question. The Change 2022-2023 and Change overall columns show whether the scores show a

Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

statistically significant variation between years. This is shown between 2022-2023 and as an overall between 2021-2023. An upwards arrow indicates a statistically significant increase, a downwards arrow indicates a statistically significant decrease and no arrow indicates no statistically significant change.

The adjusted 2023 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 group, Male/Female/Non-binary/Other, age, IMD quintile, long-term condition status and ethnicity breakdowns. Unadjusted scores for the same sub-group across different Alliances may not be comparable, as they do not account for the impact that differing patient populations might have on results.

Tumour group tables

The tumour group 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 three columns representing the unadjusted scores of the last three years (2021, 2022 and 2023) for each scored question.

Trust expected range summary

The number of scored questions that fell below, within and above the expected range for each trust within the alliance.

National level and England level data

In some cases (343 respondents in 2023), patients from outside England (from Wales, Scotland, Northern Ireland, the Channel Islands or the Isle of Man) are referred to English NHS Trusts for treatment. These patients are described as 'Non-England' in other reports.

Overall response rate at response rate sections shows national level counts and response rate. For Cancer Alliances and its comparison at comparability tables section, all data is presented at the England level.

Further information

Integrated Care Board data is not included in this version of the report. Integrated Care Board results will be published at a later date. Contact: england.insight-queries@nhs.net.

Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

This research was carried out in accordance with the international standard for organisations conducting market and social research (accreditation to ISO20252:2019; certificate number GB08/74322). Our statistical practice is regulated by the Office for Statistics Regulation (OSR). OSR sets the standards of trustworthiness, quality, and value in the Code of Practice for Statistics that all producers of official statistics should adhere to. You are welcome to contact us directly with any comments about how we meet these standards. Alternatively, you can contact OSR by emailing regulation@statistics.gov.uk or via the OSR website.

For more information on the methodology, please see the Technical Document. It can be viewed along with the 2023 questionnaire and survey guidance on the website at www.ncpes.co.uk. For all other outputs at Alliance level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response rate

Overall response rate

1,562 patients responded out of a total of 3,015 patients, resulting in a response rate of 52%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	3,252	3,015	1,562	52%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	1,278
Online	282
Phone	2
Translation service	0
Total	1,562

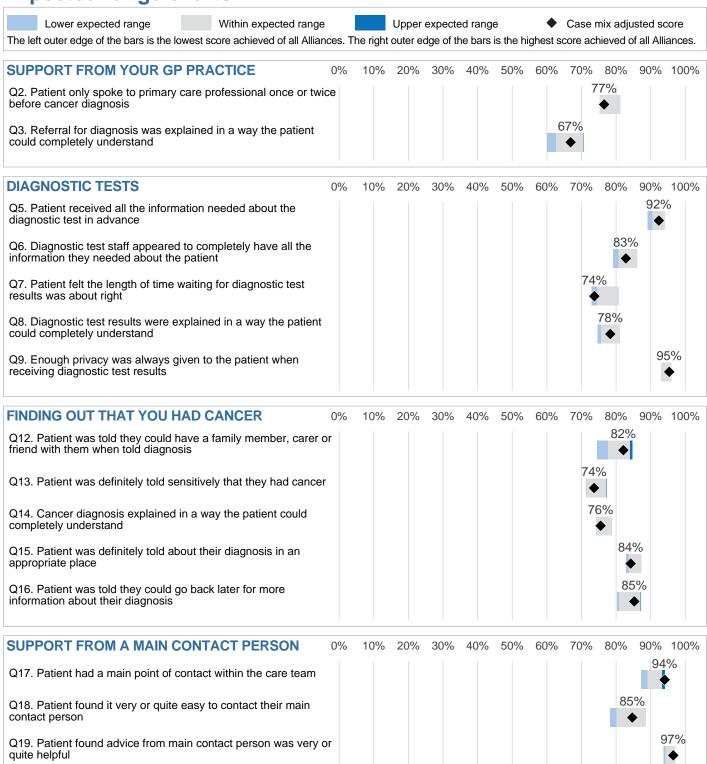
Respondents by tumour group

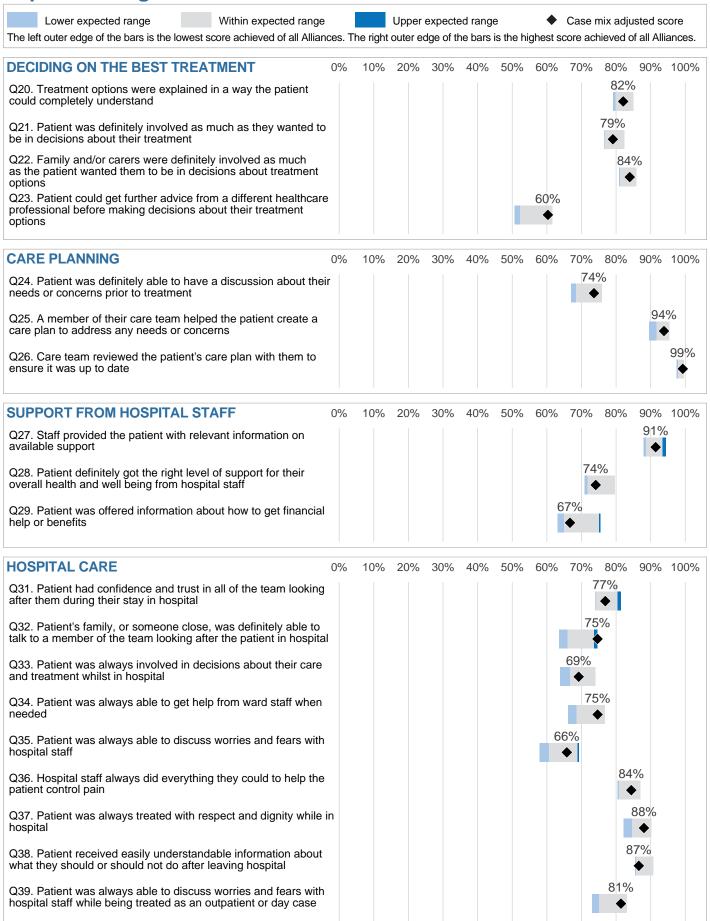
	Number of respondents
Brain / CNS	6
Breast	414
Colorectal / LGT	203
Gynaecological	36
Haematological	292
Head and neck	47
Lung	69
Prostate	158
Sarcoma	9
Skin	60
Upper gastro	81
Urological	110
Other	77
Total	1,562

