

Cancer Patient Experience Survey

2023 Results

Moorfields Eye Hospital NHS Foundation Trust

Published July 2024

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

Contents

Executive summary	3
	4
Methodology	4
Understanding the results	5
Further information	7
Response rate	8
Expected range charts	10
Comparability tables	14
Tumour group tables	18
Age group tables	23
Male/Female/Non-binary/Other tables	27
Ethnicity tables	32
IMD quintile tables	36
Long-term condition status tables	40
Year on year charts	44

Executive summary

Questions above expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	National score
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	90%	53%	88%	70%
Q34. Patient was always able to get help from ward staff when needed	90%	56%	89%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	86%	46%	83%	65%

Questions below expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	National score
Q5. Patient received all the information needed about the diagnostic test in advance	79%	83%	100%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	65%	71%	96%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	86%	87%	100%	95%
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	66%	68%	94%	81%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	90%	93%	100%	99%
Q29. Patient was offered information about how to get financial help or benefits	45%	46%	94%	70%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	74%	77%	100%	89%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	33%	35%	74%	55%
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	41%	43%	80%	62%

Introduction

The National Cancer Patient Experience Survey 2023 is the thirteenth iteration of the survey first undertaken in 2010. It has been designed to monitor progress on cancer care; to provide information to drive local quality improvements; to assist commissioners and providers of cancer care; and to inform the work of the various charities and stakeholder groups supporting cancer patients.

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

The 2023 survey involved 132 NHS Trusts. Out of 121,121 people, 63,428 people responded to the survey, yielding a response rate of 52%.

Methodology

Eligibility, fieldwork and survey methods

The sample for the survey included all adult (aged 16 and over) NHS patients, with a confirmed primary diagnosis of cancer, discharged from an NHS Trust after an inpatient episode or day case attendance for cancer related treatment in the months of April, May and June 2023. The fieldwork for the survey was undertaken between November 2023 and February 2024.

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

Note on question comparability

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

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

Case-mix adjustment

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

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

Scoring methodology

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

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

In 2022, following a review of the scoring methodology, a change was made to the scoring of Q12 such that the response option "No, I was told by letter or email" is no longer considered neutral and is now scored as negative.

Statistical significance

In the reporting of 2023 results, appropriate statistical tests have been undertaken to identify unadjusted scores for which the change over time is 'statistically significant'. A statistically significant difference means that the change in the result is very unlikely to have occurred by chance.

Suppression

Data is suppressed for two reasons: to ensure unreliable results based on very small numbers of respondents are not released, and to prevent individuals being identifiable in the data.

In cases where a result is based on fewer than 10 responses, the result has been suppressed. For example, where fewer than 10 people answered a question from a particular Trust, the results are not shown for that question for that Trust.

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

Additional suppression

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

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

Understanding the results

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

Expected range charts

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

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

Comparability tables

The comparability tables show the 2022 and 2023 unadjusted scores for this Trust for each scored question. The Change 2022-2023 and Change overall columns show whether the scores show a statistically significant variation between years. This is shown between 2022-2023 and as an overall

between 2021-2023. An upwards arrow indicates a statistically significant increase, a downwards arrow indicates a statistically significant decrease and no arrow indicates no statistically significant change.

The adjusted 2023 score will also be presented for each scored question along with the lower and upper expected range and national score. Scores above the upper limit of the expected range will be highlighted dark blue, scores below the lower limit of the expected range will be highlighted light blue, and scores within the lower and upper limit of the expected ranges will be highlighted grey.

Sub-group breakdowns

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

Tumour group tables

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

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

The year on year charts show three columns representing the unadjusted scores of the last three years (2021, 2022 and 2023) for each scored question.

