

# **Cancer Patient Experience Survey**

2023 Results

# Isle of Wight NHS Trust

Published July 2024

The Cancer Patient Experience Survey is undertaken by Picker on behalf of NHS England

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### **Executive summary**

#### **Questions above expected range**

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	National score
Q19. Patient found advice from main contact person was very or quite helpful	99%	93%	99%	96%

#### **Questions below expected range**

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	National score
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	95%	96%	100%	99%
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	67%	68%	81%	74%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	48%	52%	68%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	46%	46%	63%	55%
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	50%	53%	70%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	39%	41%	64%	52%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	69%	69%	89%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	51%	55%	72%	64%
Q58. Cancer research opportunities were discussed with patient	22%	32%	58%	45%

### 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.

#### Case-mix adjustment

Both unadjusted and adjusted scores are presented in this report. Case-mix adjusted scores allow us to account for the impact that differing patient populations might have on results. By using the case-mix adjusted estimates we can obtain a greater understanding of how a Trust is performing given their patient population. The factors taken into account in this case-mix adjustment are Male/Female/Non-binary/Other, age, ethnicity, deprivation, and cancer type.

Unadjusted data should be used to see the actual responses from patients relating to the Trust. Casemix adjusted data, together with expected ranges, should be used to understand whether the results are significantly higher or lower than national results taking account of the patient mix.

#### Scoring methodology

Sixty-one questions from the questionnaire are scored as these questions relate directly to patient experience. For all but one question (Q59), the score shows the percentage of respondents who gave

the most favourable response to a question. For Q59, respondents rate their overall care on a scale of 0 to 10, of which the average was calculated for this question's score. The percentages in this report have been rounded to the nearest percentage point. Therefore, in some cases the figures do not appear to add up to 100%.

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 Trust, the results are not shown for that question for that Trust.

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

#### Additional suppression

Additional suppression happens if only **one** Trust has a score suppressed. If this happens, we will suppress another Trust's results (both the Trust level and 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 Trust.

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

#### **Understanding the results**

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

#### **Expected range charts**

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

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

#### **Comparability tables**

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

#### 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 the data.

#### National level data (England and Non-England) is used for:

- Response rate section
- National column in comparability tables section
- Sub-group tables section (Tumour group tables, Age group tables, Male/Female/Non-binary/Other tables, Ethnicity tables, IMD quintile tables and Long-term condition status tables)

#### England only level data is used for:

- Expected range charts section (as case-mix adjustment includes IMD data specific to England)
- Comparability tables section
- Year on year charts section.

### **Further information**

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

### **Response rate**

#### **Overall response rate**

185 patients responded out of a total of 311 patients, resulting in a response rate of 59%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	336	311	185	59%
National	129,231	121,121	63,438	52%

#### Respondents by survey type

	Number of respondents
Paper	155
Online	30
Phone	0
Translation service	0
Total	185

#### **Respondents by tumour group**

	Number of respondents
Brain / CNS	0
Breast	53
Colorectal / LGT	26
Gynaecological	8
Haematological	14
Head and neck	0
Lung	16
Prostate	15
Sarcoma	0
Skin	0
Upper gastro	7
Urological	29
Other	17
Total	185

### Respondents by ethnicity

	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	169
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	*
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	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	l
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	I
Not given	13
Total	185

\* indicates the count is not shown due to suppression

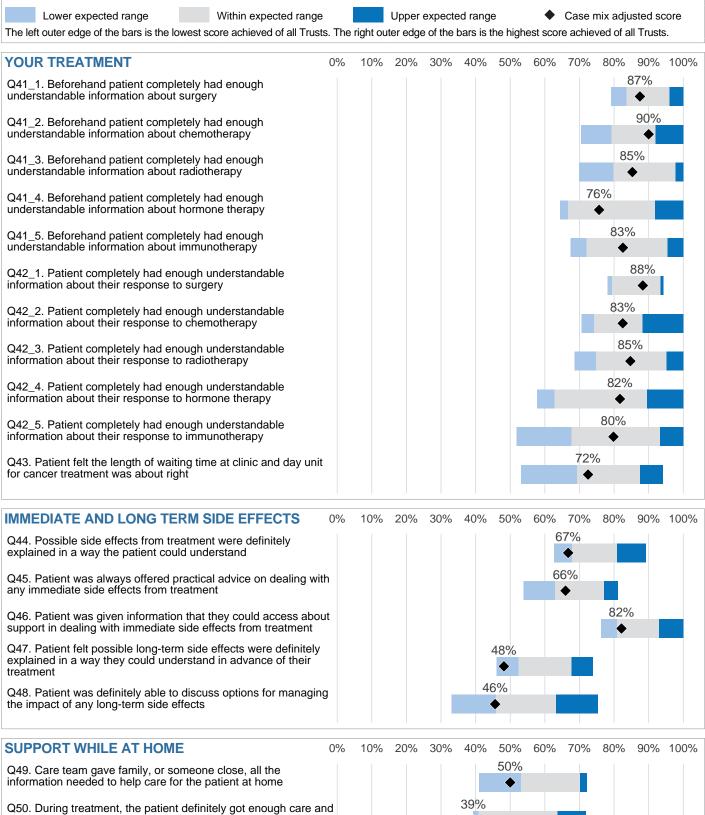
## Expected range charts

Lower expected range	Within expected range			Upper	expecte	ed range	Э	•	Case n	nix adju	sted sc	ore
The left outer edge of the bars is the lo	owest score achieved of all Trust	s. The	right ou	ter edge	e of the l	bars is t	he high	est scor	e achiev	ved of a	ll Trusts	6.
SUPPORT FROM YOUR GF	PRACTICE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q2. Patient only spoke to primary before cancer diagnosis	care professional once or twi	ce								80% ♦		
Q3. Referral for diagnosis was exp could completely understand	plained in a way the patient							6	67% ◆			
DIAGNOSTIC TESTS		0%	10%	20%	30%	40%	50%	60%	70%	80%		100%
Q5. Patient received all the inform diagnostic test in advance	ation needed about the										90%	
Q6. Diagnostic test staff appeared information they needed about the	I to completely have all the patient									8	6% ◆	
Q7. Patient felt the length of time v results was about right	waiting for diagnostic test									79% ♦		
Q8. Diagnostic test results were excould completely understand	xplained in a way the patient								7	7% ♦		
Q9. Enough privacy was always g receiving diagnostic test results	iven to the patient when										9	7% ◆
FINDING OUT THAT YOU H	IAD CANCER	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q12. Patient was told they could h friend with them when told diagnost	nave a family member, carer c sis	or								81% ♦		
Q13. Patient was definitely told se	nsitively that they had cancer								7	78% ♦		
Q14. Cancer diagnosis explained completely understand	in a way the patient could									78% ♦		
Q15. Patient was definitely told ab appropriate place	oout their diagnosis in an									8	37% ◆	
Q16. Patient was told they could g information about their diagnosis	o back later for more									8	€7% ◆	
SUPPORT FROM A MAIN C	ONTACT PERSON	0%	10%	20%	30%	40%	50%	60%	70%	80%		100%
Q17. Patient had a main point of c	contact within the care team										•	6% •
Q18. Patient found it very or quite contact person	easy to contact their main									81%		
Q19. Patient found advice from ma quite helpful	ain contact person was very c	or										99%