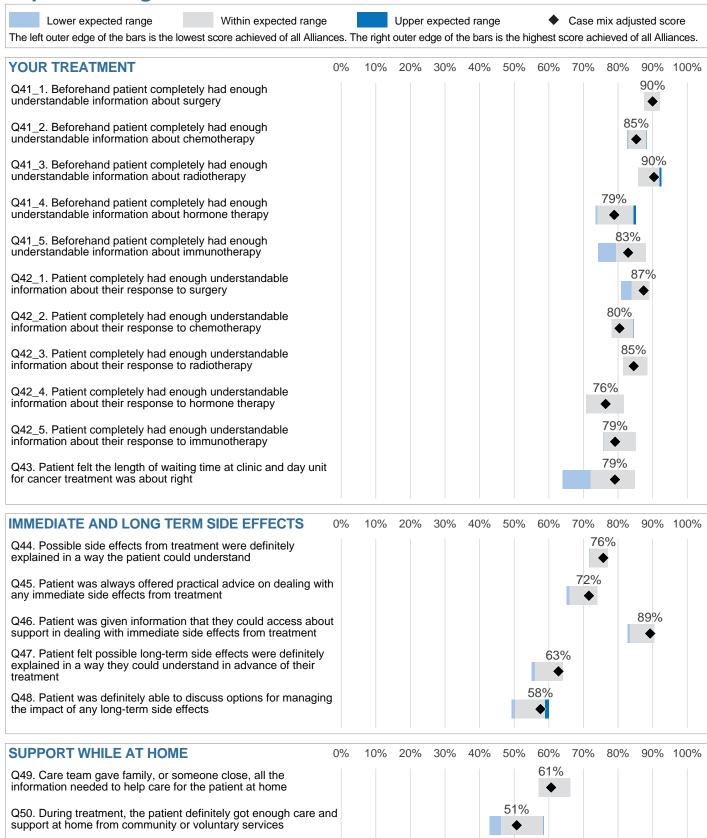
Respondents by ethnicity

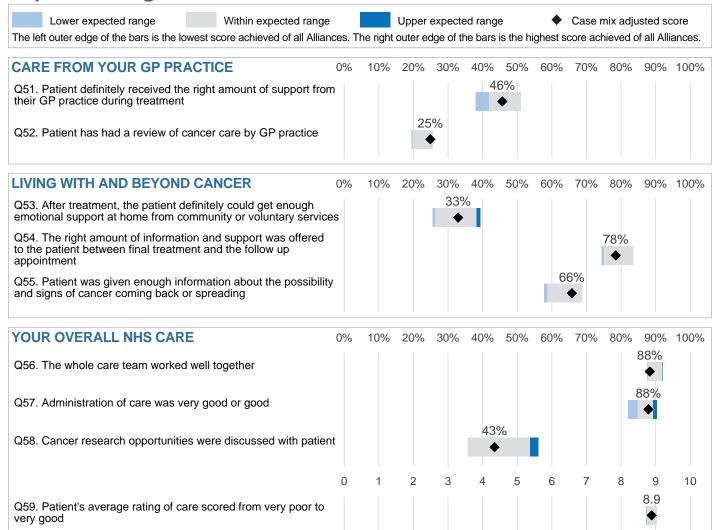
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,386
Irish	8
Gypsy or Irish Traveller	*
Roma	*
Any other White background	23
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	10
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	I
African	10
Caribbean	6
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	*
Any other ethnic group	*
Not given	ı
Not given	94
Total	1,562

^{*} indicates the count is not shown due to suppression









Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

Comparability tables

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

▲ or **▼**

Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).

Adjusted Score below Lower Expected Range

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

**	No score	available	for 2022.
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	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	535	76%	719	78%			77%	75%	81%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	778	64%	976	66%			67%	63%	71%	67%	

	Unadjusted scores							Case mix adjusted scores			
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q5. Patient received all the information needed about the diagnostic test in advance	875	91%	1181	92%			92%	91%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	917	85%	1271	83%			83%	81%	86%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	924	78%	1276	75%		•	74%	75%	81%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	926	76%	1285	79%			78%	76%	81%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	925	95%	1279	95%			95%	93%	96%	95%	

	Unadjusted scores							Case mix adjusted scores			
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	1067	76%	1458	82%	A	A	82%	78%	84%	81%	
Q13. Patient was definitely told sensitively that they had cancer	1127	73%	1532	74%			74%	72%	77%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	1131	76%	1537	76%			76%	75%	79%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	1132	85%	1540	84%			84%	84%	87%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	1007	84%	1394	86%			85%	81%	87%	84%	

	Unadjusted scores						Case n			
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q17. Patient had a main point of contact within the care team	1100	94%	1490	94%			94%	89%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	931	84%	1295	85%			85%	80%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	977	95%	1333	97%			97%	94%	97%	96%

Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

Comparability tables

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▲ or ▼

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

Adjusted Score above Upper Expected Range

**	No score available for 2022.
	INO Score available for 2022.

			Unadjust	ed score	es		Case m			
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	1069	82%	1465	82%			82%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1122	80%	1515	79%			79%	77%	82%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	957	79%	1326	84%	•	•	84%	81%	86%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	871	61%			60%	52%	62%	57%

			Unadjus	ted score	Case n					
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	1013	70%	1401	74%			74%	69%	76%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	601	93%	883	94%			94%	92%	95%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	471	99%	695	99%			99%	98%	100%	99%

			Unadjust	ted score	Case n					
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q27. Staff provided the patient with relevant information on available support	966	91%	1351	92%			91%	89%	93%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1128	77%	1534	75%			74%	72%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	664	65%	929	67%			67%	65%	75%	70%

Comparability tables

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

Adjusted Score above Upper Expected Range

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available due to suppression or a
low base size.

** No score available for 2022.

case

			Unadjust	ted score	es		Case n			
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	444	81%	654	78%			77%	74%	81%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	361	69%	551	75%		A	75%	66%	74%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	432	73%	640	69%			69%	67%	74%	70%
Q34. Patient was always able to get help from ward staff when needed	435	76%	638	75%			75%	69%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	425	69%	615	67%			66%	61%	69%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	388	85%	559	85%			84%	81%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	443	91%	646	88%			88%	85%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	424	90%	636	87%			87%	86%	91%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day	1002	81%	1380	82%			81%	75%	83%	79%

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	565	88%	697	90%			90%	88%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	531	85%	743	85%			85%	83%	88%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	317	89%	396	90%			90%	86%	92%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	196	74%	239	79%			79%	74%	84%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	162	81%	283	83%			83%	79%	88%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	696	88%			87%	84%	89%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	740	81%			80%	78%	84%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	393	85%			85%	81%	89%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	232	76%			76%	71%	82%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	280	79%			79%	76%	85%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1098	76%	1478	79%			79%	72%	85%	78%

Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

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Adjusted Score below Lower Expected Range

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

Adjusted Scor Expected Ran

			Unadjust	ed score	es		Case m	nix adjuste	d scores	
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	1067	74%	1434	76%			76%	72%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1000	71%	1361	72%			72%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	824	89%	1121	89%			89%	83%	90%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	1007	60%	1371	64%			63%	56%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	884	54%	1223	58%			58%	50%	59%	55%

			Unadjust	ted score	Case n					
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	778	57%	1078	61%		A	61%	57%	66%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	495	52%	636	51%			51%	46%	58%	52%

			Unadjust	ted score	Case m					
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	645	43%	893	45%			46%	42%	51%	46%
Q52. Patient has had a review of cancer care by GP practice	1078	20%	1448	25%	A	A	25%	20%	26%	23%

			Unadjus	ed score	s		Case n			
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	294	33%	342	32%			33%	26%	38%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	544	76%	649	78%			78%	75%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	900	63%	1196	66%			66%	59%	69%	64%

			Unadjust	ted score	es		Case n			
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q56. The whole care team worked well together	1068	90%	1459	88%		•	88%	88%	92%	90%
Q57. Administration of care was very good or good	1103	87%	1514	88%			88%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	629	45%	877	44%			43%	36%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	1088	8.9	1494	8.9			8.9	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	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	*	93%	75%	70%	62%	90%	60%	73%	*	87%	69%	74%	75%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	82%	65%	54%	51%	54%	52%	70%	*	76%	52%	59%	81%	66%