National level and England level data

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

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

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

England only level data is used for:

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

Further information

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

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

Response rate

Overall response rate

44 patients responded out of a total of 82 patients, resulting in a response rate of 54%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	83	82	44	54%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	35
Online	9
Phone	0
Translation service	0
Total	44

Respondents by tumour group

	Number of respondents
Brain / CNS	0
Breast	0
Colorectal / LGT	0
Gynaecological	0
Haematological	0
Head and neck	0
Lung	0
Prostate	0
Sarcoma	0
Skin	0
Upper gastro	0
Urological	0
Other	44
Total	44

Respondents by ethnicity

	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	42
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	
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	*
Any other ethnic group	*
Not given	
Not given	0
Total	44

* indicates the count is not shown due to suppression

Expected range charts

Lower expected range	Within expected range			Upper	expecte	ed range	Э	•	Case r	nix adju	sted sc	ore
The left outer edge of the bars is the lo	west score achieved of all Trust	s. The	right ou	ter edge	e of the	bars is t	he high	est scor	e achie	ved of a	ll Trusts	6.
SUPPORT FROM YOUR GP	PRACTICE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q2. Patient only spoke to primary obfore cancer diagnosis	care professional once or twi	ce										
Q3. Referral for diagnosis was exp could completely understand	lained in a way the patient											
DIAGNOSTIC TESTS		0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q5. Patient received all the information diagnostic test in advance	ation needed about the									79% ♦		
Q6. Diagnostic test staff appeared information they needed about the	to completely have all the patient							65	%			
Q7. Patient felt the length of time v results was about right	vaiting for diagnostic test									82%)	
Q8. Diagnostic test results were excould completely understand	plained in a way the patient								69% ♦			
Q9. Enough privacy was always gi receiving diagnostic test results	ven to the patient when									80	6% ◆	
FINDING OUT THAT YOU H	AD CANCER	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q12. Patient was told they could h friend with them when told diagnos	ave a family member, carer o is	or							6% ◆			
Q13. Patient was definitely told set	nsitively that they had cancer							6	7% ♦			
Q14. Cancer diagnosis explained i completely understand	n a way the patient could								75	5% •		
Q15. Patient was definitely told about appropriate place	out their diagnosis in an									80% ♦		
Q16. Patient was told they could g information about their diagnosis	o back later for more										38% ◆	
SUPPORT FROM A MAIN C	ONTACT PERSON	0%	10%	20%	30%	40%	50%	60%	70%	80%		100%
Q17. Patient had a main point of co	ontact within the care team										92% ♦	
Q18. Patient found it very or quite contact person	easy to contact their main									85	%	
Q19. Patient found advice from ma quite helpful	in contact person was very o	or									91% ♦	

Expected range charts

Lower expected range Within expected range The left outer edge of the bars is the lowest score achieved of all Tru		ne right ou			ed range bars is t				nix adju ved of a		
DECIDING ON THE BEST TREATMENT Q20. Treatment options were explained in a way the patient could completely understand Q21. Patient was definitely involved as much as they wanted be in decisions about their treatment Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options Q23. Patient could get further advice from a different healthca professional before making decisions about their treatment options	t	5 10%	20%	30%	40%	50% 48% ♦	60%		80% 5% 839 \$39 \$39	6	100%
CARE PLANNING Q24. Patient was definitely able to have a discussion about th needs or concerns prior to treatment Q25. A member of their care team helped the patient create a care plan to address any needs or concerns Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	l	5 10%	20%	30%	40%	50%	60%	70% 57% ◆	80%	90% 89% ♦ 90%	100%
SUPPORT FROM HOSPITAL STAFF Q27. Staff provided the patient with relevant information on available support Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff Q29. Patient was offered information about how to get financi help or benefits	0%	. 10%	20%	30%	40%	50% 5%	60%	70% 6% ♦	80%	90% 7% ♦	100%
 HOSPITAL CARE Q31. Patient had confidence and trust in all of the team lookin after them during their stay in hospital Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospi Q33. Patient was always involved in decisions about their car and treatment whilst in hospital Q34. Patient was always able to get help from ward staff whe needed Q35. Patient was always able to discuss worries and fears withospital staff Q36. Hospital staff always did everything they could to help the patient control pain Q37. Patient was always treated with respect and dignity whilh hospital Q38. Patient received easily understandable information about what they should or should not do after leaving hospital Q39. Patient was always able to discuss worries and fears withospital staff while being treated as an outpatient or day case 	o tal e n th e in ut	5 10%	20%	30%	40%	50%	60%	70% 73% ♦ 69%	8(100% 6% ♦ 77% ♦