### Expected range charts

Lower expected rangeWithin expected rangeThe left outer edge of the bars is the lowest score achieved of all Trust		right ou	•••	•	ed range bars is t			Case r e achiev	,		
<ul> <li>DECIDING ON THE BEST TREATMENT</li> <li>Q20. Treatment options were explained in a way the patient could completely understand</li> <li>Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment</li> <li>Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options</li> <li>Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options</li> </ul>		10%	20%	30%	40%	50%	60% 60% ♦	70%	80% 80% ♦ 81% ♦ 82%		100%
CARE PLANNING Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment Q25. A member of their care team helped the patient create a care plan to address any needs or concerns Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	0%	10%	20%	30%	40%	50%	60%	70% 72% ◆	80%	90	100% 6% ◆ ■ 5%
SUPPORT FROM HOSPITAL STAFF Q27. Staff provided the patient with relevant information on available support Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff Q29. Patient was offered information about how to get financial help or benefits	0%	10%	20%	30%	40%	50%	60%	70% 71% ◆ 73%		90% 88%	100%
<ul> <li>HOSPITAL CARE</li> <li>Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital</li> <li>Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospita</li> <li>Q33. Patient was always involved in decisions about their care and treatment whilst in hospital</li> <li>Q34. Patient was always able to get help from ward staff when needed</li> <li>Q35. Patient was always able to discuss worries and fears with hospital staff</li> <li>Q36. Hospital staff always did everything they could to help the patient control pain</li> <li>Q37. Patient was always treated with respect and dignity while hospital</li> <li>Q38. Patient received easily understandable information about what they should or should not do after leaving hospital</li> <li>Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case</li> </ul>	in	10%	20%	30%	40%	50%		72% ♦ 6%	85		100%

### Expected range charts



support at home from community or voluntary services

### Expected range charts

Lower expected range Within expected range The left outer edge of the bars is the lowest score achieved of all Trust		right ou	Upper ( ter edge	•	•		est scor	Case r e achiev			
CARE FROM YOUR GP PRACTICE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	n				38% ◆						
Q52. Patient has had a review of cancer care by GP practice			20% ♦	ļ							
LIVING WITH AND BEYOND CANCER	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary service	es			32% ♦							
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment								69% ◆			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	y					51% ◆					
YOUR OVERALL NHS CARE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q56. The whole care team worked well together										88% ◆	
Q57. Administration of care was very good or good									84	%	
Q58. Cancer research opportunities were discussed with patier	nt		22% ◆								
	0	1	2	3	4	5	6	7	8	9	10
Q59. Patient's average rating of care scored from very poor to very good										€.8	

### **Comparability tables**

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

ra ▲ <sub>or</sub> ▼

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.	

	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	National score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	69	78%	81	80%			80%	69%	87%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	95	63%	111	67%			67%	58%	75%	67%

			Unadjus	ted score	Case n					
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q5. Patient received all the information needed about the diagnostic test in advance	122	90%	154	90%			90%	88%	97%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	128	84%	160	87%			86%	78%	89%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	129	78%	165	81%			79%	71%	84%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	130	76%	163	79%			77%	72%	85%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	130	96%	164	97%			97%	91%	98%	95%

			Unadjus	ted score	es		Case n			
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	National score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	148	71%	168	82%			81%	75%	87%	81%
Q13. Patient was definitely told sensitively that they had cancer	153	73%	181	78%			78%	68%	81%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	154	73%	180	79%			78%	71%	83%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	154	90%	183	88%			87%	80%	91%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	140	79%	154	87%			87%	78%	90%	84%

			Unadjust	ed score	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	National score
Q17. Patient had a main point of contact within the care team	145	94%	179	96%			96%	87%	96%	91%
Q18. Patient found it very or quite easy to contact their main contact person	130	79%	158	82%			81%	78%	91%	84%
Q19. Patient found advice from main contact person was very or quite helpful	132	94%	166	99%			99%	93%	99%	96%

### **Comparability tables**

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

ra ▲ <sub>or</sub> ▼

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.

			Unadjus	ted score	es		Case n			
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	National score
Q20. Treatment options were explained in a way the patient could completely understand	141	75%	175	81%			80%	77%	88%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	150	80%	181	81%			81%	74%	85%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	124	84%	164	82%			82%	78%	89%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	97	60%			60%	47%	67%	57%

			Unadjust	ted score	Case n					
	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	140	69%	160	73%			72%	65%	79%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	82	94%	110	95%			96%	89%	98%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	67	97%	89	96%			95%	96%	100%	99%

			Unadjust	ed 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	National score
Q27. Staff provided the patient with relevant information on available support	118	86%	155	88%			88%	86%	96%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	152	70%	182	72%			71%	69%	83%	76%
Q29. Patient was offered information about how to get financial help or benefits	90	63%	103	71%			73%	60%	80%	70%

### **Comparability tables**

Indicates where a score is not available due to suppression or a \* \*

▲ 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

	low base size.
**	No score available for 2022.

			Unadjus	ted score		Case r				
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	59	80%	72	85%			84%	68%	87%	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	47	60%	64	67%			67%	59%	81%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	59	68%	71	77%			77%	60%	81%	70%
Q34. Patient was always able to get help from ward staff when needed	58	79%	66	73%			72%	62%	84%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	56	70%	66	67%			66%	53%	76%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	50	88%	60	87%			85%	75%	93%	84%
Q37. Patient was always treated with respect and dignity while in hospital	59	93%	70	90%			89%	80%	95%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	57	84%	70	87%			86%	81%	96%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	138	77%	169	79%			78%	73%	85%	79%
			Unadjus	ted score		Case r				

			Unadjus	ted score	S		Case r			
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q41_1. Beforehand patient completely had enough understandable information about surgery	78	86%	92	88%			87%	84%	96%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	109	85%	117	91%			90%	79%	92%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	36	83%	48	85%			85%	80%	98%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	38	66%	40	78%			76%	67%	92%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	31	68%	38	84%			83%	72%	95%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	91	89%			88%	79%	93%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	117	83%			83%	74%	88%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	47	85%			85%	75%	95%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	39	82%			82%	63%	90%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	37	81%			80%	68%	93%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	150	87%	178	74%	▼	▼	72%	69%	88%	78%

### **Comparability tables**

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

C ▲ <sub>or</sub> ▼ <sup>Si</sup>C

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.

			Unadjus	ted score	es		Case n			
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	Nationa score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	149	69%	173	67%			67%	68%	81%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	142	63%	165	67%			66%	63%	77%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	118	79%	133	82%			82%	81%	93%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	138	52%	165	48%			48%	52%	68%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	111	45%	141	46%			46%	46%	63%	55%

			Unadjust	ed 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	National score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	95	49%	126	50%			50%	53%	70%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54	44%	74	39%			39%	41%	64%	52%

			Unadjust	ted score	es		Case n	nix adjuste	d scores	
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	National score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	79	41%	97	37%			38%	36%	56%	46%
Q52. Patient has had a review of cancer care by GP practice	143	17%	179	19%			20%	17%	29%	23%

			Unadjust	ted score	s		Case n	nix adjuste	d scores	
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	National score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	27	19%	39	31%			32%	18%	47%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	49	73%	67	69%			69%	69%	89%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	114	54%	138	50%			51%	55%	72%	64%

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
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	National score
Q56. The whole care team worked well together	140	87%	174	89%			88%	85%	94%	90%
Q57. Administration of care was very good or good	149	83%	179	84%			84%	82%	92%	87%
Q58. Cancer research opportunities were discussed with patient	88	22%	117	21%			22%	32%	58%	45%
Q59. Patient's average rating of care scored from very poor to very good	141	8.7	172	8.8			8.8	8.7	9.1	8.9

### **Tumour group tables**

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 cancers
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	94%	93%	*	*	*	70%	*	*	*	*	86%	*	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	91%	88%	*	*	*	18%	54%	*	*	*	70%	*	67%

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	*	93%	100%	*	80%	*	85%	100%	*	*	*	85%	93%	90%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	85%	100%	*	67%	*	86%	93%	*	*	*	88%	92%	87%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	79%	86%	*	58%	*	93%	71%	*	*	*	88%	81%	81%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	72%	91%	*	67%	*	64%	86%	*	*	*	84%	88%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	98%	100%	*	92%	*	100%	93%	*	*	*	96%	94%	97%