DIAGNOSTIC TESTS							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q5. Patient received all the information needed about the diagnostic test in advance	*	94%	94%	94%	91%	90%	90%	89%	*	96%	93%	90%	97%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	83%	85%	82%	85%	85%	76%	85%	*	85%	79%	74%	85%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	70%	80%	81%	84%	73%	87%	67%	*	75%	73%	70%	66%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	79%	79%	83%	80%	78%	84%	75%	*	79%	76%	71%	84%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	97%	93%	97%	97%	90%	94%	95%	*	98%	90%	96%	92%	95%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	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	*	87%	84%	94%	79%	82%	84%	84%	*	77%	81%	70%	87%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	79%	78%	78%	72%	68%	69%	73%	*	76%	67%	61%	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	76%	79%	83%	70%	79%	74%	78%	*	84%	71%	71%	78%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	88%	84%	92%	87%	89%	81%	80%	*	88%	70%	78%	91%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	*	91%	85%	92%	86%	84%	74%	89%	*	89%	72%	77%	84%	86%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	up					
	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	*	99%	91%	100%	94%	91%	89%	90%	*	95%	96%	95%	96%	94%
Q18. Patient found it very or quite easy to contact their main contact person	*	87%	83%	88%	87%	83%	86%	74%	*	96%	92%	75%	83%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	98%	97%	97%	98%	96%	92%	*	98%	99%	96%	99%	97%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	80%	86%	97%	85%	74%	81%	80%	*	84%	83%	81%	78%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	79%	83%	89%	79%	76%	75%	75%	*	85%	75%	78%	79%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	80%	81%	97%	85%	86%	91%	83%	*	86%	84%	83%	86%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	66%	65%	67%	63%	48%	42%	49%	*	73%	63%	63%	61%	61%

CARE PLANNING							Tumo	ur gro	up					
	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	*	75%	75%	89%	78%	77%	70%	66%	*	80%	65%	68%	81%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	96%	100%	94%	100%	91%	90%	*	100%	92%	95%	98%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	99%	98%	100%	99%	100%	100%	100%	*	100%	100%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	93%	92%	97%	88%	93%	85%	95%	*	96%	93%	88%	94%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	72%	74%	80%	79%	72%	75%	72%	*	82%	74%	73%	80%	75%
Q29. Patient was offered information about how to get financial help or benefits	*	71%	66%	80%	69%	72%	56%	60%	*	63%	68%	56%	73%	67%

HOSPITAL CARE							Tumo	our gro	up					
	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	*	66%	78%	89%	81%	78%	78%	91%	*	67%	70%	83%	74%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	70%	72%	75%	82%	73%	65%	77%	*	64%	73%	81%	79%	75%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	65%	65%	80%	74%	75%	59%	82%	*	60%	61%	73%	64%	69%
Q34. Patient was always able to get help from ward staff when needed	*	71%	71%	81%	87%	68%	69%	73%	*	67%	66%	81%	76%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	54%	62%	83%	79%	74%	58%	75%	*	50%	53%	71%	70%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	85%	81%	92%	85%	72%	85%	90%	*	100%	83%	87%	88%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	82%	88%	96%	91%	81%	89%	88%	*	87%	87%	95%	86%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	91%	80%	89%	89%	88%	88%	94%	*	80%	89%	89%	79%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	77%	83%	88%	79%	78%	83%	82%	*	94%	84%	88%	91%	82%

YOUR TREATMENT							Tumo	our gro	up					
	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	*	92%	89%	83%	90%	86%	91%	83%	*	92%	89%	88%	100%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	82%	86%	*	89%	79%	88%	91%	*	*	82%	75%	94%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	92%	90%	*	92%	79%	94%	85%	*	*	80%	*	94%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	76%	*	*	*	*	*	84%	*	*	*	*	77%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	81%	77%	*	83%	*	90%	*	*	86%	*	84%	86%	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	90%	85%	82%	90%	85%	93%	72%	*	92%	89%	93%	84%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	75%	80%	*	86%	79%	71%	93%	*	*	79%	73%	81%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	89%	81%	*	75%	78%	79%	77%	*	*	75%	*	83%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	74%	*	*	*	*	*	82%	*	*	*	*	69%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	79%	72%	*	79%	*	78%	*	*	87%	*	81%	79%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	77%	82%	74%	76%	82%	88%	84%	*	75%	86%	79%	75%	79%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our gro	up					
	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%	79%	83%	75%	73%	69%	73%	*	85%	82%	78%	76%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	73%	71%	70%	73%	69%	73%	65%	*	87%	74%	70%	76%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	94%	88%	89%	82%	85%	86%	87%	*	93%	97%	88%	94%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	65%	62%	85%	62%	60%	56%	61%	*	69%	65%	60%	67%	64%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	58%	58%	74%	57%	58%	54%	55%	*	67%	56%	63%	68%	58%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	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	*	59%	62%	74%	63%	62%	57%	42%	*	77%	70%	61%	71%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	52%	42%	55%	52%	42%	47%	33%	*	75%	64%	60%	53%	51%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	50%	44%	57%	39%	37%	40%	44%	*	56%	33%	55%	49%	45%
Q52. Patient has had a review of cancer care by GP practice	*	25%	31%	37%	17%	23%	35%	28%	*	27%	21%	22%	27%	25%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	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	*	36%	25%	54%	28%	25%	28%	21%	*	*	59%	11%	50%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	79%	79%	79%	74%	71%	77%	74%	*	83%	85%	84%	84%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	62%	65%	72%	80%	60%	56%	58%	*	78%	62%	69%	68%	66%

YOUR OVERALL NHS CARE							Tumo	our gro	up					
	Brain / CNS Breast Colorectal / LGT Cynaecological Haematological Head and neck Lung Prostate Sarcoma Skin Upper gastro Urological Other												All	
Q56. The whole care team worked well together	*	89%	89%	89%	90%	84%	87%	85%	*	86%	83%	92%	92%	88%
Q57. Administration of care was very good or good	*	87%	90%	92%	92%	85%	88%	83%	*	88%	81%	89%	92%	88%
Q58. Cancer research opportunities were discussed with patient	*	34%	51%	40%	61%	52%	32%	35%	*	45%	40%	50%	39%	44%
Q59. Patient's average rating of care scored from very poor to very good	*	8.9	8.9	9.1	9.0	8.7	9.0	8.6	*	9.0	9.0	8.9	9.0	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	*	55%	71%	76%	79%	79%	79%	80%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	50%	69%	78%	71%	65%	62%	53%	66%

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	*	85%	88%	91%	94%	91%	93%	92%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	86%	72%	76%	82%	84%	86%	79%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	43%	51%	60%	66%	78%	84%	88%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	64%	57%	63%	77%	82%	84%	77%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	86%	92%	94%	95%	95%	96%	100%	95%

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	*	85%	62%	83%	79%	82%	87%	87%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	73%	54%	72%	69%	75%	81%	73%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	73%	55%	64%	72%	80%	80%	65%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	80%	67%	82%	82%	84%	89%	91%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	*	71%	79%	88%	85%	87%	87%	73%	86%

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	*	93%	92%	94%	95%	94%	95%	91%	94%
Q18. Patient found it very or quite easy to contact their main contact person	*	57%	85%	82%	87%	84%	86%	83%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	77%	97%	91%	97%	98%	97%	95%	97%

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%	63%	70%	82%	84%	87%	75%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	53%	63%	67%	78%	81%	85%	78%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	92%	66%	78%	81%	86%	88%	85%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	50%	55%	50%	64%	62%	65%	44%	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	*	75%	55%	61%	76%	75%	78%	70%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	92%	86%	88%	95%	95%	94%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	95%	99%	100%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	87%	90%	91%	94%	91%	92%	88%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	67%	51%	61%	72%	77%	81%	81%	75%
Q29. Patient was offered information about how to get financial help or benefits	*	54%	66%	72%	70%	64%	68%	58%	67%

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	*	*	79%	62%	72%	81%	84%	88%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	62%	67%	73%	77%	79%	76%	75%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	58%	48%	63%	76%	73%	88%	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	74%	67%	68%	78%	81%	94%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	50%	53%	62%	72%	71%	86%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	78%	73%	80%	90%	87%	85%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	79%	76%	87%	91%	90%	94%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	79%	82%	88%	90%	85%	88%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	86%	75%	70%	80%	84%	85%	80%	82%