Expected range charts

e left outer edge of the bars is the lowest score DUR TREATMENT 41_1. Beforehand patient completely had e derstandable information about surgery 41_2. Beforehand patient completely had e derstandable information about chemother 41_3. Beforehand patient completely had e derstandable information about radiotheral 41_4. Beforehand patient completely had e derstandable information about hormone the 41_5. Beforehand patient completely had e derstandable information about hormone the 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemother 42_3. Patient completely had enough unde ormation about their response to radiotheral 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to inmunotheral 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we plained in a way the patient could understand	enough rapy enough py enough herapy erough erapy erstandable erstandable erstandable apy erstandable therapy erstandable therapy	. The 0%	109			30%	40%	50%		70% 74%	80% 80% ♦	90%	
 41_1. Beforehand patient completely had enderstandable information about surgery 41_2. Beforehand patient completely had enderstandable information about chemother 41_3. Beforehand patient completely had enderstandable information about radiotherand 41_4. Beforehand patient completely had enderstandable information about hormone the 41_5. Beforehand patient completely had enderstandable information about hormone the 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemother 42_3. Patient completely had enough unde ormation about their response to radiotherand 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_6. Patient completely had enough unde ormation about their response to hormone 42_6. Patient completely had enough unde ormation about their response to hormone 42_6. Patient completely had enough unde ormation about their response to immunother 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we 	enough rapy enough py enough herapy erough erapy erstandable erapy erstandable apy erstandable apy erstandable therapy erstandable	0%	109	⁶ 20	0%	30%	40%	50%	60%	749	80% ♦ 80%		1009
derstandable information about surgery 41_2. Beforehand patient completely had e derstandable information about chemother 41_3. Beforehand patient completely had e derstandable information about radiotheral 41_4. Beforehand patient completely had e derstandable information about hormone the 41_5. Beforehand patient completely had e derstandable information about hormone the 41_5. Beforehand patient completely had e derstandable information about immunothe 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemothe 42_3. Patient completely had enough unde ormation about their response to radiothera 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	enough rapy enough py enough herapy erough erapy erstandable erstandable erstandable apy erstandable therapy erstandable erstandable									749	◆ 80%		
derstandable information about chemother 41_3. Beforehand patient completely had e derstandable information about radiothera 41_4. Beforehand patient completely had e derstandable information about hormone the 41_5. Beforehand patient completely had e derstandable information about immunothe 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemothe 42_3. Patient completely had enough unde ormation about their response to radiothera 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 43. Patient completely had enough unde ormation about their response to immunothera 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	rapy enough py enough herapy erough erapy erstandable erapy erstandable apy erstandable therapy erstandable therapy									•	80%		
derstandable information about radiotheral 41_4. Beforehand patient completely had e derstandable information about hormone the 41_5. Beforehand patient completely had e derstandable information about immunothe 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemothe 42_3. Patient completely had enough unde ormation about their response to radiothera 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to immunoth 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	py enough herapy erough erstandable erstandable erstandable apy erstandable therapy erstandable									•	80%		
derstandable information about hormone the 41_5. Beforehand patient completely had en- derstandable information about immunother 42_1. Patient completely had enough under ormation about their response to surgery 42_2. Patient completely had enough under ormation about their response to chemother 42_3. Patient completely had enough under ormation about their response to radiother 42_4. Patient completely had enough under ormation about their response to hormone 42_5. Patient completely had enough under ormation about their response to hormone 42_5. Patient completely had enough under ormation about their response to immunother 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	herapy enough erapy erstandable erstandable erapy erstandable apy erstandable therapy										•	, ,	
derstandable information about immunothe 42_1. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemothe 42_3. Patient completely had enough unde ormation about their response to radiother 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to immunoth 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	erapy erstandable erstandable erapy erstandable apy erstandable therapy										•		
A2_2. Patient completely had enough unde ormation about their response to surgery 42_2. Patient completely had enough unde ormation about their response to chemothe area about their response to radiother 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to immunoth 13. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 14. Possible side effects from treatment we	erstandable erapy erstandable apy erstandable therapy erstandable										•		
Armation about their response to chemother at 2_3. Patient completely had enough under ormation about their response to radiother at 2_4. Patient completely had enough under ormation about their response to hormone at 2_5. Patient completely had enough under ormation about their response to immunoth at a patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE at Possible side effects from treatment we	erapy erstandable apy erstandable therapy erstandable										83%		
ormation about their response to radiothera 42_4. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to immunoth 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	apy erstandable therapy erstandable										83% ◆		
A2_5. Patient completely had enough unde ormation about their response to hormone 42_5. Patient completely had enough unde ormation about their response to immunoth 43. Patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 44. Possible side effects from treatment we	therapy erstandable												
A patient felt the length of waiting time at cancer treatment was about right MEDIATE AND LONG TERM SIDE 14. Possible side effects from treatment we	rstandable herapy												
 Cancer treatment was about right MEDIATE AND LONG TERM SIDE 14. Possible side effects from treatment we 													
14. Possible side effects from treatment we	clinic and day unit								67	7% ♦			
	EFFECTS	0%	10%	6 20	0%	30%	40%	50%	60%	70%	80%	90%	1009
									63% ♦				
45. Patient was always offered practical ad y immediate side effects from treatment	vice on dealing with	1							62%				
46. Patient was given information that they pport in dealing with immediate side effects		t								76	5%		
47. Patient felt possible long-term side effer plained in a way they could understand in a patment									60% ◆				
48. Patient was definitely able to discuss op e impact of any long-term side effects	otions for managing					33%	%						
JPPORT WHILE AT HOME		0%	10%	6 20	0%	30%	40%	50%	60%	70%	80%	90%	100
49. Care team gave family, or someone clo ormation needed to help care for the patier													