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 cancers
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	89%	96%	*	62%	*	77%	93%	*	*	*	70%	69%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	79%	85%	*	62%	*	94%	87%	*	*	*	68%	81%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	79%	92%	*	54%	*	87%	80%	*	*	*	81%	88%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	90%	96%	*	57%	*	100%	87%	*	*	*	86%	88%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	83%	86%	*	80%	*	100%	91%	*	*	*	79%	92%	87%

### **Tumour group tables**

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 cancers
Q17. Patient had a main point of contact within the care team	*	94%	100%	*	86%	*	100%	100%	*	*	*	89%	100%	96%
Q18. Patient found it very or quite easy to contact their main contact person	*	83%	85%	*	33%	*	73%	92%	*	*	*	90%	88%	82%
Q19. Patient found advice from main contact person was very or quite helpful	*	98%	100%	*	91%	*	100%	100%	*	*	*	100%	100%	99%

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 cancers
Q20. Treatment options were explained in a way the patient could completely understand	*	75%	92%	*	82%	*	79%	86%	*	*	*	86%	76%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	74%	83%	*	64%	*	81%	93%	*	*	*	82%	88%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	75%	91%	*	71%	*	79%	92%	*	*	*	80%	100%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	48%	58%	*	*	*	*	*	*	*	*	67%	55%	60%

CARE PLANNING							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	73%	71%	*	38%	*	77%	83%	*	*	*	73%	81%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	97%	86%	*	*	*	*	*	*	*	*	94%	100%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	94%	*	*	*	*	*	*	*	*	*	100%	*	96%

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 cancers
Q27. Staff provided the patient with relevant information on available support	*	88%	95%	*	67%	*	77%	100%	*	*	*	86%	93%	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	56%	83%	*	57%	*	81%	87%	*	*	*	76%	71%	72%
Q29. Patient was offered information about how to get financial help or benefits	*	83%	65%	*	*	*	82%	*	*	*	*	57%	90%	71%

### **Tumour group tables**

HOSPITAL CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	84%	87%	*	*	*	*	*	*	*	*	93%	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	61%	69%	*	*	*	*	*	*	*	*	79%	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	68%	93%	*	*	*	*	*	*	*	*	79%	*	77%
Q34. Patient was always able to get help from ward staff when needed	*	61%	64%	*	*	*	*	*	*	*	*	75%	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	59%	67%	*	*	*	*	*	*	*	*	54%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	88%	86%	*	*	*	*	*	*	*	*	82%	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	*	89%	100%	*	*	*	*	*	*	*	*	87%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	83%	100%	*	*	*	*	*	*	*	*	87%	*	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	69%	70%	*	69%	*	86%	93%	*	*	*	84%	88%	79%

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 cancers
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	92%	94%	*	*	*	*	*	*	*	*	85%	*	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	79%	94%	*	85%	*	93%	100%	*	*	*	91%	91%	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	80%	*	*	*	*	*	*	*	*	*	*	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	71%	*	*	*	*	*	93%	*	*	*	*	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	92%	*	*	*	*	91%	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	86%	100%	*	*	*	*	*	*	*	*	85%	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	58%	89%	*	75%	*	86%	93%	*	*	*	91%	92%	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	80%	*	*	*	*	*	*	*	*	*	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	80%	*	*	*	*	*	93%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	70%	*	*	*	*	90%	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	60%	63%	*	64%	*	93%	80%	*	*	*	86%	93%	74%

### **Tumour group tables**

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 cancers
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	60%	63%	*	54%	*	63%	87%	*	*	*	72%	81%	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	59%	75%	*	23%	*	64%	92%	*	*	*	65%	94%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	74%	89%	*	*	*	91%	100%	*	*	*	77%	92%	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	42%	43%	*	15%	*	63%	62%	*	*	*	60%	79%	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	36%	44%	*	10%	*	64%	64%	*	*	*	59%	73%	46%

SUPPORT WHILE AT HOME							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	44%	52%	*	*	*	*	*	*	*	*	64%	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	40%	*	*	*	*	*	*	*	*	*	30%	*	39%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	43%	38%	*	30%	*	*	*	*	*	*	15%	*	37%
Q52. Patient has had a review of cancer care by GP practice	*	19%	24%	*	14%	*	13%	7%	*	*	*	25%	6%	19%

### **Tumour group tables**

LIVING WITH AND BEYOND CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	27%	*	*	*	*	*	*	*	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	68%	62%	*	*	*	*	*	*	*	*	*	*	69%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	33%	52%	*	42%	*	60%	*	*	*	*	55%	80%	50%

YOUR OVERALL NHS CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q56. The whole care team worked well together	*	84%	96%	*	79%	*	93%	93%	*	*	*	86%	94%	89%
Q57. Administration of care was very good or good	*	80%	83%	*	71%	*	100%	87%	*	*	*	83%	94%	84%
Q58. Cancer research opportunities were discussed with patient	*	6%	27%	*	31%	*	*	64%	*	*	*	13%	8%	21%
Q59. Patient's average rating of care scored from very poor to very good	*	8.5	8.6	*	7.8	*	9.5	9.4	*	*	*	8.9	9.3	8.8

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	81%	82%	75%	*	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	80%	80%	53%	65%	*	67%

DIAGNOSTIC TESTS					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	100%	94%	88%	89%	*	90%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	82%	89%	90%	85%	*	87%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	91%	69%	80%	86%	*	81%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	90%	76%	76%	80%	*	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	100%	91%	96%	100%	*	97%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	73%	74%	89%	79%	*	82%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	85%	74%	79%	78%	*	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	77%	71%	80%	83%	*	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	92%	83%	84%	94%	*	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	82%	85%	82%	96%	*	87%

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 $% \left( {{\left[ {{{\rm{A}}} \right]}_{{\rm{A}}}}_{{\rm{A}}}} \right)$	*	*	*	100%	97%	92%	98%	*	96%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	86%	76%	79%	88%	*	82%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	100%	97%	98%	100%	*	99%

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	*	*	*	79%	80%	79%	82%	*	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	71%	65%	82%	89%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	77%	78%	81%	84%	*	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	46%	63%	69%	*	60%

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	*	*	*	58%	77%	66%	79%	*	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	95%	92%	98%	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	88%	93%	100%	*	96%

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	*	*	*	92%	88%	85%	91%	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	64%	46%	70%	88%	*	72%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	92%	64%	62%	84%	*	71%

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	*	*	*	*	54%	91%	93%	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	33%	81%	65%	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	54%	78%	89%	*	77%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	55%	86%	67%	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	50%	77%	68%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	70%	90%	91%	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	77%	96%	92%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	75%	91%	89%	*	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an butpatient or day case	*	*	*	62%	77%	78%	85%	*	79%

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	*	*	*	*	95%	76%	91%	*	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	91%	94%	88%	95%	*	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	77%	86%	93%	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	79%	86%	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	86%	86%	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	95%	86%	87%	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	73%	81%	80%	93%	*	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	92%	85%	80%	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	86%	86%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	86%	77%	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	57%	76%	71%	78%	*	74%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	57%	70%	75%	60%	*	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	64%	72%	59%	71%	*	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	69%	78%	82%	89%	*	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	38%	45%	53%	45%	*	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	42%	39%	50%	43%	*	46%

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	*	*	*	67%	30%	45%	56%	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	29%	38%	43%	*	39%

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	*	*	*	70%	30%	35%	31%	*	37%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	21%	21%	17%	19%	*	19%

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	*	*	*	*	30%	20%	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	53%	64%	90%	*	69%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	50%	29%	51%	57%	*	50%

