

# **Cancer Patient Experience Survey**

2023 Results

# James Paget University Hospitals NHS Foundation Trust

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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
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	72%	83%	78%
Q18. Patient found it very or quite easy to contact their main contact person	94%	79%	89%	84%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	88%	75%	84%	79%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	89%	71%	87%	79%
Q42_1. Patient completely had enough understandable information about their response to surgery	94%	81%	92%	86%
Q59. Patient's average rating of care scored from very poor to very good	9.2	8.7	9.1	8.9

## **Questions below expected range**

	Case	Case mix adjusted scores			
	2023 score	Lower expected range	Upper expected range	National score	
Q52. Patient has had a review of cancer care by GP practice	16%	18%	27%	23%	

### 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

### **James Paget University Hospitals NHS Foundation Trust**

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

## **Response rate**

## **Overall response rate**

370 patients responded out of a total of 649 patients, resulting in a response rate of 57%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	690	649	370	57%
National	129,231	121,121	63,438	52%

## Respondents by survey type

	Number of respondents
Paper	321
Online	49
Phone	0
Translation service	0
Total	370

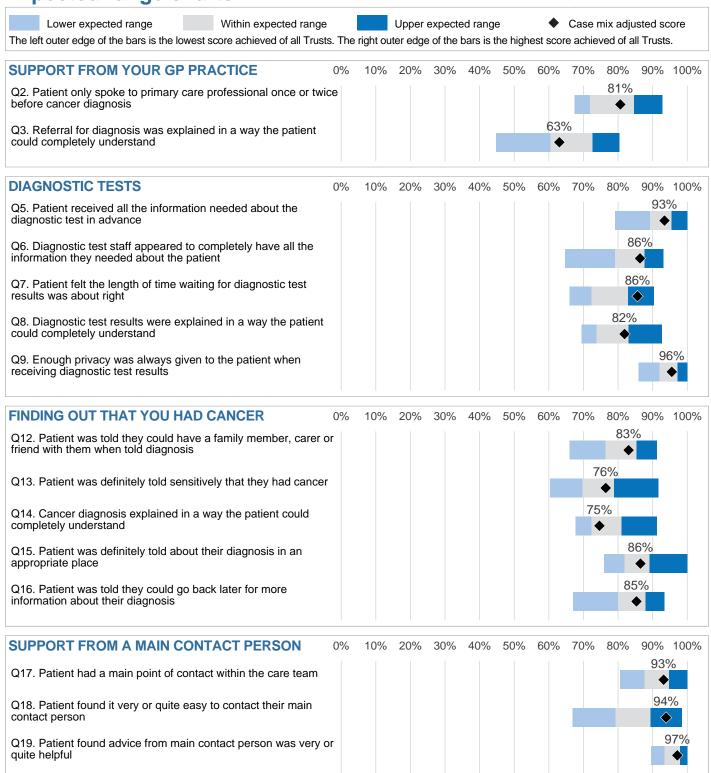
## Respondents by tumour group

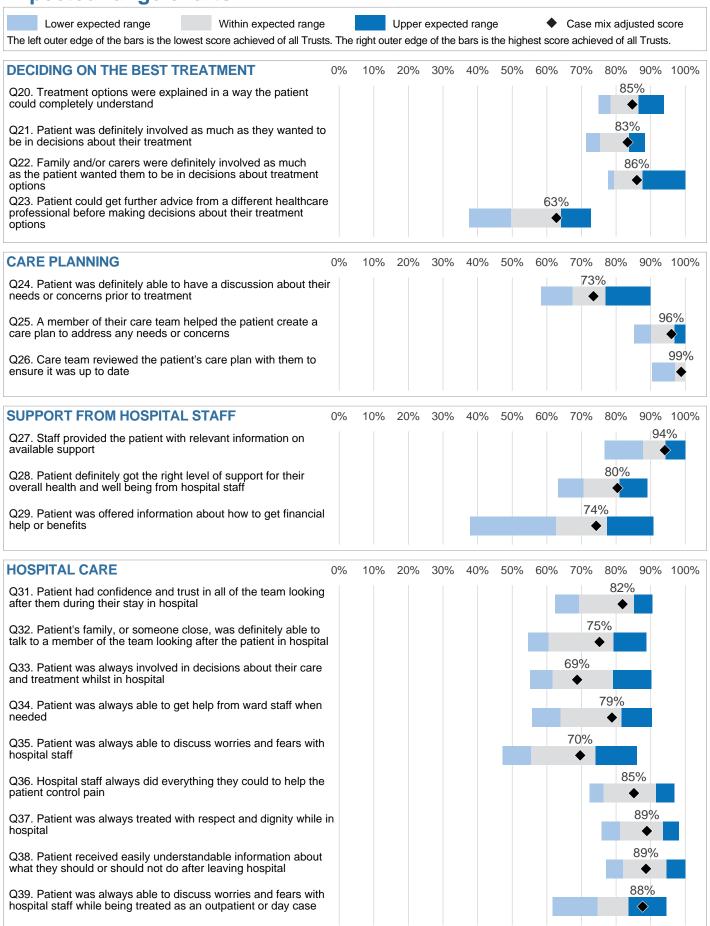
	Number of respondents
Brain / CNS	0
Breast	83
Colorectal / LGT	35
Gynaecological	22
Haematological	63
Head and neck	0
Lung	26
Prostate	55
Sarcoma	0
Skin	0
Upper gastro	19
Urological	24
Other	43
Total	370

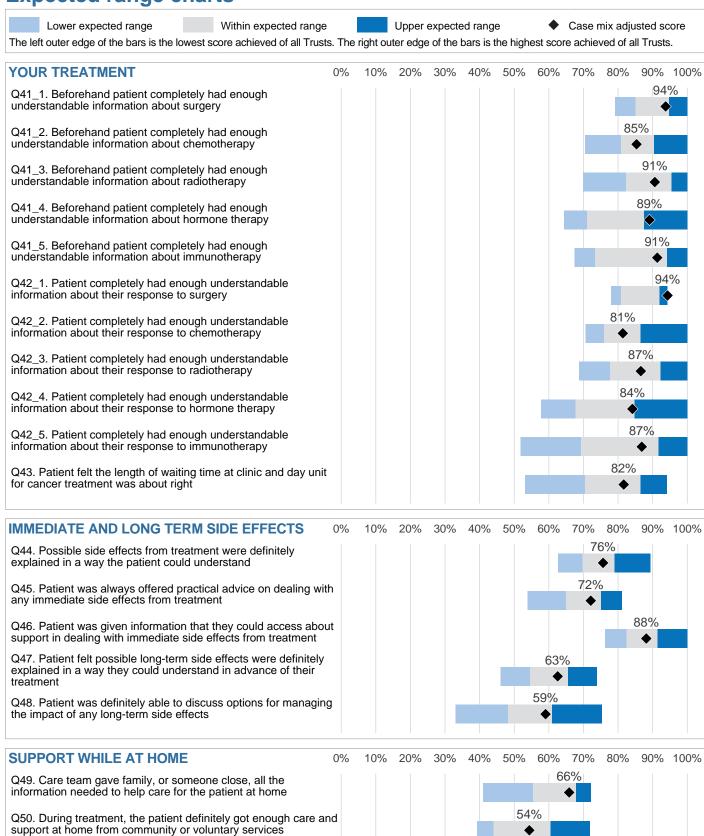
## Respondents by ethnicity

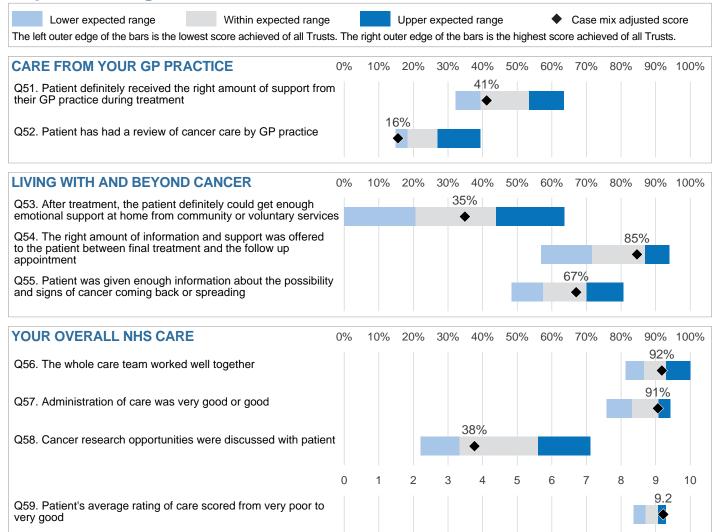
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	339
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	*
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	I
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	*
Any other ethnic group	*
Not given	
Not given	23
Total	370