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%	79%	89%	86%	94%	93%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	75%	83%	75%	83%	90%	88%	69%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	87%	84%	92%	91%	92%	91%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	60%	71%	83%	84%	78%	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	67%	88%	87%	83%	*	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	83%	79%	90%	84%	91%	89%	83%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	82%	71%	74%	80%	86%	80%	64%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	73%	84%	86%	86%	84%	70%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	38%	79%	76%	82%	74%	*	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	71%	83%	85%	78%	*	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	60%	65%	76%	76%	81%	82%	89%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	13				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%	74%	73%	77%	78%	75%	67%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	67%	53%	66%	74%	75%	72%	67%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	92%	90%	88%	91%	89%	89%	73%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	80%	54%	56%	64%	67%	64%	51%	64%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	67%	36%	47%	57%	64%	59%	56%	58%

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	*	71%	42%	48%	62%	62%	64%	64%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	28%	33%	50%	53%	57%	57%	51%

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	*	73%	39%	47%	46%	45%	45%	41%	45%
Q52. Patient has had a review of cancer care by GP practice	*	45%	21%	32%	22%	25%	27%	16%	25%

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	*	*	20%	42%	30%	30%	41%	20%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	65%	73%	80%	79%	82%	83%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	42%	44%	52%	64%	73%	69%	62%	66%

YOUR OVERALL NHS CARE			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	87%	90%	82%	88%	88%	91%	92%	88%
Q57. Administration of care was very good or good	*	75%	90%	84%	85%	89%	91%	89%	88%
Q58. Cancer research opportunities were discussed with patient	*	45%	44%	35%	42%	45%	48%	47%	44%
Q59. Patient's average rating of care scored from very poor to very good	*	8.6	8.6	8.5	8.9	9.0	9.0	8.9	8.9

SUPPORT FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	82%	75%	*	*	*	64%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	72%	62%	*	*	*	57%	66%	

DIAGNOSTIC TESTS			Male/Fema	ale/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	92%	92%	*	*	*	92%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	84%	*	*	*	81%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	73%	77%	*	*	*	74%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	79%	*	*	*	75%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	96%	*	*	*	94%	95%

FINDING OUT THAT YOU HAD CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	83%	*	*	*	82%	82%
Q13. Patient was definitely told sensitively that they had cancer	74%	74%	*	*	*	76%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	79%	*	*	*	73%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	86%	*	*	*	84%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	88%	*	*	*	88%	86%

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	95%	94%	*	*	*	90%	94%	
Q18. Patient found it very or quite easy to contact their main contact person	86%	84%	*	*	*	84%	85%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	98%	*	*	*	95%	97%	

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	81%	84%	*	*	*	79%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	80%	*	*	*	81%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	86%	*	*	*	89%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	59%	63%	*	*	*	67%	61%

CARE PLANNING		Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	72%	76%	*	*	*	83%	74%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	95%	*	*	*	94%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	100%	*	*	*	97%	99%		

SUPPORT FROM HOSPITAL STAFF		Male/Female/Non-binary/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	91%	94%	*	*	*	86%	92%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	77%	*	*	*	74%	75%	
Q29. Patient was offered information about how to get financial help or benefits	67%	68%	*	*	*	70%	67%	

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	71%	83%	*	*	*	80%	78%
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%	79%	*	*	*	92%	75%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	73%	*	*	*	81%	69%
Q34. Patient was always able to get help from ward staff when needed	69%	81%	*	*	*	71%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	58%	73%	*	*	*	84%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	87%	*	*	*	93%	85%
Q37. Patient was always treated with respect and dignity while in hospital	83%	92%	*	*	*	93%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	88%	*	*	*	86%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	86%	*	*	*	81%	82%

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%	90%	*	*	*	82%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	82%	89%	*	*	*	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	87%	*	*	*	100%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	76%	84%	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	84%	*	*	*	100%	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	86%	*	*	*	79%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	75%	86%	*	*	*	87%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	80%	*	*	*	94%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	73%	81%	*	*	*	*	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	74%	85%	*	*	*	100%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	82%	*	*	*	69%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	75%	78%	*	*	*	65%	76%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	75%	*	*	*	64%	72%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	89%	90%	*	*	*	80%	89%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	66%	*	*	*	61%	64%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	61%	*	*	*	53%	58%	

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	57%	67%	*	*	*	54%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	46%	55%	*	*	*	61%	51%

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	45%	47%	*	*	*	39%	45%
Q52. Patient has had a review of cancer care by GP practice	23%	26%	*	*	*	34%	25%

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%	33%	*	*	*	33%	32%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	83%	*	*	*	72%	78%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	64%	69%	*	*	*	71%	66%	

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	89%	88%	*	*	*	87%	88%
Q57. Administration of care was very good or good	88%	88%	*	*	*	89%	88%
Q58. Cancer research opportunities were discussed with patient	39%	50%	*	*	*	40%	44%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	*	*	*	8.6	8.9

SUPPORT FROM YOUR GP PRACTICE	E Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	*	*	*	*	71%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	*	*	64%	*	56%	66%

DIAGNOSTIC TESTS				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	*	93%	100%	*	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	*	80%	71%	*	82%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	*	73%	71%	*	74%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	*	80%	86%	*	75%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	93%	92%	*	94%	95%

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	83%	*	100%	65%	*	78%	82%
Q13. Patient was definitely told sensitively that they had cancer	74%	*	89%	65%	*	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	*	79%	76%	*	73%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	*	100%	76%	*	82%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	*	100%	88%	*	84%	86%

SUPPORT FROM A MAIN CONTACT PERSO	ON			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	94%	*	100%	100%	*	92%	94%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	84%	87%	*	84%	85%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	95%	100%	*	95%	97%

DECIDING ON THE BEST TREATMENT				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	82%	*	84%	88%	*	80%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	*	83%	76%	*	76%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	*	82%	80%	*	85%	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	61%	*	69%	46%	*	63%	61%	

CARE PLANNING	NING				Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All			
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	*	83%	63%	*	80%	74%			
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	93%	92%	*	91%	94%			
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	100%	100%	*	98%	99%			

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	92%	*	95%	94%	*	86%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	*	95%	65%	*	76%	75%
Q29. Patient was offered information about how to get financial help or benefits	67%	*	73%	58%	*	65%	67%

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

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	91%	*	*	82%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	*	64%	82%	*	88%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	100%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	*	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	*	*	*	*	100%	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	88%	*	100%	*	*	76%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	*	82%	64%	*	85%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	85%	*	*	*	*	86%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	*	*	*	*	*	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	78%	*	*	*	*	100%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	*	68%	88%	*	72%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	*	89%	76%	*	65%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	73%	*	74%	60%	*	68%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	*	89%	82%	*	84%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	64%	*	72%	64%	*	58%	64%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	*	61%	85%	*	53%	58%

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	62%	*	59%	54%	*	52%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	*	30%	42%	*	48%	51%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not given						
Q51. Patient definitely received the right amount of support from their GP practice during treatment	47%	*	36%	33%	*	32%	45%
Q52. Patient has had a review of cancer care by GP practice	25%	*	36%	25%	*	25%	25%

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	34%	*	*	*	*	25%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	*	*	*	*	74%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	*	53%	67%	*	65%	66%

YOUR OVERALL NHS CARE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	89%	*	94%	76%	*	85%	88%
Q57. Administration of care was very good or good	88%	*	89%	94%	*	89%	88%
Q58. Cancer research opportunities were discussed with patient	45%	*	40%	40%	*	34%	44%
Q59. Patient's average rating of care scored from very poor to very good	8.9	*	8.9	8.6	*	8.7	8.9

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	75%	80%	76%	77%	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	67%	66%	69%	70%	66%

DIAGNOSTIC TESTS			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	94%	93%	90%	90%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	83%	82%	82%	85%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	77%	79%	69%	75%	73%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	81%	83%	77%	74%	76%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	98%	97%	95%	95%	91%	95%