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	*	*	*	93%	82%	86%	94%	*	89%
Q57. Administration of care was very good or good	*	*	*	79%	80%	85%	89%	*	84%
Q58. Cancer research opportunities were discussed with patient	*	*	*	17%	7%	27%	26%	*	21%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.8	8.5	8.8	9.0	*	8.8

### Male/Female/Non-binary/Other tables

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	84%	73%	*	*	*	*	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	69%	65%	*	*	*	*	67%

DIAGNOSTIC TESTS			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	85%	95%	*	*	*	100%	90%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	94%	*	*	*	91%	87%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	80%	*	*	*	100%	81%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	73%	81%	*	*	*	100%	79%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	97%	*	*	*	100%	97%		

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	77%	85%	*	*	*	100%	82%
Q13. Patient was definitely told sensitively that they had cancer	79%	79%	*	*	*	75%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	84%	*	*	*	83%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	91%	*	*	*	92%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	86%	*	*	*	100%	87%

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	96%	96%	*	*	*	92%	96%	
Q18. Patient found it very or quite easy to contact their main contact person	84%	77%	*	*	*	91%	82%	
Q19. Patient found advice from main contact person was very or quite helpful	98%	100%	*	*	*	100%	99%	

### Male/Female/Non-binary/Other tables

DECIDING ON THE BEST TREATMENT			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	77%	83%	*	*	*	92%	81%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	76%	86%	*	*	*	92%	81%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	77%	87%	*	*	*	90%	82%		
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	51%	74%	*	*	*	*	60%		

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	73%	72%	*	*	*	75%	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	98%	*	*	*	91%	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	91%	100%	*	*	*	*	96%	

SUPPORT FROM HOSPITAL STAFF			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	85%	92%	*	*	*	83%	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	64%	83%	*	*	*	67%	72%
Q29. Patient was offered information about how to get financial help or benefits	73%	69%	*	*	*	*	71%

### Male/Female/Non-binary/Other tables

HOSPITAL CARE			Male/Fema	lle/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	81%	94%	*	*	*	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	63%	71%	*	*	*	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	78%	84%	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	70%	79%	*	*	*	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	77%	*	*	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	87%	88%	*	*	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	89%	93%	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	94%	*	*	*	*	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	80%	*	*	*	83%	79%

YOUR TREATMENT			Male/Fema	lle/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	87%	90%	*	*	*	*	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	95%	*	*	*	*	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	87%	*	*	*	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	65%	94%	*	*	*	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	69%	95%	*	*	*	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	89%	90%	*	*	*	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	75%	91%	*	*	*	*	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	86%	*	*	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	74%	94%	*	*	*	*	82%
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	75%	86%	*	*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	73%	81%	*	*	*	33%	74%

### Male/Female/Non-binary/Other tables

IMMEDIATE AND LONG TERM SIDE EFFEC	ГS		Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	65%	70%	*	*	*	64%	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	66%	69%	*	*	*	64%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	80%	84%	*	*	*	*	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	45%	53%	*	*	*	50%	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	41%	51%	*	*	*	*	46%

SUPPORT WHILE AT HOME	UPPORT WHILE AT HOME Male/Female/No						
	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	43%	57%	*	*	*	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	37%	50%	*	*	*	*	39%

CARE FROM YOUR GP PRACTICE	ROM 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	29%	46%	*	*	*	*	37%		
Q52. Patient has had a review of cancer care by GP practice	19%	21%	*	*	*	8%	19%		

LIVING WITH AND BEYOND CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	24%	50%	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	65%	73%	*	*	*	*	69%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	45%	61%	*	*	*	*	50%

### Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE			Male/Fema	Iale/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	87%	92%	*	*	*	83%	89%	
Q57. Administration of care was very good or good	84%	87%	*	*	*	75%	84%	
Q58. Cancer research opportunities were discussed with patient	10%	35%	*	*	*	*	21%	
Q59. Patient's average rating of care scored from very poor to very good	8.5	9.1	*	*	*	8.9	8.8	

\*

SUPPORT FROM YOUR GP PRACTICE	YOUR GP PRACTICE				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All		
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	*	*	*	*	*	80%		
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	*	*	*	*	*	67%		

DIAGNOSTIC TESTS				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	*	*	*	*	100%	90%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	87%	*	*	*	*	90%	87%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	*	*	*	*	100%	81%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	*	*	*	*	100%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	*	*	*	*	100%	97%

FINDING OUT THAT YOU HAD CANCER				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	81%	*	*	*	*	92%	82%
Q13. Patient was definitely told sensitively that they had cancer	78%	*	*	*	*	85%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	*	*	*	92%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	*	*	*	*	100%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	*	*	*	*	100%	87%

SUPPORT FROM A MAIN CONTACT PERSO	NC			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	95%	*	*	*	*	100%	96%
Q18. Patient found it very or quite easy to contact their main contact person	82%	*	*	*	*	77%	82%
Q19. Patient found advice from main contact person was very or quite helpful	99%	*	*	*	*	100%	99%

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	80%	*	*	*	*	85%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	*	*	*	*	85%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	*	*	*	*	92%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	59%	*	*	*	*	*	60%

CARE PLANNING			Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	72%	*	*	*	*	77%	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	*	*	*	*	*	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	95%	*	*	*	*	*	96%	

SUPPORT FROM HOSPITAL STAFF							
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	88%	*	*	*	*	85%	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	*	*	*	*	62%	72%
Q29. Patient was offered information about how to get financial help or benefits	71%	*	*	*	*	*	71%

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	87%	*	*	*	*	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	67%	*	*	*	*	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	81%	*	*	*	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	74%	*	*	*	*	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	69%	*	*	*	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	*	*	*	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	91%	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	*	*	*	*	*	87%
239. Patient was always able to discuss worries and ears with hospital staff while being treated as an butpatient or day case	79%	*	*	*	*	69%	79%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	88%	*	*	*	*	*	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	*	*	*	*	*	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	*	*	*	*	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	*	*	*	*	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	*	*	*	*	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	89%	*	*	*	*	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	*	*	*	*	*	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	*	*	*	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	83%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	81%	*	*	*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	*	*	*	*	38%	74%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	<b>S</b>			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	68%	*	*	*	*	55%	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	*	*	*	*	55%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	*	*	*	*	*	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	48%	*	*	*	*	58%	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	45%	*	*	*	*	*	46%

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	48%	*	*	*	*	70%	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	41%	*	*	*	*	*	39%

CARE FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	37%	*	*	*	*	40%	37%
Q52. Patient has had a review of cancer care by GP practice	19%	*	*	*	*	23%	19%

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	32%	*	*	*	*	*	31%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	68%	*	*	*	*	*	69%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	52%	*	*	*	*	*	50%	

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	89%	*	*	*	*	83%	89%
Q57. Administration of care was very good or good	86%	*	*	*	*	69%	84%
Q58. Cancer research opportunities were discussed with patient	21%	*	*	*	*	*	21%
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	8.8	8.8

### **IMD** quintile tables

SUPPORT FROM YOUR GP PRACTICE			IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	75%	86%	86%	72%	*	*	80%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	75%	65%	65%	75%	50%	*	67%	

DIAGNOSTIC TESTS	IMD quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q5. Patient received all the information needed about the diagnostic test in advance	89%	91%	83%	95%	*	*	90%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	90%	90%	84%	85%	*	*	87%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	85%	78%	74%	88%	*	*	81%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	78%	73%	85%	*	*	79%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	100%	96%	98%	98%	*	*	97%	

FINDING OUT THAT YOU HAD CANCER							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	71%	79%	83%	88%	82%	*	82%
Q13. Patient was definitely told sensitively that they had cancer	80%	77%	82%	78%	73%	*	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	78%	76%	87%	73%	*	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	81%	89%	90%	89%	82%	*	88%
Q16. Patient was told they could go back later for more information about their diagnosis	94%	86%	84%	93%	73%	*	87%