41%

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

Expected range charts

Lower expected range Within expected range The left outer edge of the bars is the lowest score achieved of all Trusts	. The				ed range bars is t		est scor	Case r	•		
CARE FROM YOUR GP PRACTICE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q51. Patient definitely received the right amount of support from their GP practice during treatment			11		45	5% •					
Q52. Patient has had a review of cancer care by GP practice			22% ♦	, D							
LIVING WITH AND BEYOND CANCER	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	S				43% ♦	6					
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment								70% ♦			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading								71% ♦			
YOUR OVERALL NHS CARE	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Q56. The whole care team worked well together									83% ♦	6	
Q57. Administration of care was very good or good									81% ♦		
Q58. Cancer research opportunities were discussed with patient						50% •					
Q59. Patient's average rating of care scored from very poor to very good	0	1	2	3	4	5	6	7	8	9 8.7 ♦	10

Comparability tables

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

ra ▲ _{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

	IOW DASE SIZE.
**	No score available for 2022.

			Unadjust	ted score		Case n				
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	**	**	*	*			*			78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	**	**	*	*			*			67%

			Unadjus	ted score	es		Case n	ed scores		
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q5. Patient received all the information needed about the diagnostic test in advance	35	83%	28	79%			79%	83%	100%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	39	90%	33	61%			65%	71%	96%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	38	82%	34	79%			82%	63%	92%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	39	79%	34	68%			69%	65%	92%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	39	92%	34	85%			86%	87%	100%	95%

			Unadjus	ted score	es		Case n	ed scores		
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	41	73%	35	60%			66%	68%	94%	81%
Q13. Patient was definitely told sensitively that they had cancer	46	65%	41	63%			67%	61%	88%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	46	76%	43	72%			75%	64%	89%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	46	85%	43	79%			80%	75%	96%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	39	90%	40	85%			88%	73%	95%	84%