FINDING OUT THAT YOU HAD CANCER			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	81%	82%	81%	80%	82%
Q13. Patient was definitely told sensitively that they had cancer	79%	74%	72%	75%	67%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	79%	75%	74%	68%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	85%	84%	83%	79%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	87%	88%	86%	82%	85%	86%

SUPPORT FROM A MAIN CONTACT PERSON			IMD q			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q17. Patient had a main point of contact within the care team	95%	94%	93%	93%	95%	94%
Q18. Patient found it very or quite easy to contact their main contact person	85%	85%	83%	86%	84%	85%
Q19. Patient found advice from main contact person was very or quite helpful	98%	96%	97%	96%	96%	97%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	AII	
Q20. Treatment options were explained in a way the patient could completely understand	86%	83%	79%	81%	81%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	77%	79%	78%	80%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	84%	86%	84%	81%	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	70%	58%	62%	58%	54%	61%	

CARE PLANNING		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	76%	74%	76%	68%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	95%	94%	95%	91%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	99%	99%	100%	99%	99%

SUPPORT FROM HOSPITAL STAFF	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q27. Staff provided the patient with relevant information on available support	90%	96%	92%	90%	91%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	75%	73%	71%	76%	75%
Q29. Patient was offered information about how to get financial help or benefits	68%	68%	67%	58%	75%	67%

HOSPITAL CARE	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	82%	77%	72%	74%	82%	78%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	75%	73%	73%	78%	79%	75%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	75%	66%	69%	67%	68%	69%	
Q34. Patient was always able to get help from ward staff when needed	78%	73%	76%	74%	76%	75%	
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	69%	63%	72%	66%	67%	
Q36. Hospital staff always did everything they could to help the patient control pain	83%	87%	85%	85%	84%	85%	
Q37. Patient was always treated with respect and dignity while in hospital	86%	87%	89%	92%	90%	88%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	83%	89%	91%	84%	86%	87%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	84%	82%	82%	79%	80%	82%	

IMD quintile tables

YOUR TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	94%	90%	93%	84%	87%	90%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	89%	85%	83%	78%	85%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	94%	88%	95%	88%	84%	90%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	90%	88%	73%	76%	66%	79%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	88%	85%	83%	74%	83%	
Q42_1. Patient completely had enough understandable information about their response to surgery	88%	87%	91%	84%	90%	88%	
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	82%	79%	78%	79%	81%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	87%	78%	92%	84%	80%	85%	
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	92%	76%	70%	74%	68%	76%	
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	79%	86%	82%	72%	80%	79%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	79%	80%	80%	79%	78%	79%	

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	77%	79%	73%	74%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	76%	74%	69%	69%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	90%	89%	88%	89%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	68%	64%	64%	62%	57%	64%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	63%	62%	59%	51%	54%	58%

SUPPORT WHILE AT HOME		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	60%	65%	64%	56%	58%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	47%	59%	50%	44%	54%	51%

CARE FROM YOUR GP PRACTICE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	42%	43%	51%	48%	46%	45%
Q52. Patient has had a review of cancer care by GP practice	25%	24%	28%	23%	24%	25%

IMD quintile tables

LIVING WITH AND BEYOND CANCER			IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	34%	31%	37%	35%	18%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	78%	79%	77%	71%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	70%	68%	67%	63%	62%	66%

YOUR OVERALL NHS CARE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	88%	89%	88%	89%	89%	88%
Q57. Administration of care was very good or good	92%	88%	88%	83%	87%	88%
Q58. Cancer research opportunities were discussed with patient	40%	44%	46%	42%	50%	44%
Q59. Patient's average rating of care scored from very poor to very good	9.0	8.9	8.9	8.9	8.8	8.9

SUPPORT FROM YOUR GP PRACTICE		Long-term cor	dition status			
	Yes No Not given All					
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77%	78%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65% 71% 59%					

DIAGNOSTIC TESTS		Long-term con-	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	93%	93%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	84%	83%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	72%	77%	75%
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	76%	75%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	97%	94%	95%

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	82%	83%	80%	82%
Q13. Patient was definitely told sensitively that they had cancer	74%	74%	72%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	76%	72%	76%
Q15. Patient was definitely told about their diagnosis in appropriate place	84%	85%	81%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	85%	86%	86%

SUPPORT FROM A MAIN CONTACT PERSO	N Long-term condition status				
	Yes No Not given All				
Q17. Patient had a main point of contact within the care team	94%	95%	92%	94%	
Q18. Patient found it very or quite easy to contact their main contact person	84%	88%	80%	85%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	97%	96%	97%	

DECIDING ON THE BEST TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	81%	85%	83%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	79%	77%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	86%	81%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	60%	62%	69%	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	73%	74%	78%	74%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	95%	96%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	99%	96%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	Not given	All	
Q27. Staff provided the patient with relevant information on available support	90%	95%	90%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	74%	75%	75%
Q29. Patient was offered information about how to get financial help or benefits	66%	69%	71%	67%

HOSPITAL CARE		Long-term co	ndition 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	78%	78%	76%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	75%	73%	86%	75%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	68%	73%	69%
Q34. Patient was always able to get help from ward staff when needed	76%	76%	73%	75%
Q35. Patient was always able to discuss worries and fears with hospital staff	66%	66%	80%	67%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	86%	96%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	89%	94%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	88%	90%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	86%	80%	82%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	89%	85%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	87%	90%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	90%	100%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	73%	92%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	80%	89%	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	85%	82%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	79%	82%	85%	81%
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	83%	87%	91%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	77%	73%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	80%	77%	89%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	79%	73%	79%

IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	78%	69%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	75%	67%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	92%	89%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	66%	63%	64%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	60%	57%	58%

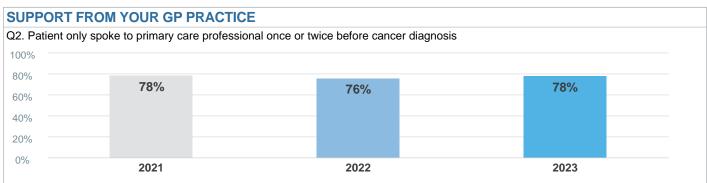
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	60%	66%	51%	61%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	48%	58%	53%	51%

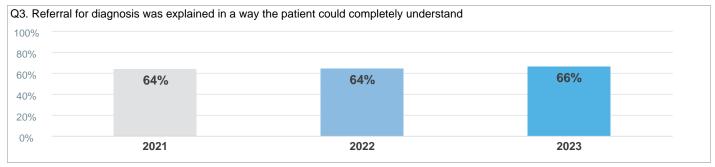
CARE FROM YOUR GP PRACTICE	Long-term condition status			
	Yes No Not given All			
Q51. Patient definitely received the right amount of support from their GP practice during treatment	46%	47%	37%	45%
Q52. Patient has had a review of cancer care by GP practice	25%	25%	23%	25%

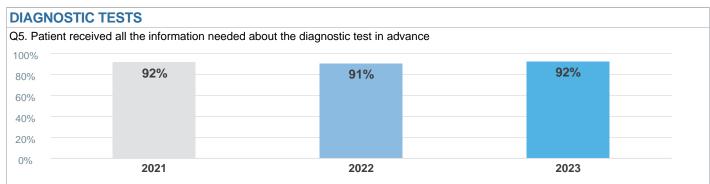
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	31%	26%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	84%	77%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	69%	71%	66%

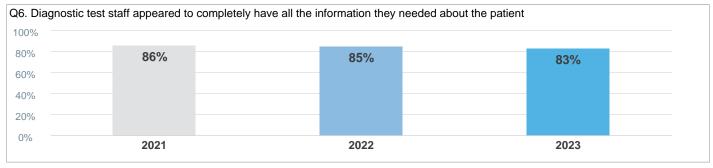
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	87%	93%	84%	88%
Q57. Administration of care was very good or good	87%	90%	88%	88%
Q58. Cancer research opportunities were discussed with patient	43%	48%	34%	44%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	8.8	8.9