SUPPORT FROM A MAIN CONTACT PERSON		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team $% \left( {{{\rm{D}}_{\rm{A}}}} \right)$	100%	98%	86%	100%	100%	*	96%
Q18. Patient found it very or quite easy to contact their main contact person	68%	82%	83%	85%	*	*	82%
Q19. Patient found advice from main contact person was very or quite helpful	100%	100%	98%	98%	*	*	99%

# IMD quintile tables

DECIDING ON THE BEST TREATMENT			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	78%	78%	83%	91%	*	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	70%	80%	80%	89%	82%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	81%	78%	88%	80%	*	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	80%	52%	46%	73%	*	*	60%

CARE PLANNING		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	75%	66%	71%	81%	*	*	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	97%	93%	100%	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	92%	91%	100%	96%	*	*	96%

SUPPORT FROM HOSPITAL STAFF			IN	ID quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q27. Staff provided the patient with relevant information on available support	75%	90%	83%	98%	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	65%	64%	73%	85%	64%	*	72%
Q29. Patient was offered information about how to get financial help or benefits	71%	73%	50%	87%	*	*	71%

HOSPITAL CARE			IN	ID quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	81%	88%	86%	*	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	65%	86%	61%	*	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	81%	75%	81%	*	*	77%
Q34. Patient was always able to get help from ward staff when needed	*	84%	71%	75%	*	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	78%	53%	67%	*	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	*	94%	100%	74%	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	*	90%	94%	84%	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	85%	88%	95%	*	*	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	84%	75%	77%	79%	*	*	79%

# IMD quintile tables

YOUR TREATMENT			IN	/ID quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	93%	84%	96%	*	*	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	94%	92%	87%	91%	*	*	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	78%	*	100%	*	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	71%	75%	82%	*	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	82%	75%	*	*	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	86%	92%	96%	*	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	94%	82%	75%	86%	*	*	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	71%	*	93%	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	71%	82%	91%	*	*	82%
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	82%	64%	*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	67%	71%	84%	64%	*	74%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS		IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	65%	64%	71%	60%	*	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	79%	67%	47%	81%	*	*	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	80%	83%	74%	89%	*	*	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	48%	41%	58%	20%	*	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	63%	47%	36%	51%	*	*	46%

SUPPORT WHILE AT HOME			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	50%	54%	41%	59%	*	*	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	30%	24%	53%	*	*	39%

CARE FROM YOUR GP PRACTICE	CE IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	42%	31%	37%	48%	*	*	37%
Q52. Patient has had a review of cancer care by GP practice	14%	16%	21%	23%	18%	*	19%

# **IMD** quintile tables

LIVING WITH AND BEYOND CANCER		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	20%	23%	40%	*	*	31%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	73%	52%	86%	*	*	69%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	69%	45%	50%	57%	*	*	50%	

YOUR OVERALL NHS CARE	IMD quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q56. The whole care team worked well together	90%	90%	81%	93%	91%	*	89%	
Q57. Administration of care was very good or good	95%	76%	83%	91%	82%	*	84%	
Q58. Cancer research opportunities were discussed with patient	17%	23%	13%	26%	*	*	21%	
Q59. Patient's average rating of care scored from very poor to very good	9.3	8.8	8.5	8.9	8.8	*	8.8	

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status						
	Yes	No	Not given	All			
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	73%	84%	*	80%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	66%	71%	58%	67%			

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	89%	92%	93%	90%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	93%	87%	87%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	78%	93%	81%
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	82%	93%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	99%	93%	100%	97%

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	78%	81%	100%	82%
Q13. Patient was definitely told sensitively that they had cancer	77%	78%	89%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	79%	80%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	89%	84%	95%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	91%	94%	87%

SUPPORT FROM A MAIN CONTACT PERSON	1	Long-term con	Long-term condition status	
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	95%	95%	100%	96%
Q18. Patient found it very or quite easy to contact their main contact person	86%	77%	75%	82%
Q19. Patient found advice from main contact person was very or quite helpful	100%	96%	100%	99%

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	77%	85%	84%	81%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	82%	81%	80%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	82%	83%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	59%	57%	*	60%

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

CARE PLANNING	Long-term condition status			
	Yes	No	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	67%	79%	74%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	97%	93%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	96%	94%	100%	96%

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	No Not g	Not given	All
Q27. Staff provided the patient with relevant information on available support	86%	91%	89%	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	65%	70%	72%
Q29. Patient was offered information about how to get financial help or benefits	72%	67%	*	71%

HOSPITAL CARE		Long-term con	dition 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	90%	81%	*	85%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	67%	65%	*	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	77%	85%	*	77%
Q34. Patient was always able to get help from ward staff when needed	76%	70%	*	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	76%	*	67%
Q36. Hospital staff always did everything they could to help the patient control pain	86%	90%	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	90%	92%	*	90%
Q38. Patient received easily understandable nformation about what they should or should not do after leaving hospital	88%	92%	*	87%
239. Patient was always able to discuss worries and ears with hospital staff while being treated as an butpatient or day case	79%	82%	68%	79%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	91%	91%	88%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	93%	*	91%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	71%	*	85%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	70%	87%	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	85%	82%	*	84%
Q42_1. Patient completely had enough understandable nformation about their response to surgery	84%	100%	82%	89%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	84%	85%	*	83%
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	93%	79%	*	85%
Q42_4. Patient completely had enough understandable nformation about their response to hormone therapy	80%	87%	*	82%
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	84%	73%	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	75%	50%	74%

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	67%	73%	47%	67%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	62%	76%	59%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	80%	82%	92%	82%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	46%	49%	59%	48%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	46%	45%	54%	46%

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	45%	56%	58%	50%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	33%	56%	*	39%

CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given A				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	40%	35%	29%	37%	
Q52. Patient has had a review of cancer care by GP practice	19%	18%	25%	19%	

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	43%	21%	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	60%	*	69%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	47%	57%	40%	50%

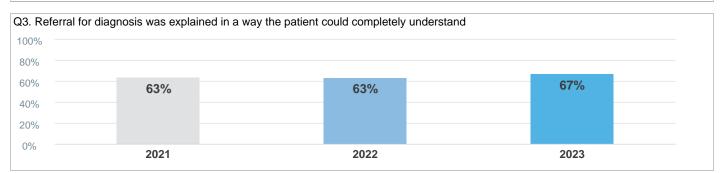
YOUR OVERALL NHS CARE	Long-term condition status					
	Yes No Not given					
Q56. The whole care team worked well together	88%	89%	89%	89%		
Q57. Administration of care was very good or good	89%	84%	63%	84%		
Q58. Cancer research opportunities were discussed with patient	25%	15%	*	21%		
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.6	9.0	8.8		

## Year on year charts

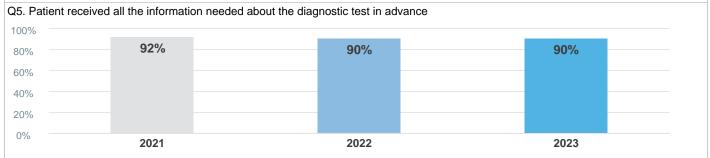
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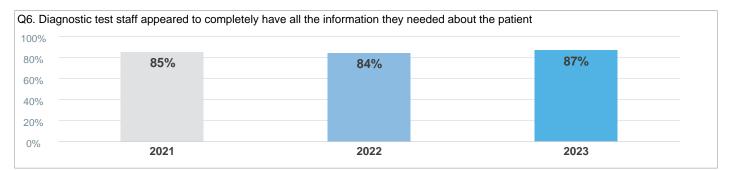
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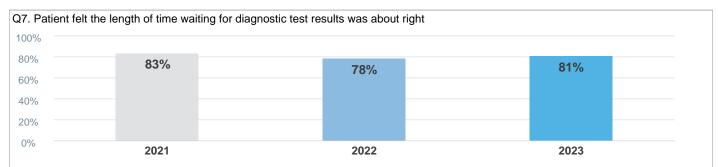
#### SUPPORT FROM YOUR GP PRACTICE Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis 100% 80% 80% 78% 76% 60% 40% 20% 0% 2021 2022 2023