<sup>\*</sup> indicates the count is not shown due to suppression









## **Comparability tables**

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

**	No score	available	for	2022.

	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	139	81%	164	81%			81%	72%	85%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	186	59%	233	62%			63%	60%	73%	67%	

DIAGNOSTIC TESTS	Unadjusted scores							Case mix adjusted scores			
	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	223	91%	286	93%			93%	89%	95%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	240	84%	301	86%			86%	79%	88%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	239	82%	299	87%			86%	72%	83%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	240	76%	301	82%			82%	74%	83%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	242	95%	304	96%			96%	92%	97%	95%	

FINDING OUT THAT YOU HAD CANCER	Unadjusted scores							Case mix adjusted scores			
	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	283	84%	347	84%			83%	76%	85%	81%	
Q13. Patient was definitely told sensitively that they had cancer	290	77%	364	77%			76%	70%	79%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	293	74%	366	74%			75%	72%	81%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	292	87%	367	86%			86%	82%	89%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	263	85%	327	85%			85%	80%	88%	84%	

	Unadjusted scores							Case mix adjusted scores			
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	279	92%	357	93%			93%	88%	95%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	242	92%	301	94%			94%	79%	89%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	245	97%	318	97%			97%	93%	98%	96%	

## **Comparability tables**

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



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.

			Unadjust	ted score	s:		Case m	nix adjuste	d scores	
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	267	84%	350	85%			85%	79%	86%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	290	82%	361	83%			83%	75%	84%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	248	84%	317	86%			86%	79%	88%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	183	63%			63%	50%	64%	57%

			Unadjus	ted score	es		Case n			
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	271	74%	329	73%			73%	67%	77%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	161	99%	204	96%			96%	90%	97%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	141	99%	170	99%			99%	97%	100%	99%

			Unadjust	ed score	S		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	240	90%	309	94%			94%	88%	94%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	288	82%	366	81%			80%	71%	81%	76%
Q29. Patient was offered information about how to get financial help or benefits	174	74%	227	73%			74%	63%	77%	70%

## **Comparability tables**

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

▲ or ▼

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

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

and Lower Expected Ranges
Adjusted Score above Upper
Expected Range

**	No score	available	for 2022

			Unadjus	ted score		Case n				
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	81	84%	108	83%			82%	69%	85%	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	65	74%	96	77%			75%	61%	79%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	77	73%	105	70%			69%	62%	79%	70%
Q34. Patient was always able to get help from ward staff when needed	79	80%	106	80%			79%	64%	82%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	77	69%	100	71%			70%	55%	74%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	64	89%	91	87%			85%	76%	92%	84%
Q37. Patient was always treated with respect and dignity while in hospital	80	95%	108	90%			89%	81%	94%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	74	88%	102	89%			89%	82%	95%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	263	86%	332	88%			88%	75%	84%	79%

			Unadjus	ted score	es		Case n	ed scores		
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q41_1. Beforehand patient completely had enough understandable information about surgery	96	94%	150	94%			94%	85%	95%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	163	83%	211	86%			85%	81%	90%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	83	87%	89	91%			91%	82%	95%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	83	95%	94	90%			89%	71%	87%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	41	85%	48	92%			91%	73%	94%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	148	95%			94%	81%	92%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	209	82%			81%	76%	87%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	92	87%			87%	78%	92%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	96	85%			84%	68%	85%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	48	88%			87%	69%	92%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	286	84%	354	82%			82%	70%	86%	78%

## **Comparability tables**

managing the impact of any long-term side effects

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

\*\* No score available for 2022.

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

59%

48%

61%

55%

			Unadjus	ted score	es		Case n	d scores		
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	282	76%	351	75%			76%	70%	79%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	266	78%	334	72%			72%	65%	75%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	206	90%	260	88%			88%	82%	91%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	264	64%	341	62%			63%	55%	66%	60%
Q48. Patient was definitely able to discuss options for	219	60%	299	60%			59%	48%	61%	55%

			Unadjus	ted score	Case n					
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	197	68%	238	66%			66%	55%	68%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	111	63%	142	54%			54%	44%	60%	52%

60%

299

60%

219

			Unadjust	ted score	S		Case n			
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	161	43%	192	41%			41%	39%	53%	46%
Q52. Patient has had a review of cancer care by GP practice	277	17%	349	15%			16%	18%	27%	23%

			Unadjus	ted score	s		Case n			
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	36	36%	62	34%			35%	21%	44%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75	92%	122	84%			85%	72%	87%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	198	68%	265	68%			67%	57%	70%	64%

			Unadjust	ted score	es		Case n			
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q56. The whole care team worked well together	283	94%	356	92%			92%	87%	93%	90%
Q57. Administration of care was very good or good	285	93%	366	91%			91%	83%	91%	87%
Q58. Cancer research opportunities were discussed with patient	166	42%	214	38%			38%	33%	56%	45%
Q59. Patient's average rating of care scored from very poor to very good	278	9.3	358	9.2			9.2	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	100%	94%	64%	55%	*	*	74%	*	*	73%	85%	75%	81%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	81%	65%	61%	53%	*	71%	55%	*	*	54%	56%	50%	62%

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
Q5. Patient received all the information needed about the diagnostic test in advance	*	92%	97%	95%	89%	*	100%	97%	*	*	85%	96%	91%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	87%	90%	68%	81%	*	91%	95%	*	*	81%	87%	88%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	82%	93%	89%	91%	*	96%	85%	*	*	87%	87%	76%	87%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	93%	87%	63%	79%	*	88%	73%	*	*	73%	78%	85%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	97%	100%	100%	98%	*	96%	98%	*	*	94%	96%	82%	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	92%	94%	73%	74%	*	76%	82%	*	*	89%	86%	80%	84%
Q13. Patient was definitely told sensitively that they had cancer	*	84%	91%	82%	69%	*	56%	74%	*	*	79%	67%	79%	77%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	84%	76%	77%	59%	*	65%	73%	*	*	68%	75%	84%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	96%	94%	73%	81%	*	77%	84%	*	*	84%	92%	83%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	*	92%	80%	90%	78%	*	75%	83%	*	*	89%	100%	76%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	94%	94%	91%	95%	*	100%	94%	*	*	88%	83%	93%	93%
Q18. Patient found it very or quite easy to contact their main contact person	*	93%	97%	100%	98%	*	91%	93%	*	*	92%	94%	88%	94%
Q19. Patient found advice from main contact person was very or quite helpful	*	99%	100%	95%	98%	*	96%	96%	*	*	100%	100%	91%	97%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	91%	74%	86%	73%	*	96%	82%	*	*	72%	83%	98%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	88%	85%	80%	86%	*	92%	75%	*	*	68%	79%	86%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	89%	88%	78%	82%	*	82%	87%	*	*	71%	95%	89%	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	59%	72%	62%	67%	*	73%	54%	*	*	*	55%	67%	63%