			Unadjust	ted score	s		Case n	nix adjuste	d 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	44	93%	41	88%			92%	82%	100%	91%
Q18. Patient found it very or quite easy to contact their main contact person	32	91%	32	84%			85%	71%	97%	84%
Q19. Patient found advice from main contact person was very or quite helpful	37	100%	32	91%			91%	89%	100%	96%

Comparability tables

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

^a ▲ _{or} ▼

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

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

** No score available for 2022.

		-	Unadjus	ted score	s		Case n	ed 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	43	79%	41	76%			75%	71%	94%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	46	89%	40	83%			83%	67%	92%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	41	85%	31	84%			83%	70%	97%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	18	44%			48%	34%	80%	57%

			Unadjust	ed score	s		Case n	nix adjuste	d scores	
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	39	72%	36	67%			67%	58%	87%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	20	95%	18	89%			89%	82%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	12	100%	12	92%		▼	90%	93%	100%	99%

			Unadjust	ted score	es		Case n	d scores		
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	37	84%	32	84%			87%	81%	100%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	45	73%	41	66%			66%	62%	89%	76%
Q29. Patient was offered information about how to get financial help or benefits	15	33%	14	43%			45%	46%	94%	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 Adjusted Score above Upper Expected Range

	IOW DASE SIZE.
*	No score available for 2022.

			Unadjus	ted score	es		Case r	nix adjuste	ed scores	
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	30	80%	28	86%			87%	62%	93%	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	22	82%	21	71%			73%	50%	90%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	29	76%	27	89%			90%	53%	88%	70%
Q34. Patient was always able to get help from ward staff when needed	28	86%	28	89%			90%	56%	89%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	29	69%	26	85%			86%	46%	83%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	25	92%	22	95%			96%	69%	99%	84%
Q37. Patient was always treated with respect and dignity while in hospital	30	87%	28	96%			97%	75%	100%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	30	100%	28	86%			89%	76%	100%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	35	74%	32	69%			69%	65%	93%	79%
			Unadjus	ted score	es		Case r	nix adjuste	ed scores	
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q41_1. Beforehand patient completely had enough understandable information about surgery	36	86%	33	79%			80%	80%	100%	90%
Q41_2. Beforehand patient completely had enough	**	**	*	*			*			86%

36	86%	33	79%	80%	80%	100%	90%
**	**	*	*	*			86%
32	91%	27	74%	74%	77%	100%	89%
**	**	*	*	*			79%
**	**	*	*	*			84%
**	**	33	79%	80%	75%	98%	86%
**	**	*	*	*			81%
**	**	27	81%	83%	72%	98%	85%
**	**	*	*	*			76%
**	**	*	*	*			81%
46	74%	40	68%	67%	64%	93%	78%
	** 32 ** ** ** ** ** ** **	** ** 32 91% ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** **	*** *** * 32 91% 27 ** ** * *** ** * *** ** * *** ** 33 *** ** * *** ** * *** ** * *** ** * *** ** * *** ** * *** ** * *** ** *	*** *** * * 32 91% 27 74% *** ** * * *** ** * * *** ** * * *** ** * * *** ** * * *** ** 33 79% *** ** * * *** ** * * *** ** * * *** ** * * *** ** * * *** ** * *	*** ** * * * 32 91% 27 74% 74% ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** 33 79% 80% ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * * ** ** * *	*** ** * * * * 32 91% 27 74% 74% 77% *** ** * * * * * *** ** * * * * * *** ** * * * * * *** ** * * * * * *** ** 33 79% 80% 75% *** ** 33 79% 80% 75% *** ** * * * * * *** ** 27 81% * * * *** ** * * * * * *** ** * * * * * * *** ** * * * * * * *** *** * * * * * * *** ***	*** ** *

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.