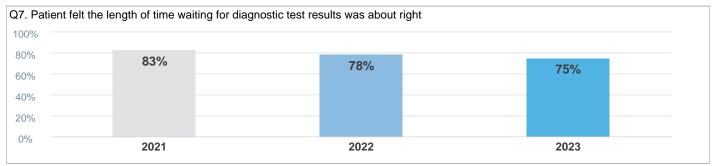






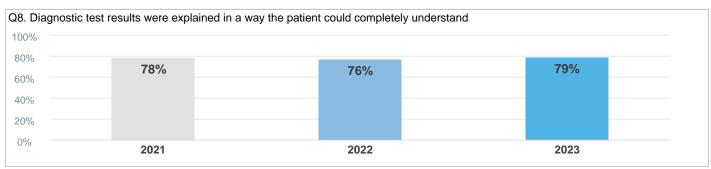


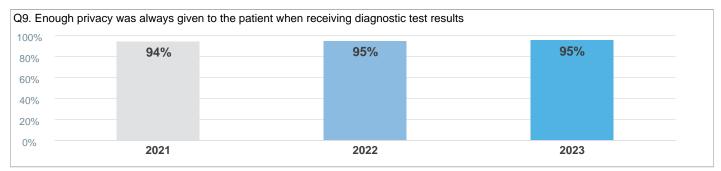


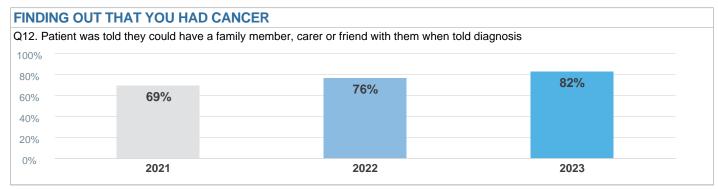


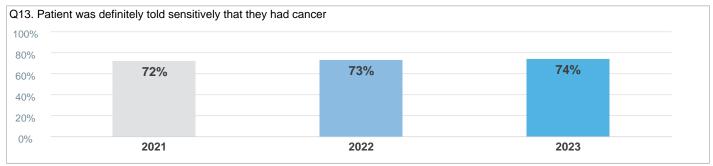


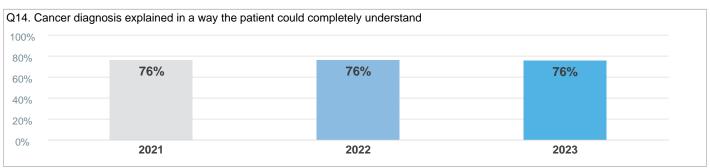
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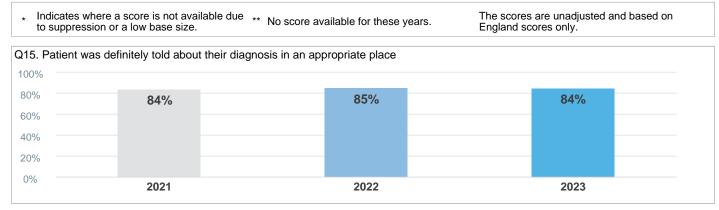