CARE PLANNING							Tumo	ur gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	72%	75%	77%	70%	*	79%	77%	*	*	63%	73%	74%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	94%	94%	92%	100%	*	100%	96%	*	*	100%	93%	96%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	97%	100%	90%	100%	*	100%	100%	*	*	100%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	96%	100%	100%	87%	*	96%	93%	*	*	82%	100%	92%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	81%	83%	75%	79%	*	88%	83%	*	*	79%	79%	79%	81%
Q29. Patient was offered information about how to get financial help or benefits	*	81%	95%	79%	74%	*	67%	46%	*	*	55%	86%	69%	73%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	54%	88%	*	86%	*	*	*	*	*	*	91%	100%	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	50%	91%	*	85%	*	*	*	*	*	*	73%	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	62%	78%	*	62%	*	*	*	*	*	*	70%	80%	70%
Q34. Patient was always able to get help from ward staff when needed	*	62%	92%	*	86%	*	*	*	*	*	*	64%	90%	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	27%	92%	*	81%	*	*	*	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	*	83%	92%	*	93%	*	*	*	*	*	*	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	*	77%	100%	*	86%	*	*	*	*	*	*	91%	100%	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	92%	96%	*	84%	*	*	*	*	*	*	91%	80%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	88%	91%	78%	87%	*	96%	92%	*	*	81%	83%	89%	88%

YOUR TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	95%	91%	*	91%	*	*	*	*	*	90%	95%	100%	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	84%	61%	84%	87%	*	93%	100%	*	*	71%	100%	96%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	92%	*	*	*	*	*	100%	*	*	*	*	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	85%	*	*	*	*	*	91%	*	*	*	*	100%	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	94%	*	100%	*	*	*	*	*	*	92%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	98%	91%	*	92%	*	*	*	*	*	80%	94%	*	95%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	78%	56%	68%	87%	*	100%	100%	*	*	71%	85%	92%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	88%	*	*	*	*	*	100%	*	*	*	*	90%	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	83%	*	*	*	*	*	87%	*	*	*	*	93%	85%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	81%	*	90%	*	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	84%	77%	86%	71%	*	88%	88%	*	*	84%	75%	86%	82%

<b>IMMEDIATE AND LONG TERM SIDE EFFEC</b>	TS						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	77%	74%	64%	72%	*	80%	78%	*	*	68%	88%	74%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	78%	63%	67%	73%	*	75%	67%	*	*	58%	77%	77%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	95%	92%	83%	95%	*	90%	91%	*	*	75%	72%	77%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	69%	55%	62%	54%	*	54%	68%	*	*	47%	60%	74%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	66%	52%	56%	58%	*	68%	61%	*	*	50%	50%	58%	60%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	68%	66%	61%	68%	*	65%	72%	*	*	45%	73%	59%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	48%	56%	40%	50%	*	75%	60%	*	*	*	*	64%	54%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	51%	63%	36%	29%	*	56%	32%	*	*	*	23%	32%	41%
Q52. Patient has had a review of cancer care by GP practice	*	20%	16%	18%	12%	*	20%	16%	*	*	26%	9%	2%	15%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	36%	60%	*	20%	*	*	*	*	*	*	*	*	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	91%	95%	*	79%	*	*	*	*	*	*	*	83%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	65%	67%	59%	79%	*	56%	74%	*	*	40%	57%	76%	68%

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 Otther												All	
Q56. The whole care team worked well together	*	93%	91%	86%	90%	*	100%	96%	*	*	89%	95%	85%	92%
Q57. Administration of care was very good or good	*	85%	89%	86%	94%	*	100%	89%	*	*	94%	88%	98%	91%
Q58. Cancer research opportunities were discussed with patient	*	50%	50%	20%	44%	*	41%	18%	*	*	*	23%	40%	38%
Q59. Patient's average rating of care scored from very poor to very good	*	9.4	9.3	9.0	9.3	*	9.3	9.1	*	*	8.9	9.2	9.2	9.2

# Age group tables

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	88%	71%	78%	88%	*	81%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	58%	63%	61%	62%	55%	62%

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	*	*	*	90%	91%	91%	98%	88%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	86%	82%	86%	90%	89%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	57%	89%	87%	91%	89%	87%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	81%	84%	82%	81%	76%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	90%	93%	95%	100%	94%	96%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	86%	80%	83%	87%	84%	84%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	68%	70%	74%	82%	85%	77%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	68%	76%	68%	81%	75%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	82%	78%	85%	91%	100%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	86%	86%	84%	84%	76%	85%

<b>SUPPORT FROM A MAIN CONTACT PERSO</b>	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	*	100%	92%	92%	93%	100%	93%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	95%	92%	93%	96%	100%	94%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	91%	98%	97%	98%	100%	97%

DECIDING ON THE BEST TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	82%	87%	85%	84%	79%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	73%	84%	80%	88%	83%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	70%	90%	84%	91%	83%	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	50%	72%	63%	62%	*	63%

# Age group tables

CARE PLANNING					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	76%	77%	72%	75%	60%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	82%	95%	98%	97%	*	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	100%	100%	98%	*	99%

SUPPORT FROM HOSPITAL STAFF					Age		-		
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	*	*	100%	92%	94%	93%	100%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	68%	81%	81%	83%	89%	81%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	76%	74%	77%	66%	*	73%

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	*	*	*	*	82%	83%	85%	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	75%	78%	76%	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	71%	69%	74%	*	70%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	82%	74%	87%	*	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	73%	76%	68%	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	88%	83%	90%	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	82%	89%	92%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	94%	88%	89%	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	70%	91%	85%	92%	88%	88%

# Age group tables

YOUR TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	93%	94%	95%	100%	77%	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	78%	87%	80%	94%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	82%	91%	92%	96%	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	94%	93%	92%	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	92%	89%	92%	*	92%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	100%	97%	95%	95%	83%	95%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	65%	89%	80%	83%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	91%	87%	79%	96%	*	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	88%	86%	89%	*	85%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	92%	84%	92%	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	77%	82%	79%	88%	65%	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	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	*	*	*	73%	77%	75%	77%	70%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	59%	79%	69%	75%	56%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	81%	92%	83%	91%	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	59%	63%	60%	65%	63%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	47%	66%	55%	60%	67%	60%

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	*	*	*	61%	69%	58%	71%	70%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	53%	51%	59%	*	54%

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	*	*	*	42%	43%	38%	43%	*	41%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	14%	20%	14%	15%	11%	15%

# Age group tables

LIVING WITH AND BEYOND CANCER			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	33%	33%	39%	*	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	85%	81%	90%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	53%	71%	68%	70%	60%	68%

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	*	*	*	86%	92%	91%	93%	100%	92%
Q57. Administration of care was very good or good	*	*	*	86%	95%	90%	91%	95%	91%
Q58. Cancer research opportunities were discussed with patient	*	*	*	25%	44%	37%	39%	*	38%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	9.0	9.3	9.2	9.2	9.4	9.2

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	87%	71%	*	*	*	*	81%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	68%	53%	*	*	*	*	62%	

DIAGNOSTIC TESTS			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	93%	*	*	*	*	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	89%	*	*	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	84%	89%	*	*	*	*	87%
Q8. Diagnostic test results were explained in a way the patient could completely understand	85%	78%	*	*	*	*	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	98%	*	*	*	*	96%

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	85%	80%	*	*	*	*	84%
Q13. Patient was definitely told sensitively that they had cancer	79%	73%	*	*	*	*	77%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	72%	*	*	*	*	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	86%	*	*	*	*	86%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	82%	*	*	*	*	85%