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	43	70%	39	64%			63%	61%	88%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	39	51%	37	65%			62%	55%	85%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	29	79%	26	77%			76%	74%	100%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	39	62%	40	58%			60%	45%	75%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	33	39%	25	32%			33%	35%	74%	55%

			Unadjust	ed score	s		Case m			
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	31	71%	27	41%			41%	43%	80%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	**	**	12	42%			41%	24%	81%	52%

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	17	53%	18	44%			45%	23%	69%	46%
Q52. Patient has had a review of cancer care by GP practice	44	20%	41	22%			22%	10%	35%	23%

			Unadjust	ted score	s		Case n	nix adjuste	d scores	
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	11	18%	14	43%			43%	8%	57%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	26	77%	32	72%			70%	65%	94%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	43	74%	38	71%			71%	48%	79%	64%

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q56. The whole care team worked well together	43	86%	40	83%			83%	81%	99%	90%
Q57. Administration of care was very good or good	44	86%	41	80%			81%	77%	97%	87%
Q58. Cancer research opportunities were discussed with patient	19	26%	19	47%			50%	21%	69%	45%
Q59. Patient's average rating of care scored from very poor to very good	44	8.9	42	8.7			8.7	8.4	9.3	8.9

Tumour group tables

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	*

DIAGNOSTIC TESTS							Tumo	our gro	pup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*	*	*	*	*	*	*	*	*	79%	79%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	*	*	*	*	62%	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	*	*	*	*	80%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	69%	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	*	*	*	*	86%	86%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	58%	58%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	*	*	*	*	64%	64%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	73%	73%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	*	*	*	*	80%	80%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	85%	85%

Tumour group tables

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	*	*	*	*	*	*	88%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	*	*	*	*	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	*	*	*	*	91%	91%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	pup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	76%	76%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	*	*	*	*	83%	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	*	*	*	*	84%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	*	*	*	*	47%	47%

CARE PLANNING							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*	*	*	*	*	*	*	*	*	68%	68%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	*	*	*	*	89%	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	*	*	*	*	92%	92%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	*	*	*	*	*	*	85%	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	67%	67%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	*	*	*	*	43%	43%

Tumour group tables

HOSPITAL CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*	*	*	*	*	*	*	*	*	86%	86%
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%	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	*	*	*	*	89%	89%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	*	*	*	*	90%	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	85%	85%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	*	*	*	*	96%	96%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	*	*	*	*	97%	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	*	*	*	*	86%	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	*	*	*	*	70%	70%

YOUR TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	*	*	*	*	*	*	79%	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	75%	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	*	*	*	*	*	*	79%	79%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	82%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	*	*	*	*	*	*	68%	68%

Tumour group tables

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our gro	pup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	*	*	*	*	*	*	65%	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	*	*	*	*	66%	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	*	*	*	*	77%	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*	*	*	*	*	*	59%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	*	*	*	*	35%	35%

SUPPORT WHILE AT HOME							Tumo	our gro	pup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	*	*	*	*	*	*	41%	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	42%	42%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	*	*	*	*	*	*	47%	47%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	*	*	*	*	24%	24%

Tumour group tables

LIVING WITH AND BEYOND CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	47%	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	*	*	*	*	73%	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	*	*	*	*	72%	72%

YOUR OVERALL NHS CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All cancers
Q56. The whole care team worked well together	*	*	*	*	*	*	*	*	*	*	*	*	83%	83%
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	*	*	*	*	81%	81%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	*	*	*	*	45%	45%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	*	*	*	*	8.8	8.8

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

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	*	*	*	*	*	*	*	*	79%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	70%	60%	*	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	82%	80%	*	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	64%	90%	*	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	73%	100%	*	86%

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	*	*	*	*	*	55%	70%	*	58%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	50%	90%	*	64%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	79%	75%	*	73%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	64%	100%	*	80%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	77%	92%	*	85%

SUPPORT FROM A MAIN CONTACT PERSO	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team $% \left({{\left[{{{\rm{A}}} \right]}_{{\rm{A}}}}_{{\rm{A}}}} \right)$	*	*	*	*	*	86%	100%	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	82%	100%	*	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	90%	*	*	91%