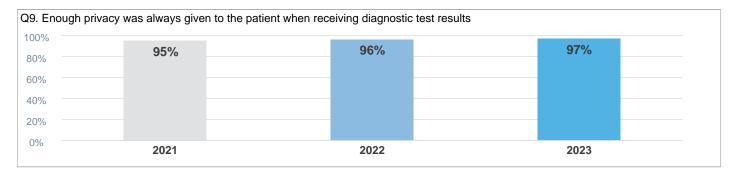
#### **DIAGNOSTIC TESTS**

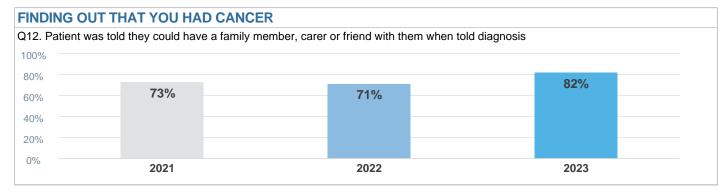


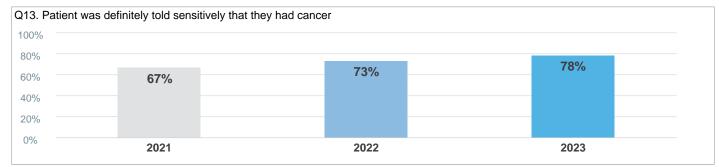


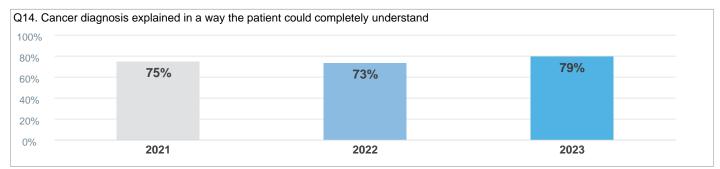


* I t	ndicates where a score is r to suppression or a low bas	not available due ** No score av e size.	vailable for these years.	The scores are unadjusted and based on England scores only.
Q8. [	-	e explained in a way the patier	nt could completely unc	lerstand
80%		,		700/
60%	79%	0	76%	79%
40% 20%				
0%		1	2022	2023

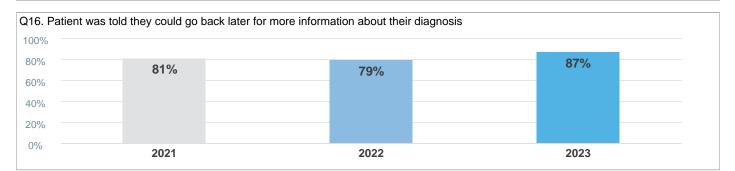




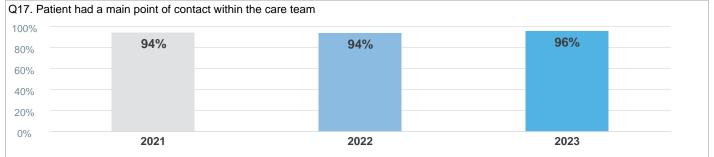


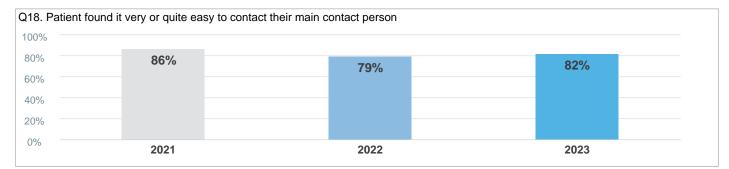


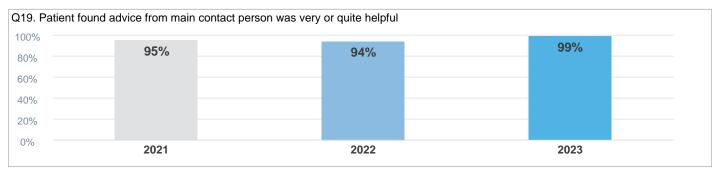
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	efinitely told about their dia	gnosis in an appropriate place	
100%		90%	
80%	86%	90%	88%
60%			
40%			
20%			
0%	2021	2022	2023











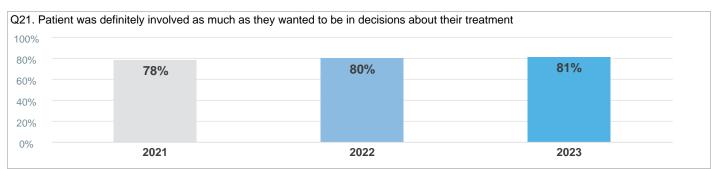
## Year on year charts

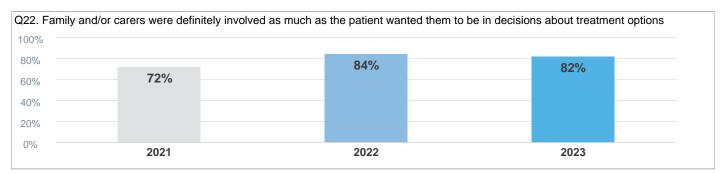
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The scores are unadjusted and based on England scores only.

# DECIDING ON THE BEST TREATMENT Q20. Treatment options were explained in a way the patient could completely understand 100% 80% 79% 60% 40% 20% 0% 20% 0% 201 2022 2023





 Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options

 100%

 80%

 60%

 40%

 20%

 0%

 2021 \*\*

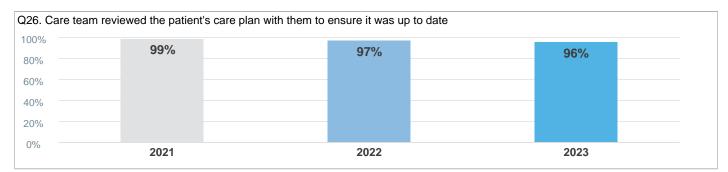
 2022 \*\*

#### **CARE PLANNING**

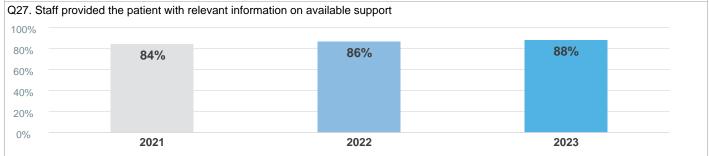
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment				
100%				
80%				
60%	70%	69%	73%	
40%				
20%				
0%	2021	2022	2023	

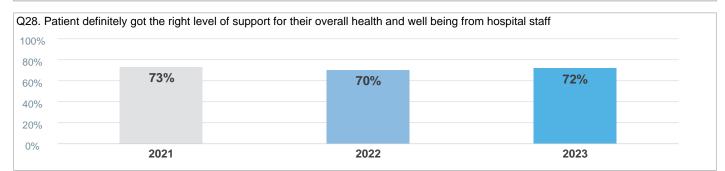
## Year on year charts

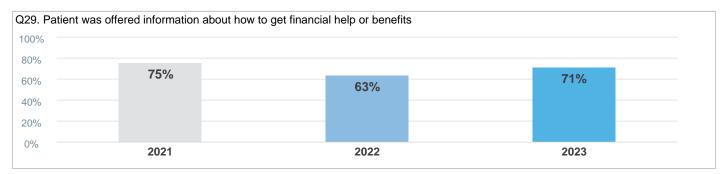
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	their care team helped t	he patient create a care plan to address any	needs or concerns
100%	049/	94%	95%
80%	91%	0470	
60%			
40%			
20%			
0%	2021	2022	2023