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	94%	94%	*	*	*	*	93%	
Q18. Patient found it very or quite easy to contact their main contact person	94%	94%	*	*	*	*	94%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	98%	*	*	*	*	97%	

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	84%	*	*	*	*	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	86%	80%	*	*	*	*	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	86%	85%	*	*	*	*	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	63%	62%	*	*	*	*	63%

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	68%	78%	*	*	*	*	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	98%	*	*	*	*	96%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	*	*	*	*	99%	

SUPPORT FROM HOSPITAL STAFF		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q27. Staff provided the patient with relevant information on available support	93%	95%	*	*	*	*	94%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	84%	*	*	*	*	81%	
Q29. Patient was offered information about how to get financial help or benefits	78%	68%	*	*	*	*	73%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	79%	91%	*	*	*	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	73%	86%	*	*	*	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	67%	*	*	*	*	70%
Q34. Patient was always able to get help from ward staff when needed	71%	89%	*	*	*	*	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	83%	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	89%	*	*	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	88%	93%	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	88%	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	86%	89%	*	*	*	*	88%

YOUR TREATMENT			Male/Fema	ale/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	93%	96%	*	*	*	*	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	89%	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	91%	*	*	*	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	89%	91%	*	*	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	86%	100%	*	*	*	*	92%
Q42_1. Patient completely had enough understandable nformation about their response to surgery	95%	95%	*	*	*	*	95%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	78%	89%	*	*	*	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	85%	91%	*	*	*	*	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	83%	87%	*	*	*	*	85%
242_5. Patient completely had enough understandable information about their response to immunotherapy	73%	100%	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	81%	83%	*	*	*	*	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	76%	*	*	*	*	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	71%	*	*	*	*	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	89%	*	*	*	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	64%	*	*	*	*	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	60%	59%	*	*	*	*	60%

SUPPORT WHILE AT HOME			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	60%	74%	*	*	*	*	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	56%	*	*	*	*	54%

CARE FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	49%	33%	*	*	*	*	41%
Q52. Patient has had a review of cancer care by GP practice	17%	12%	*	*	*	*	15%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	34%	28%	*	*	*	*	34%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	86%	*	*	*	*	84%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	72%	*	*	*	*	68%	

YOUR OVERALL NHS CARE	Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q56. The whole care team worked well together	90%	95%	*	*	*	*	92%	
Q57. Administration of care was very good or good	89%	91%	*	*	*	*	91%	
Q58. Cancer research opportunities were discussed with patient	44%	31%	*	*	*	*	38%	
Q59. Patient's average rating of care scored from very poor to very good	9.2	9.2	*	*	*	*	9.2	

# **Ethnicity tables**

SUPPORT FROM YOUR GP PRACTICE	Ethnicity				city		
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	81%	*	*	*	*	*	81%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	*	*	*	*	70%	62%

DIAGNOSTIC TESTS		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	93%	*	*	*	*	94%	93%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	86%	*	*	*	*	94%	86%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	*	*	*	*	94%	87%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	*	*	*	*	84%	82%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	95%	96%	

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	83%	*	*	*	*	90%	84%	
Q13. Patient was definitely told sensitively that they had cancer	76%	*	*	*	*	82%	77%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	*	*	*	*	77%	74%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	*	*	*	*	87%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	85%	*	*	*	*	83%	85%	

SUPPORT FROM A MAIN CONTACT PERSO	N	Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	94%	*	*	*	*	76%	93%
Q18. Patient found it very or quite easy to contact their main contact person	94%	*	*	*	*	93%	94%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	*	*	93%	97%

DECIDING ON THE BEST TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	*	*	*	*	100%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	*	*	*	*	91%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	*	*	*	*	95%	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	63%	*	*	*	*	62%	63%

# **Ethnicity tables**

CARE PLANNING							
	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	73%	*	*	*	*	81%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	*	*	*	*	100%	96%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	*	*	*	*	99%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	94%	*	*	*	*	86%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	80%	*	*	*	*	91%	81%
Q29. Patient was offered information about how to get financial help or benefits	75%	*	*	*	*	47%	73%

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	84%	*	*	*	*	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	78%	*	*	*	*	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	*	*	*	*	*	70%
Q34. Patient was always able to get help from ward staff when needed	79%	*	*	*	*	*	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	71%	*	*	*	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	*	*	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	90%	*	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	*	*	*	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	87%	*	*	*	*	95%	88%

# **Ethnicity tables**

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	*	*	*	*	100%	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	*	*	*	*	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	90%	*	*	*	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	93%	*	*	*	*	*	92%
Q42_1. Patient completely had enough understandable information about their response to surgery	95%	*	*	*	*	90%	95%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	*	*	*	*	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	*	*	*	*	*	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	85%	*	*	*	*	*	85%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	87%	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	82%	*	*	*	*	81%	82%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	*	*	*	*	62%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	*	*	*	*	89%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	*	*	*	*	82%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	*	*	*	*	74%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	*	*	*	*	69%	60%

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	65%	*	*	*	*	69%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54%	*	*	*	*	*	54%

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	40%	*	*	*	*	33%	41%
Q52. Patient has had a review of cancer care by GP practice	15%	*	*	*	*	14%	15%

# **Ethnicity tables**

LIVING WITH AND BEYOND CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	34%	*	*	*	*	*	34%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	84%	*	*	*	*	83%	84%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	*	*	*	*	67%	68%	

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	92%	*	*	*	*	91%	92%
Q57. Administration of care was very good or good	90%	*	*	*	*	100%	91%
Q58. Cancer research opportunities were discussed with patient	39%	*	*	*	*	33%	38%
Q59. Patient's average rating of care scored from very poor to very good	9.2	*	*	*	*	9.5	9.2

# **IMD** quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile						
	1 (most deprived) 2 3 4 5 (least deprived) Eng						All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77%	85%	77%	86%	81%	*	81%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	81%	58%	59%	58%	61%	*	62%

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	92%	92%	95%	94%	96%	*	93%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	81%	93%	86%	87%	*	86%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	93%	84%	81%	78%	*	87%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	93%	82%	78%	81%	83%	*	82%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	93%	98%	97%	96%	*	96%		

FINDING OUT THAT YOU HAD CANCER	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	90%	83%	83%	80%	78%	*	84%
Q13. Patient was definitely told sensitively that they had cancer	76%	72%	82%	76%	78%	*	77%
Q14. Cancer diagnosis explained in a way the patient could completely understand	87%	72%	76%	62%	75%	*	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	86%	90%	81%	83%	*	86%
Q16. Patient was told they could go back later for more information about their diagnosis	88%	84%	86%	81%	83%	*	85%

SUPPORT FROM A MAIN CONTACT PERSO	N	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	87%	93%	96%	96%	87%	*	93%
Q18. Patient found it very or quite easy to contact their main contact person	85%	92%	100%	95%	90%	*	94%
Q19. Patient found advice from main contact person was very or quite helpful	93%	97%	99%	98%	95%	*	97%

## **IMD** quintile tables

DECIDING ON THE BEST TREATMENT			IIV	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	86%	82%	90%	78%	78%	*	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	90%	80%	84%	87%	75%	*	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	87%	88%	85%	85%	76%	*	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	68%	63%	67%	50%	58%	*	63%

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	66%	76%	76%	66%	73%	*	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	99%	99%	92%	88%	*	96%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	98%	98%	100%	100%	*	99%	

SUPPORT FROM HOSPITAL STAFF		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q27. Staff provided the patient with relevant information on available support	95%	91%	95%	95%	100%	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	80%	85%	80%	71%	*	81%
Q29. Patient was offered information about how to get financial help or benefits	81%	69%	73%	71%	80%	*	73%