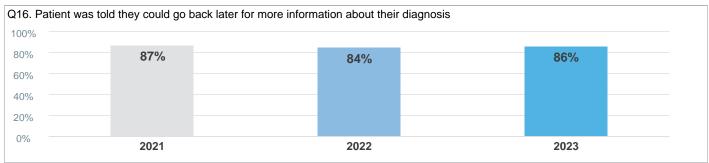


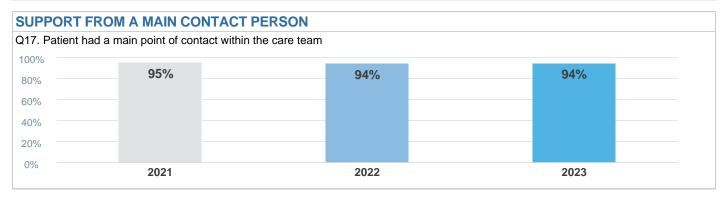


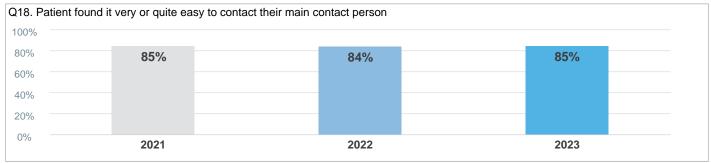


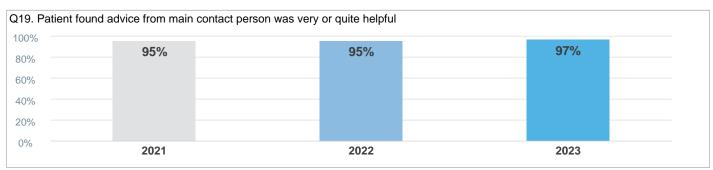




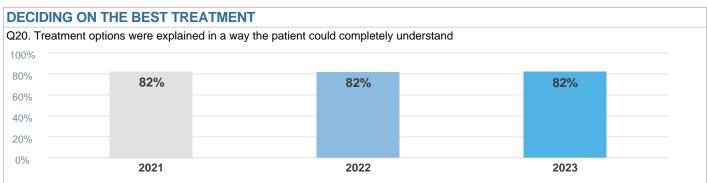


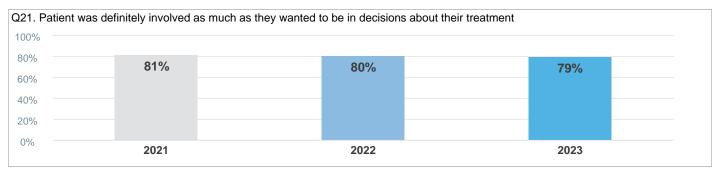


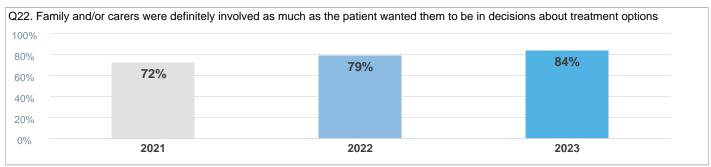


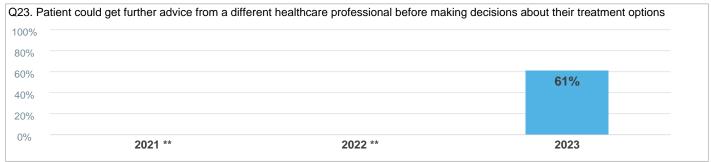


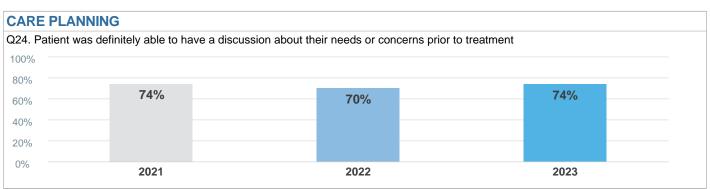




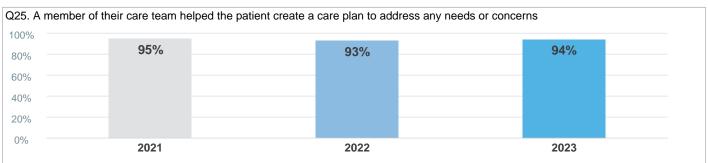


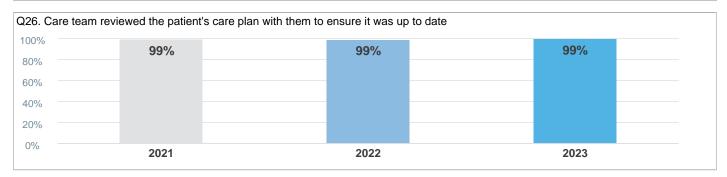


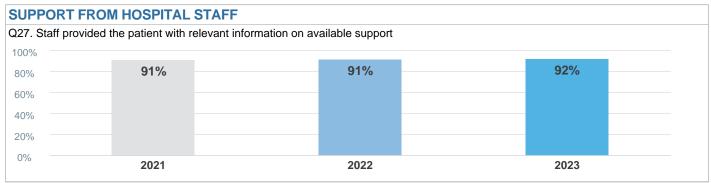


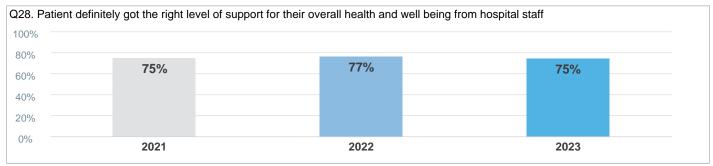


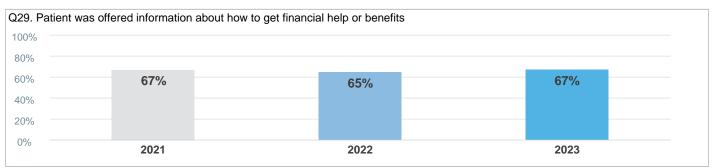




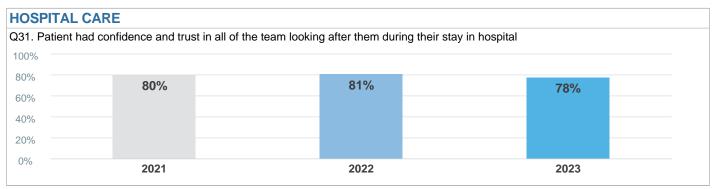


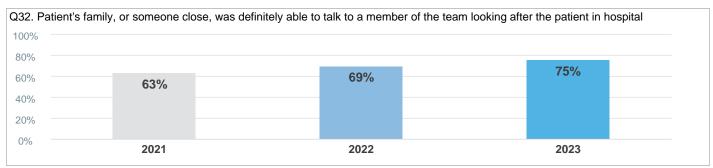


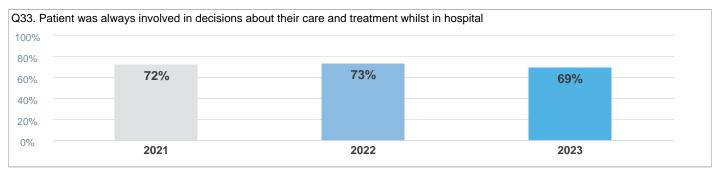


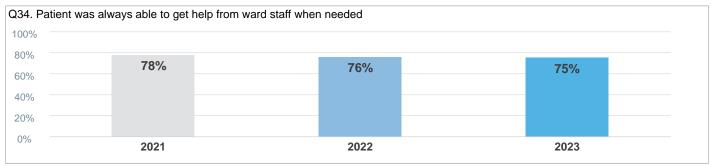


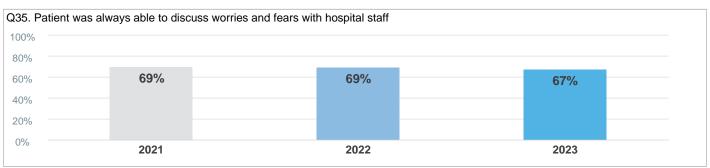


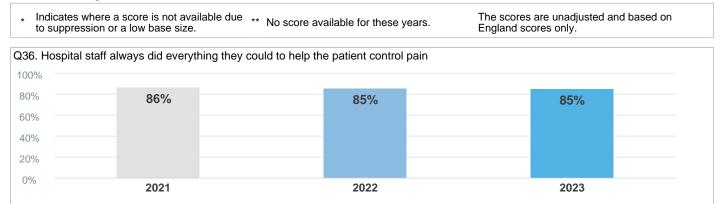


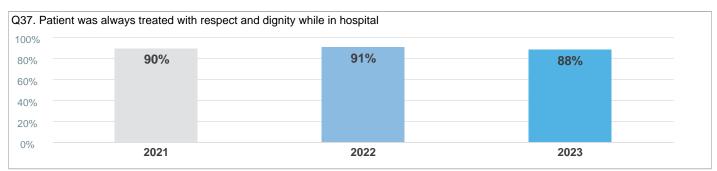


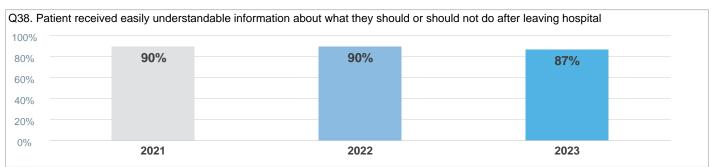


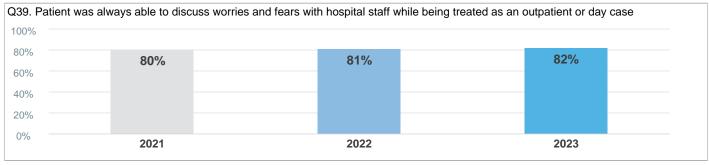


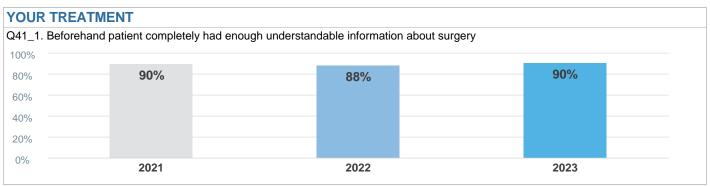




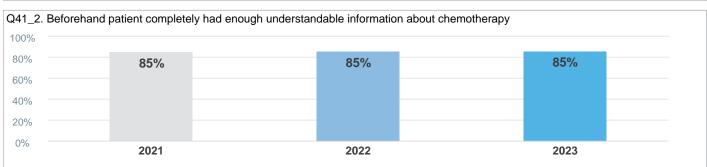


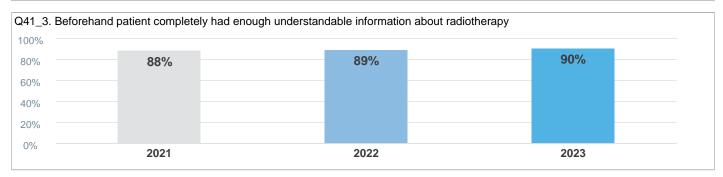


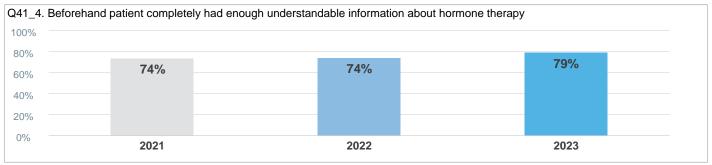


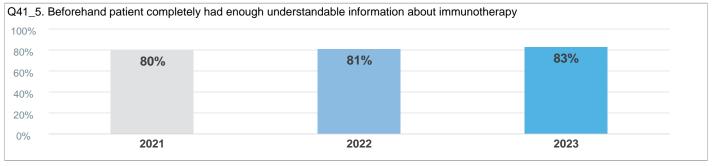


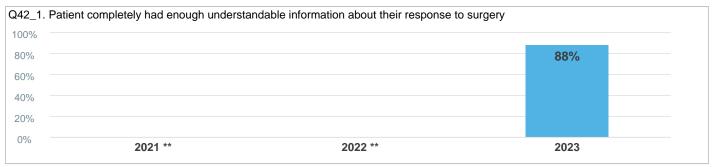












78%

2021

60% 40% 20% 0%



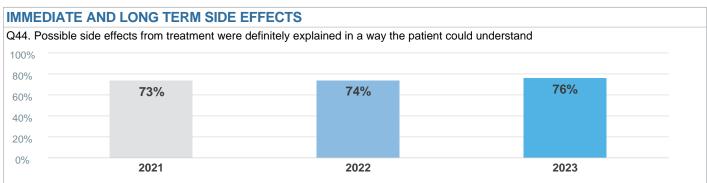
76%

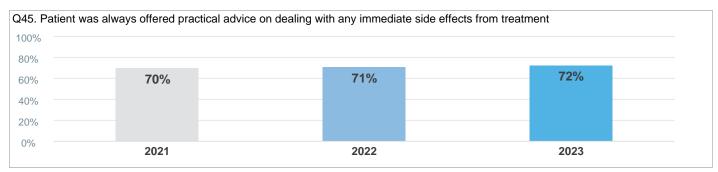
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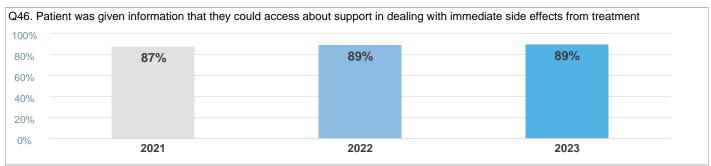