#### SUPPORT FROM HOSPITAL STAFF





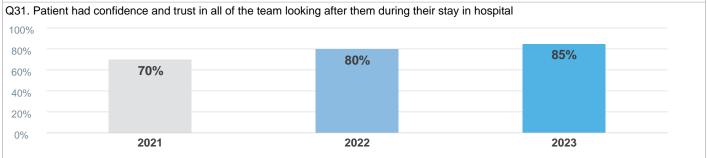


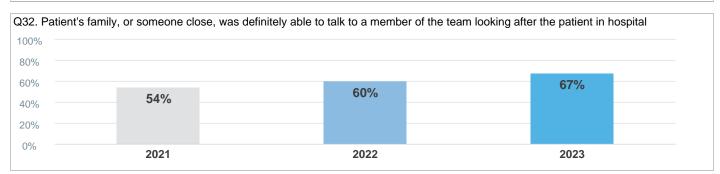
## Year on year charts

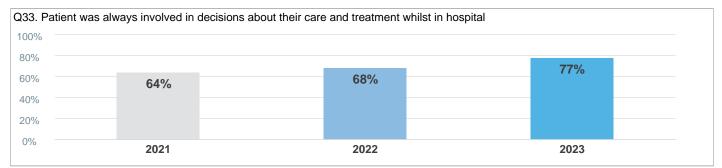
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### HOSPITAL CARE







 Q34. Patient was always able to get help from ward staff when needed

 100%

 80%

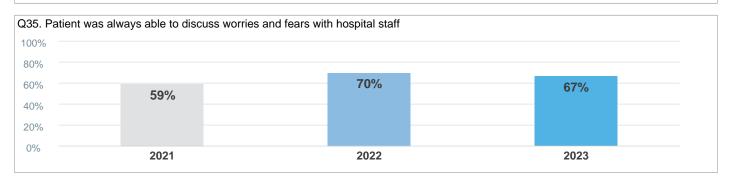
 60%
 74%

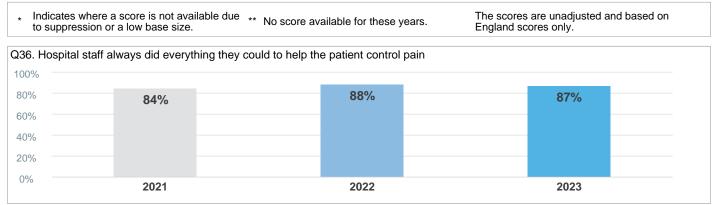
 40%

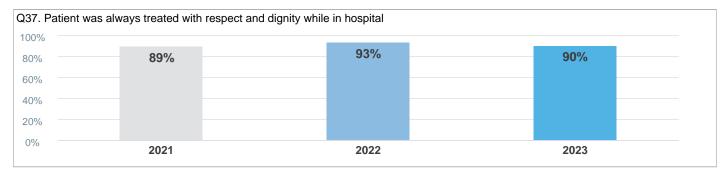
 20%

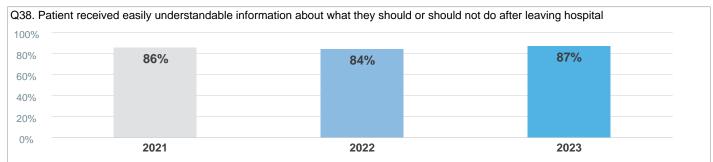
 0%
 2021

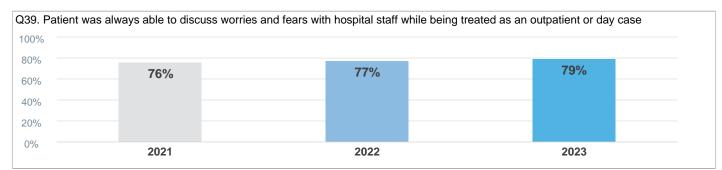
 2022
 2023

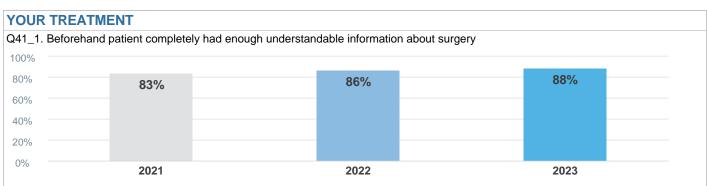


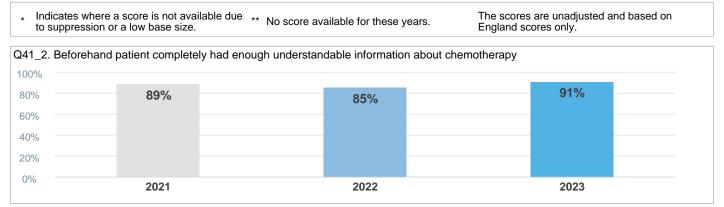


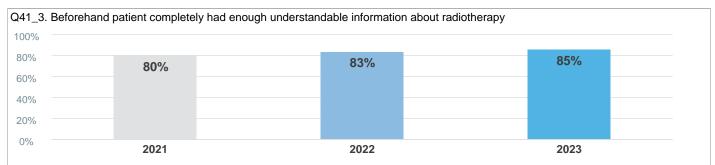


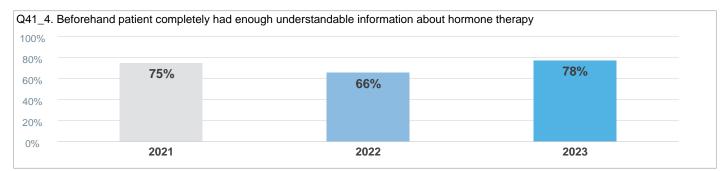


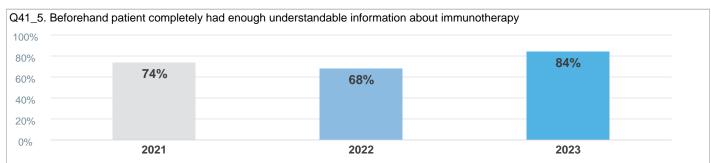


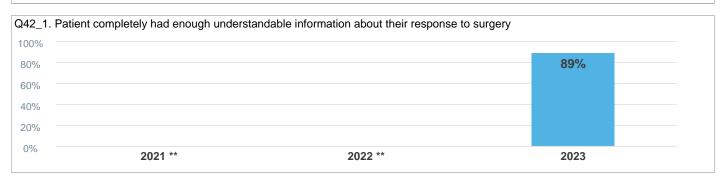












## Year on year charts

 \*
 Indicates where a score is not available due \*\* No score available for these years.
 The scores are unadjusted and based on England scores only.