HOSPITAL CARE			IN	1D 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	88%	83%	82%	93%	*	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	64%	88%	71%	85%	*	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	81%	68%	67%	80%	*	*	70%
Q34. Patient was always able to get help from ward staff when needed	88%	86%	73%	92%	*	*	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	69%	83%	55%	85%	*	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	100%	97%	79%	83%	*	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	88%	91%	88%	93%	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	82%	88%	93%	86%	*	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	83%	88%	90%	87%	90%	*	88%

## **IMD** quintile tables

YOUR TREATMENT			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	96%	92%	98%	95%	80%	*	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	92%	83%	90%	71%	93%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	88%	100%	*	*	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	79%	97%	100%	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	100%	94%	*	*	*	92%
Q42_1. Patient completely had enough understandable information about their response to surgery	100%	94%	95%	95%	80%	*	95%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	92%	81%	83%	68%	79%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	80%	81%	97%	*	*	*	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	73%	80%	94%	93%	*	*	85%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	86%	100%	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	83%	77%	87%	88%	*	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	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	76%	71%	82%	67%	83%	*	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	76%	71%	77%	58%	74%	*	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	92%	86%	92%	86%	78%	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	64%	67%	49%	63%	*	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	63%	64%	47%	60%	*	60%

SUPPORT WHILE AT HOME	IMD quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	79%	67%	62%	48%	79%	*	66%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54%	53%	54%	60%	*	*	54%	

CARE FROM YOUR GP PRACTICE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	37%	42%	45%	*	*	41%
Q52. Patient has had a review of cancer care by GP practice	24%	15%	14%	8%	14%	*	15%

# Cancer Patient Experience Survey 2023 James Paget University Hospitals NHS Foundation Trust

## **IMD** quintile tables

LIVING WITH AND BEYOND CANCER		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	40%	26%	35%	*	*	*	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	95%	90%	78%	67%	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	74%	68%	71%	56%	57%	*	68%

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%	96%	89%	86%	*	92%
Q57. Administration of care was very good or good	87%	89%	93%	90%	100%	*	91%
Q58. Cancer research opportunities were discussed with patient	47%	38%	35%	33%	40%	*	38%
Q59. Patient's average rating of care scored from very poor to very good	9.4	9.1	9.3	9.2	9.2	*	9.2

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	83%	77%	*	81%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	61%	73%	62%			

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	93%	95%	94%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	89%	95%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	86%	85%	95%	87%
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	82%	80%	82%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	98%	90%	96%

FINDING OUT THAT YOU HAD CANCER		Long-term condition status		
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	87%	76%	83%	84%
Q13. Patient was definitely told sensitively that they had cancer	78%	73%	74%	77%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	78%	74%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	82%	86%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	85%	86%	85%

SUPPORT FROM A MAIN CONTACT PERSO	Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	94%	94%	84%	93%
Q18. Patient found it very or quite easy to contact their main contact person	92%	96%	100%	94%
Q19. Patient found advice from main contact person was very or quite helpful	97%	98%	100%	97%

DECIDING ON THE BEST TREATMENT		Long-term con-	dition status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	83%	100%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	82%	84%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	86%	84%	91%	86%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	62%	63%	71%	63%

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	69%	81%	87%	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	96%	100%	96%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	100%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	93%	97%	91%	94%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	86%	93%	81%	
Q29. Patient was offered information about how to get financial help or benefits	71%	83%	59%	73%	

HOSPITAL CARE		Long-term cor	ndition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	84%	84%	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	78%	82%	*	77%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	66%	81%	*	70%
Q34. Patient was always able to get help from ward staff when needed	78%	81%	*	80%
Q35. Patient was always able to discuss worries and fears with hospital staff	69%	73%	*	71%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	81%	*	87%
Q37. Patient was always treated with respect and dignity while in hospital	90%	91%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	94%	*	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	84%	95%	100%	88%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	94%	100%	94%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	82%	93%	100%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	94%	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	88%	94%	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	90%	100%	*	92%
Q42_1. Patient completely had enough understandable information about their response to surgery	93%	98%	*	95%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	87%	82%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	88%	*	87%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	79%	94%	*	85%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	83%	92%	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	89%	71%	82%

<b>IMMEDIATE AND LONG TERM SIDE EFFECTS</b>		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	75%	80%	67%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	78%	81%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	91%	70%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	64%	63%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	59%	67%	60%

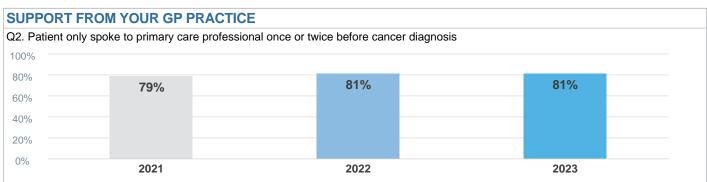
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	66%	65%	69%	66%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	53%	*	54%	

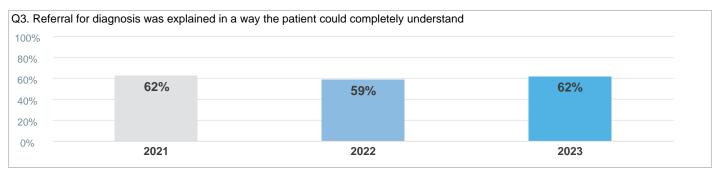
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	40%	42%	38%	41%	
Q52. Patient has had a review of cancer care by GP practice	17%	11%	15%	15%	

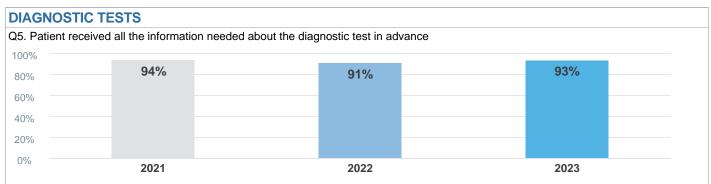
LIVING WITH AND BEYOND CANCER		Long-term con		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	37%	9%	*	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	89%	82%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	70%	58%	68%

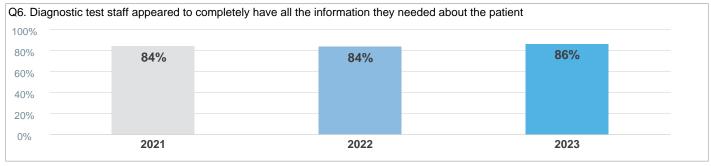
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given				
Q56. The whole care team worked well together	92%	93%	85%	92%	
Q57. Administration of care was very good or good	89%	91%	100%	91%	
Q58. Cancer research opportunities were discussed with patient	35%	46%	42%	38%	
Q59. Patient's average rating of care scored from very poor to very good	9.2	9.3	9.3	9.2	