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	*	*	*	*	*	75%	75%	*	76%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	77%	91%	*	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	82%	*	*	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	47%

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	*	*	*	*	*	55%	90%	*	68%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	92%

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	*	*	*	*	*	73%	*	*	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	62%	83%	*	67%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	43%

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	*	*	*	*	*	*	*	*	86%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	89%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	85%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	96%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	50%	*	*	70%

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	*	*	*	*	*	75%	*	*	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	64%	*	*	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	75%	*	*	79%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	82%	*	*	82%
Q42_4. Patient completely had enough understandable nformation about their response to hormone therapy	*	*	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	71%	58%	*	68%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS			Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	57%	82%	*	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	62%	83%	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	57%	73%	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	35%

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	*	*	*	*	*	30%	*	*	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	*	*	47%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	14%	27%	*	24%

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	*	*	*	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	67%	*	*	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	77%	*	*	72%

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	*	*	*	*	*	64%	90%	*	83%
Q57. Administration of care was very good or good	*	*	*	*	*	64%	82%	*	81%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	45%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	9.1	9.0	*	8.8

Male/Female/Non-binary/Other tables

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

DIAGNOSTIC TESTS			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	69%	92%	*	*	*	*	79%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	55%	71%	*	*	*	*	62%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	70%	93%	*	*	*	*	80%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	55%	87%	*	*	*	*	69%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	85%	87%	*	*	*	*	86%		

FINDING OUT THAT YOU HAD CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	60%	56%	*	*	*	*	58%	
Q13. Patient was definitely told sensitively that they had cancer	57%	74%	*	*	*	*	64%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	65%	81%	*	*	*	*	73%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	78%	81%	*	*	*	*	80%	
Q16. Patient was told they could go back later for more information about their diagnosis	86%	85%	*	*	*	*	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	95%	81%	*	*	*	*	88%	
Q18. Patient found it very or quite easy to contact their main contact person	72%	100%	*	*	*	*	85%	
Q19. Patient found advice from main contact person was very or quite helpful	82%	100%	*	*	*	*	91%	

Male/Female/Non-binary/Other tables

DECIDING ON THE BEST TREATMENT			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	68%	85%	*	*	*	*	76%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	73%	95%	*	*	*	*	83%		
Q22. Family and/or carers were definitely involved as nuch as the patient wanted them to be in decisions about treatment options	80%	88%	*	*	*	*	84%		
Q23. Patient could get further advice from a different nealthcare professional before making decisions about heir treatment options	36%	*	*	*	*	*	47%		

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	55%	82%	*	*	*	*	68%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	80%	*	*	*	*	*	89%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	92%	

SUPPORT FROM HOSPITAL STAFF			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	78%	93%	*	*	*	*	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	43%	90%	*	*	*	*	67%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	43%

Male/Female/Non-binary/Other tables

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%	100%	*	*	*	*	86%
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%	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	83%	100%	*	*	*	*	89%
Q34. Patient was always able to get help from ward staff when needed	84%	100%	*	*	*	*	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	76%	100%	*	*	*	*	85%
Q36. Hospital staff always did everything they could to help the patient control pain	93%	*	*	*	*	*	96%
Q37. Patient was always treated with respect and dignity while in hospital	95%	100%	*	*	*	*	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	79%	100%	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	59%	81%	*	*	*	*	70%

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	76%	82%	*	*	*	*	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	69%	83%	*	*	*	*	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable nformation about their response to surgery	76%	82%	*	*	*	*	79%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	75%	92%	*	*	*	*	82%
Q42_4. Patient completely had enough understandable nformation about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	50%	86%	*	*	*	*	68%

Male/Female/Non-binary/Other tables

IMMEDIATE AND LONG TERM SIDE EFFEC	ΓS		Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	45%	85%	*	*	*	*	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	50%	80%	*	*	*	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	55%	93%	*	*	*	*	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	52%	65%	*	*	*	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	14%	58%	*	*	*	*	35%