 Q42\_2. Patient completely had enough understandable information about their response to chemotherapy
 80%

 80%
 83%

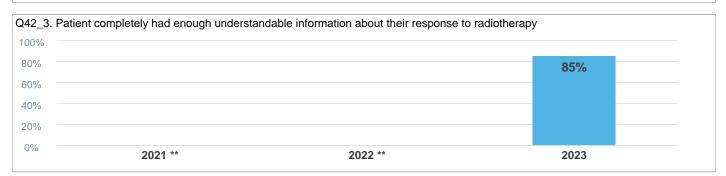
 60%
 83%

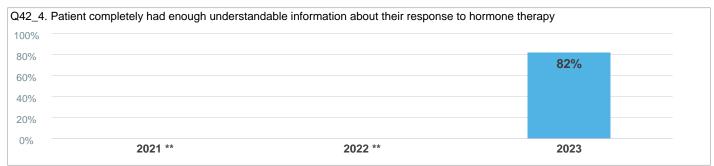
 40%
 9

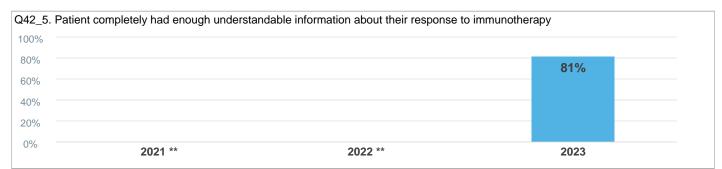
 20%
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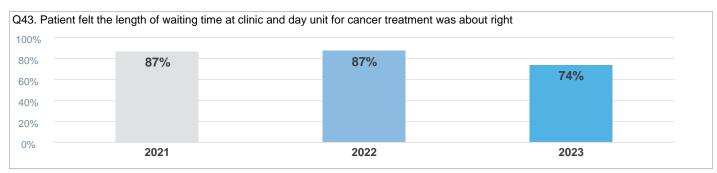
 20%
 2021 \*\*

 2021 \*\*
 2022 \*\*





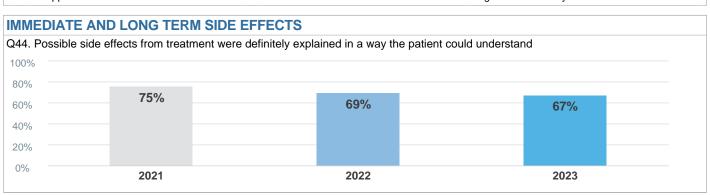


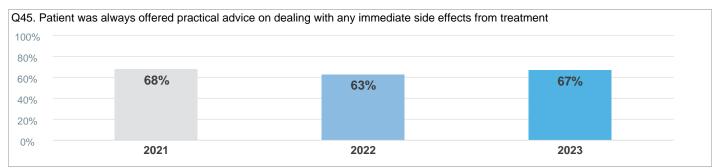


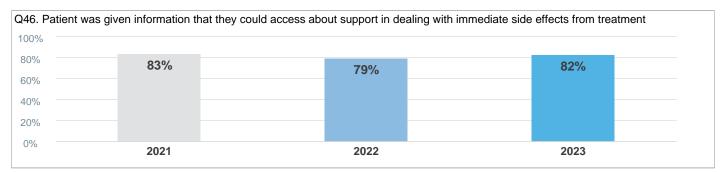
## Year on year charts

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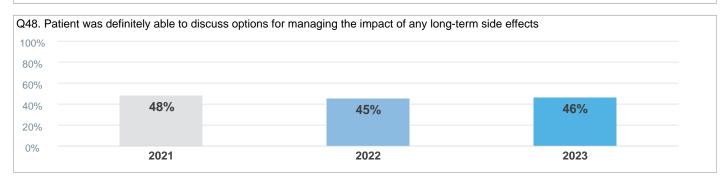
The scores are unadjusted and based on England scores only.







Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment 100% 80% 60% 56% 52% 48% 40% 20% 0% 2021 2022 2023

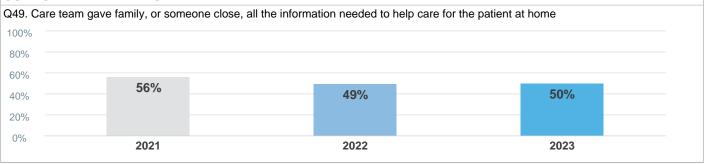


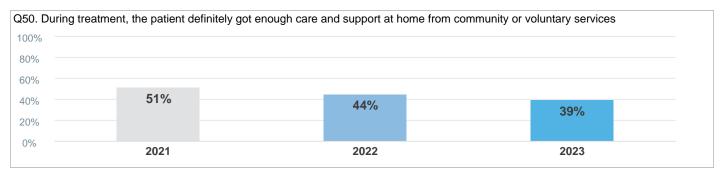
## Year on year charts

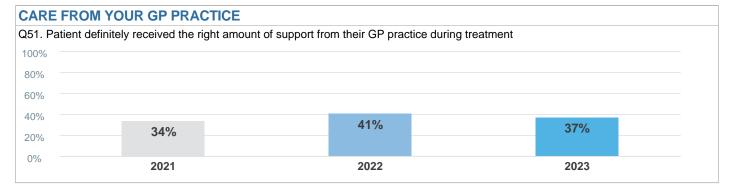
Indicates where a score is not available due \*\* No score available for these years. to suppression or a low base size. England scores only.

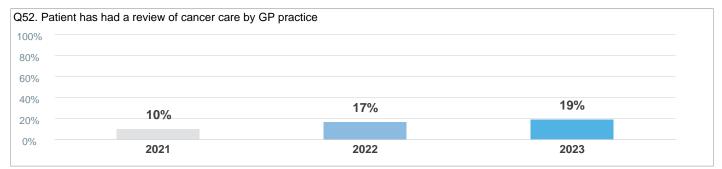
The scores are unadjusted and based on

#### SUPPORT WHILE AT HOME

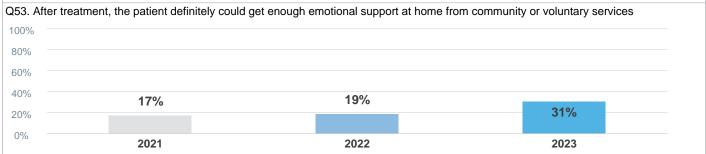






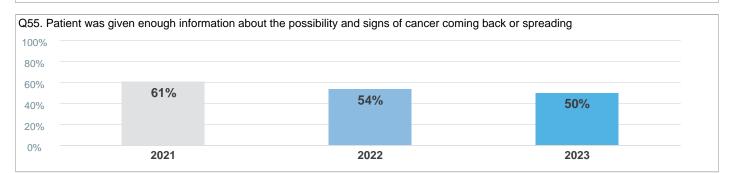


#### LIVING WITH AND BEYOND CANCER

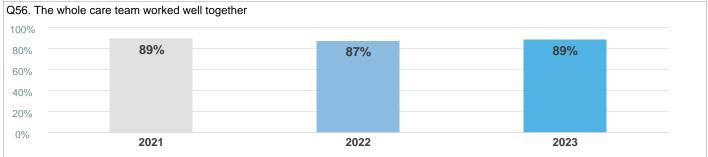


## Year on year charts

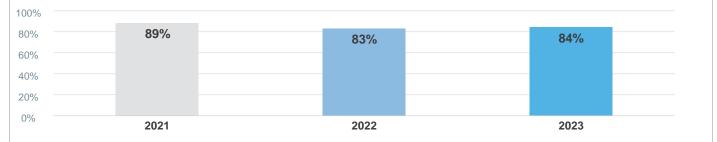
Indicates where a score is not available due \*\* No score available for these years. The scores are unadjusted and based on to suppression or a low base size. England scores only. Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment 100% 80% 73% 71% 60% 69% 40% 20% 0% 2022 2023 2021

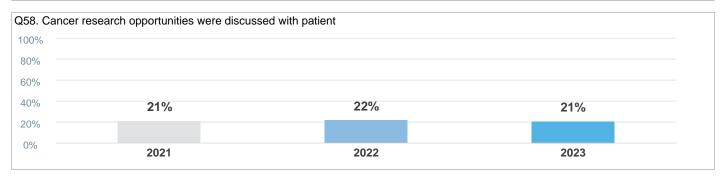












	rhere a score is not availa sion or a low base size.	ble due <b>**</b> No score available for these years.	The scores are unadjusted and based on England scores only.
Q59. Patient's a	average rating of care s	cored from very poor to very good	
10			
8	8.9	8.7	8.8
6			
4			
2			
0			
	2021	2022	2023