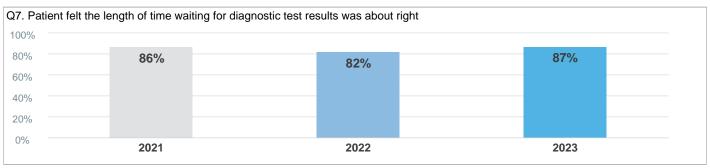


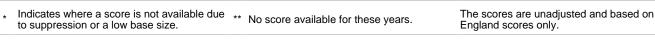


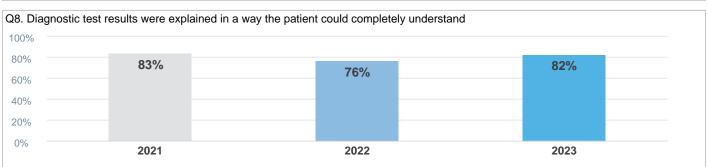


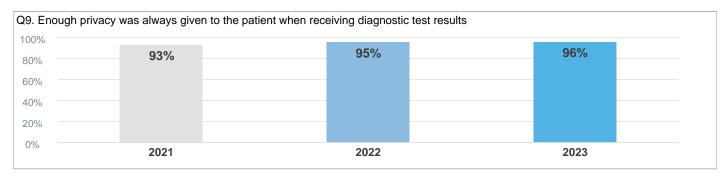


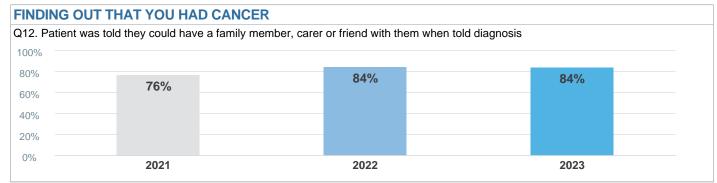


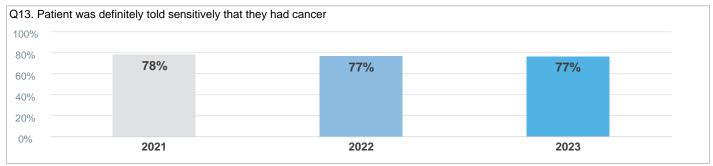


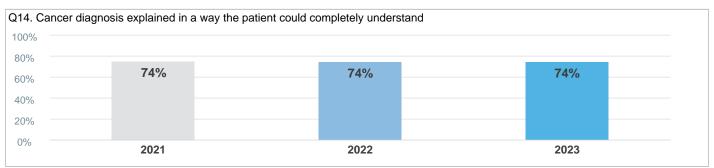


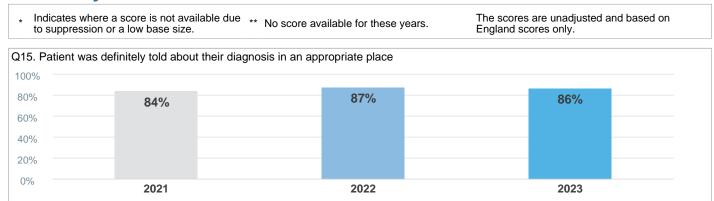


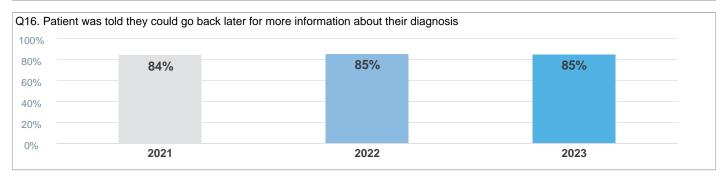


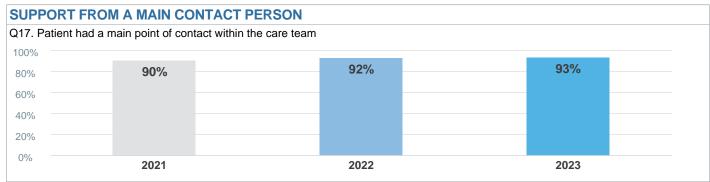


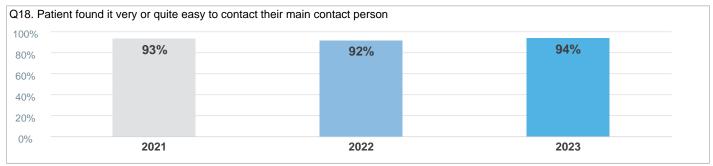


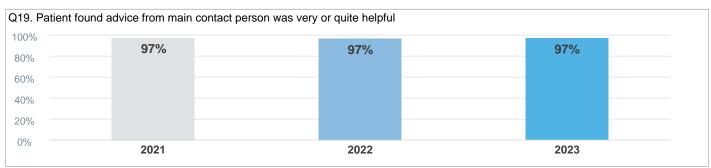




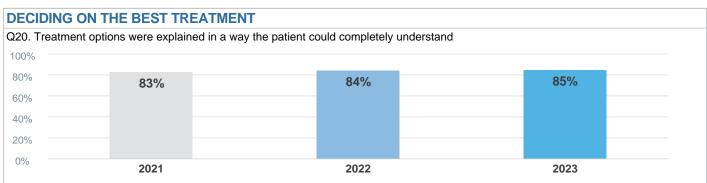


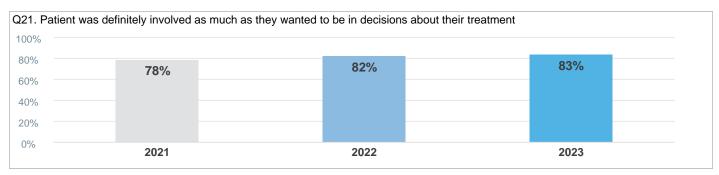


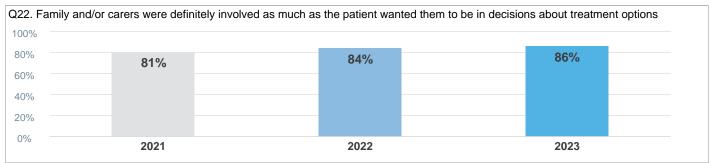


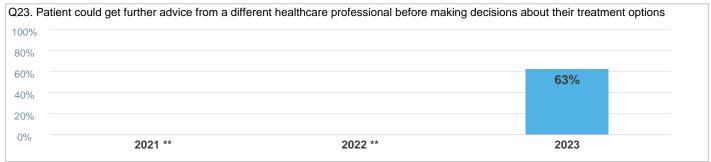


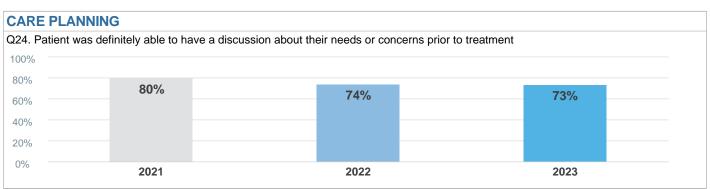


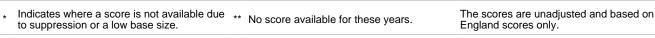


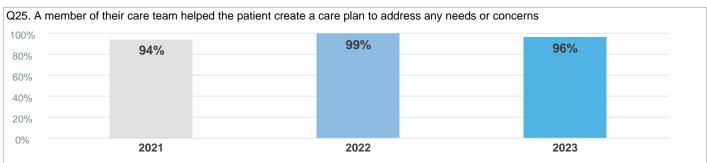


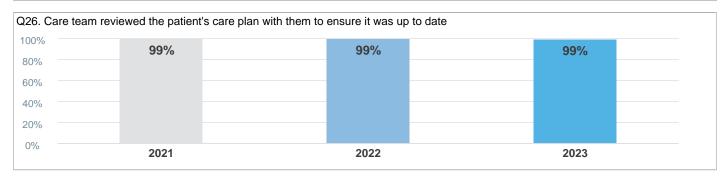


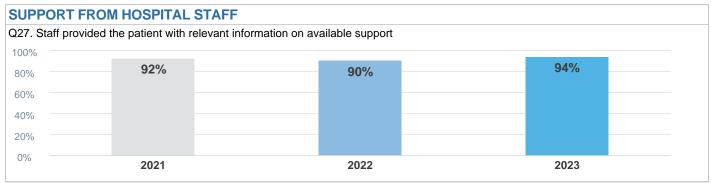