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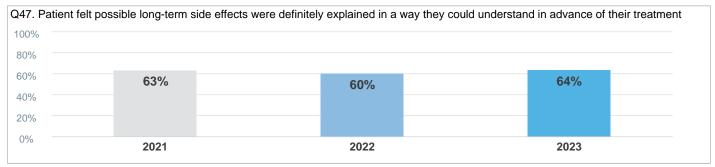
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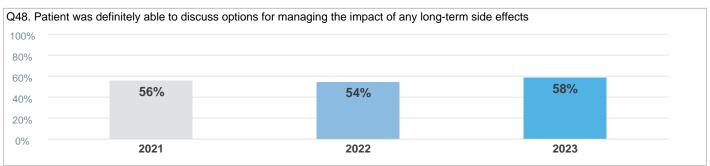




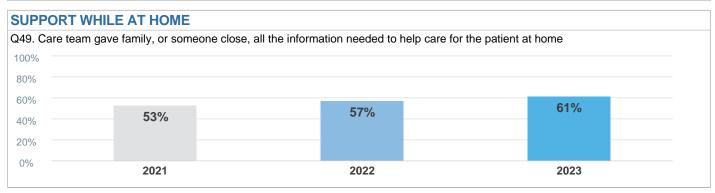


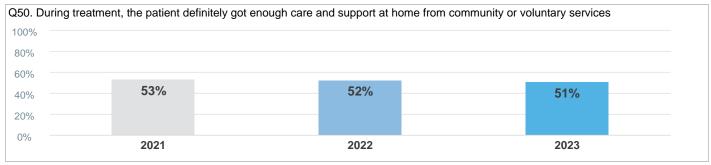


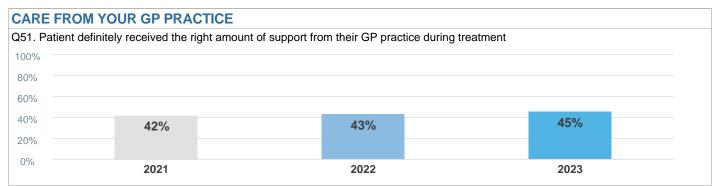


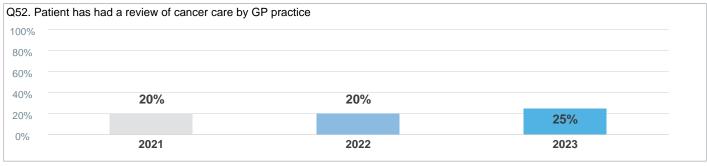


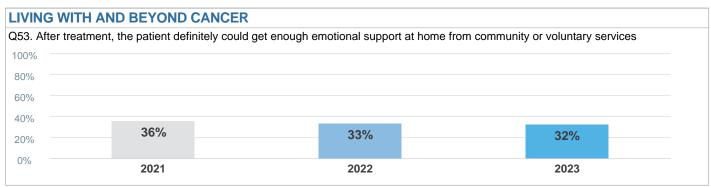




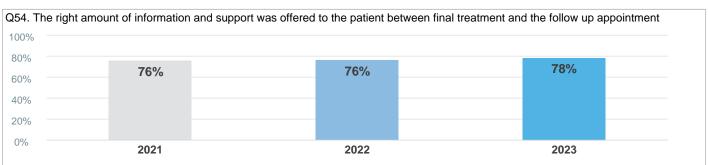


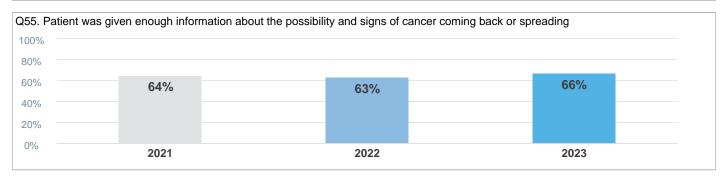


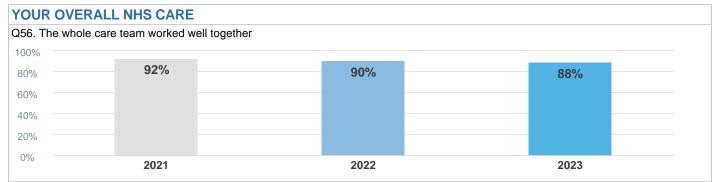


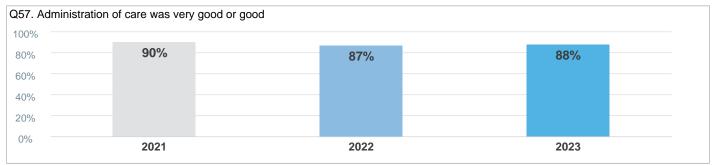


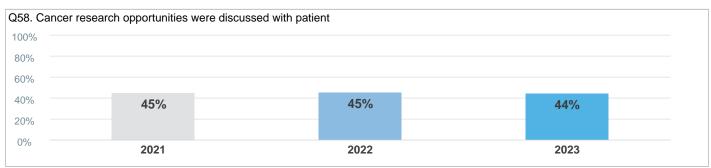




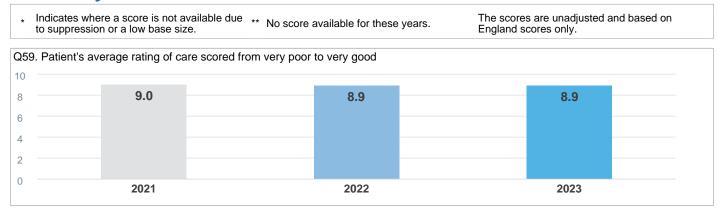








Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance



Cancer Patient Experience Survey 2023 South Yorkshire and Bassetlaw Cancer Alliance

Trust expected range summary

Data labele solution to the country of a country that fall below	Number of scores below the lower expected range	
Data labels relate to the number of scores that fell below, within and above the expected range	Number of scores between the upper and lower expected ranges	
	Number of scores above the upper expected range	

Trust		Expected range classification		
RFR	The Rotherham NHS Foundation Trust		49	10
RFF	Barnsley Hospital NHS Foundation Trust	1	51	7
RFS	Chesterfield Royal Hospital NHS Foundation Trust		55	6
RP5	Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust		56	5
RHQ	Sheffield Teaching Hospitals NHS Foundation Trust	3	55	3