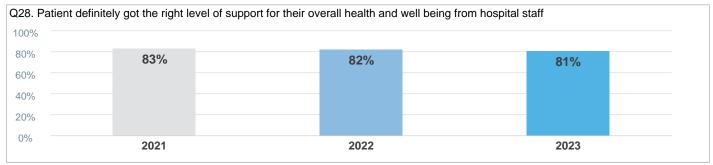


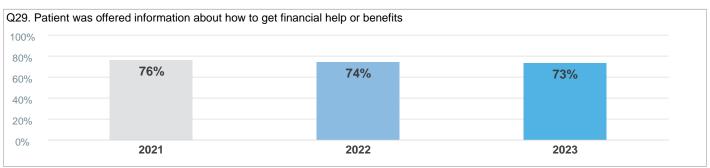




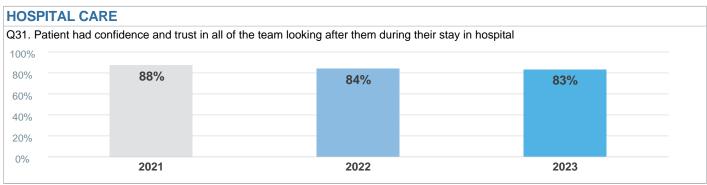


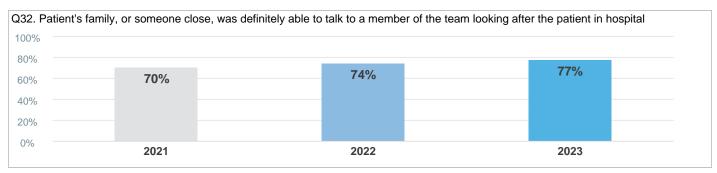


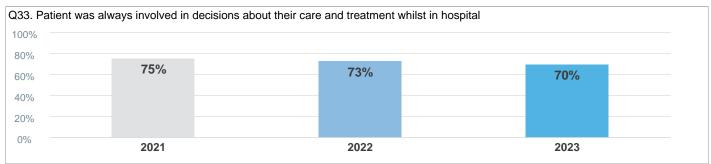


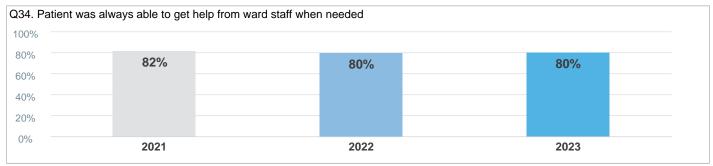


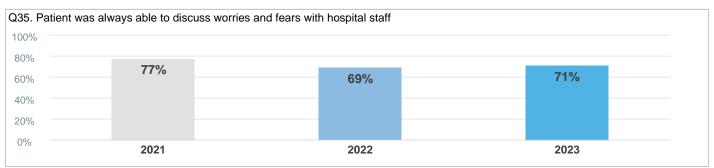


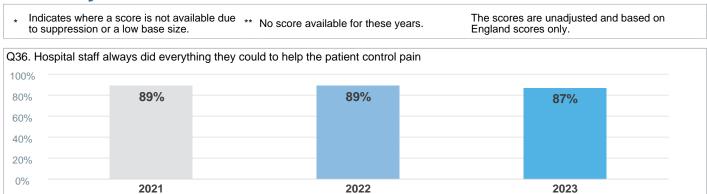


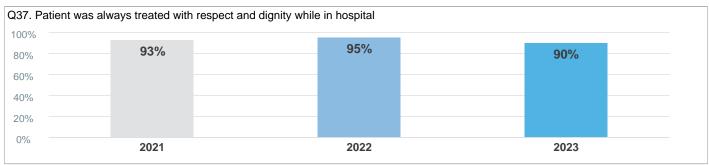


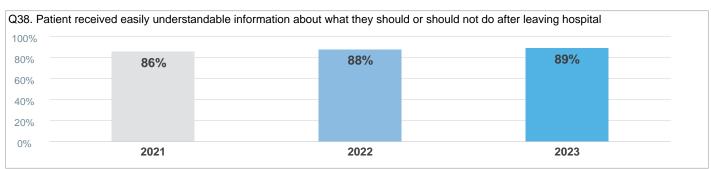


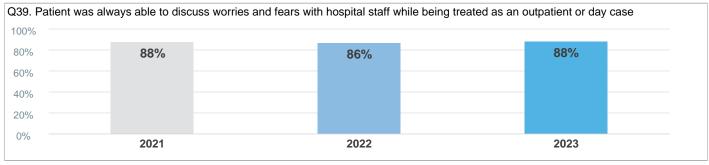


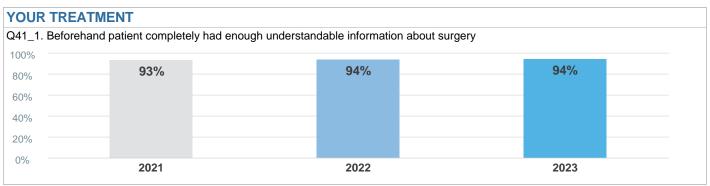




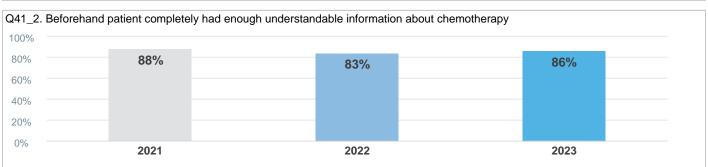


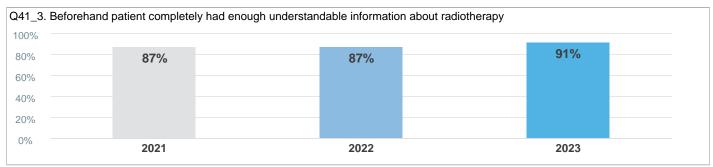


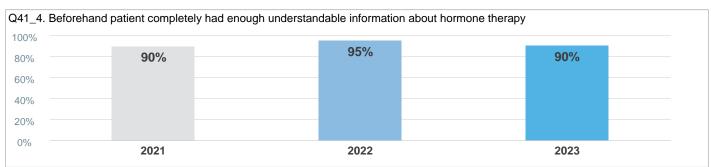


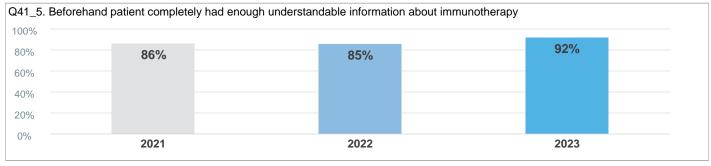


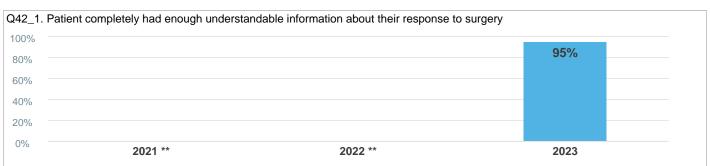






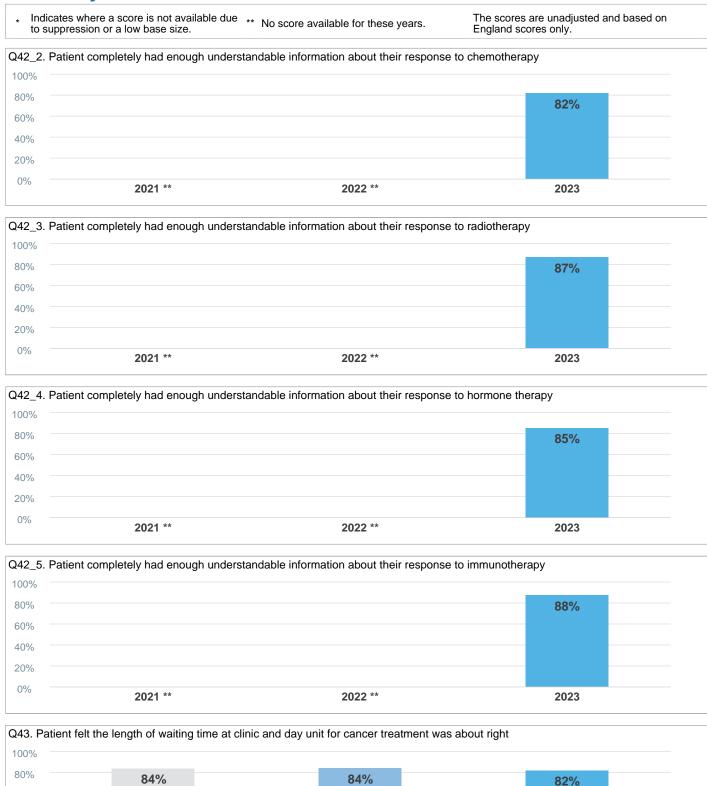






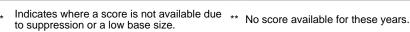
60% 40% 20% 0%

2021

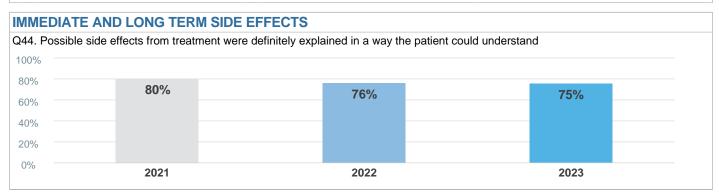


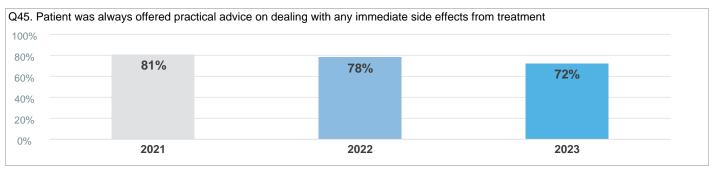
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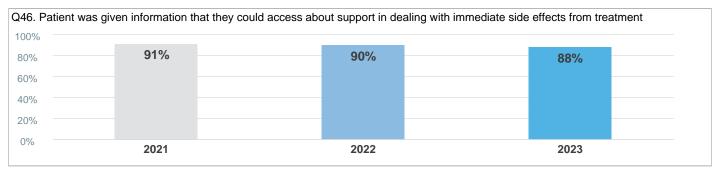
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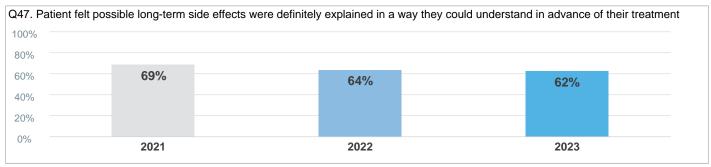


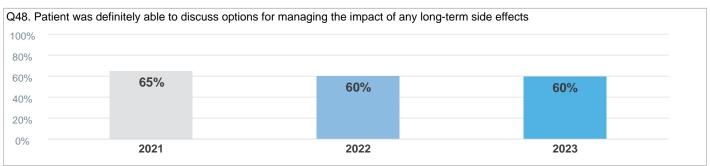
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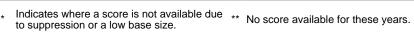




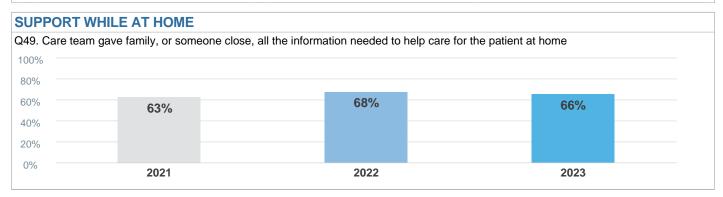


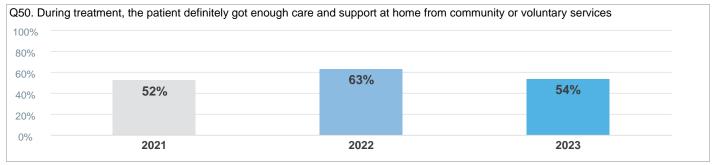


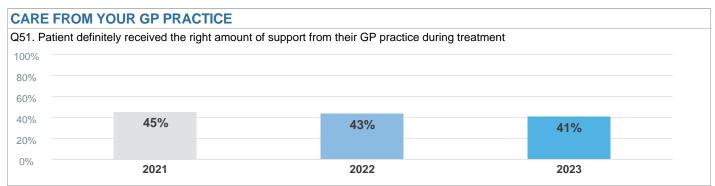


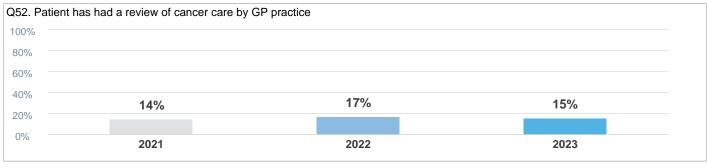


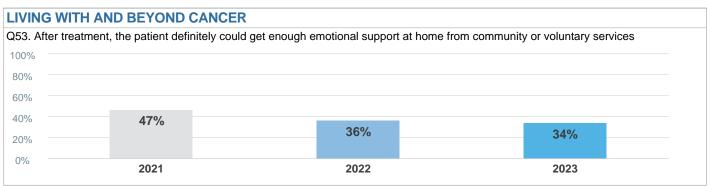
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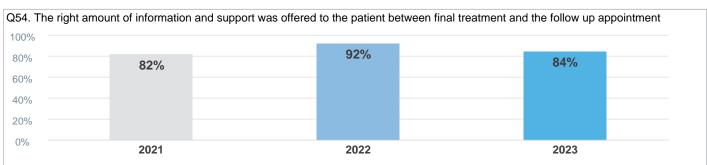


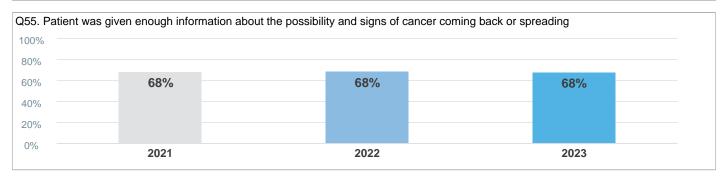


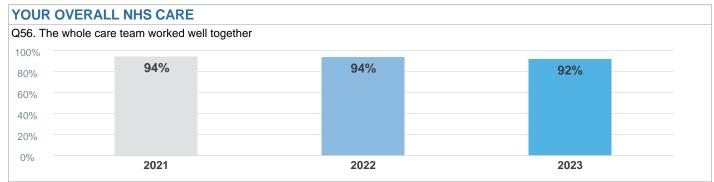


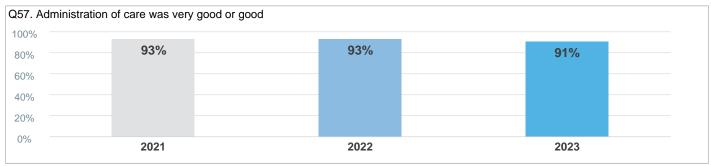


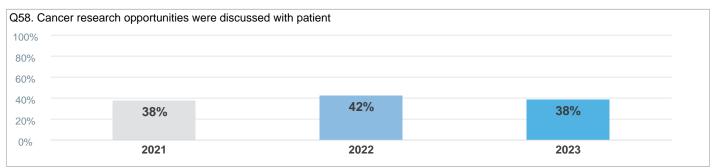












## Cancer Patient Experience Survey 2023 James Paget University Hospitals NHS Foundation Trust