SUPPORT WHILE AT HOME			Male/Fema	ale/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	17%	60%	*	*	*	*	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE	RE FROM YOUR GP PRACTICE				Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All			
Q51. Patient definitely received the right amount of support from their GP practice during treatment	60%	*	*	*	*	*	47%			
Q52. Patient has had a review of cancer care by GP practice	32%	15%	*	*	*	*	24%			

LIVING WITH AND BEYOND CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	63%	86%	*	*	*	*	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	74%	70%	*	*	*	*	72%

Male/Female/Non-binary/Other tables

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	82%	84%	*	*	*	*	83%	
Q57. Administration of care was very good or good	73%	90%	*	*	*	*	81%	
Q58. Cancer research opportunities were discussed with patient	31%	*	*	*	*	*	45%	
Q59. Patient's average rating of care scored from very poor to very good	8.3	9.3	*	*	*	*	8.8	

*

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

DIAGNOSTIC TESTS	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	79%	*	*	*	*	*	79%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	62%	*	*	*	*	*	62%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	*	*	*	*	*	80%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	69%	*	*	*	*	*	69%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	86%	*	*	*	*	*	86%		

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	58%	*	*	*	*	*	58%
Q13. Patient was definitely told sensitively that they had cancer	64%	*	*	*	*	*	64%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	*	*	*	*	*	73%
Q15. Patient was definitely told about their diagnosis in an appropriate place	80%	*	*	*	*	*	80%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	*	*	*	*	*	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	88%	*	*	*	*	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	*	*	*	*	85%
Q19. Patient found advice from main contact person was very or quite helpful	91%	*	*	*	*	*	91%

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	76%	*	*	*	*	*	76%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	*	*	*	*	*	83%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	*	*	*	*	*	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	47%	*	*	*	*	*	47%

*

CARE PLANNING				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	68%	*	*	*	*	*	68%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	89%	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	92%	*	*	*	*	*	92%

SUPPORT FROM HOSPITAL STAFF				Ethnicity	Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All	
Q27. Staff provided the patient with relevant information on available support	85%	*	*	*	*	*	85%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	67%	*	*	*	*	*	67%	
Q29. Patient was offered information about how to get financial help or benefits	43%	*	*	*	*	*	43%	

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	86%	*	*	*	*	*	86%
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%	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	89%	*	*	*	*	*	89%
Q34. Patient was always able to get help from ward staff when needed	90%	*	*	*	*	*	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	85%	*	*	*	*	*	85%
Q36. Hospital staff always did everything they could to help the patient control pain	96%	*	*	*	*	*	96%
Q37. Patient was always treated with respect and dignity while in hospital	97%	*	*	*	*	*	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	70%	*	*	*	*	*	70%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	79%	*	*	*	*	*	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	75%	*	*	*	*	*	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable nformation about their response to surgery	79%	*	*	*	*	*	79%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	82%	*	*	*	*	*	82%
Q42_4. Patient completely had enough understandable nformation about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	*	*	*	*	*	*
243. Patient felt the length of waiting time at clinic and lay unit for cancer treatment was about right	68%	*	*	*	*	*	68%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	65%	*	*	*	*	*	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	66%	*	*	*	*	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	77%	*	*	*	*	*	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	*	*	*	*	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	35%	*	*	*	*	*	35%

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	41%	*	*	*	*	*	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	42%	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	47%	*	*	*	*	*	47%
Q52. Patient has had a review of cancer care by GP practice	24%	*	*	*	*	*	24%

*

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	47%	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	73%	*	*	*	*	*	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	72%	*	*	*	*	*	72%

YOUR OVERALL NHS CARE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	83%	*	*	*	*	*	83%
Q57. Administration of care was very good or good	81%	*	*	*	*	*	81%
Q58. Cancer research opportunities were discussed with patient	45%	*	*	*	*	*	45%
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	*	8.8

IMD quintile tables

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

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	*	*	*	*	*	*	79%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	60%	*	*	62%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	80%	100%	*	80%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	90%	70%	*	69%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	80%	90%	*	86%	

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	*	*	*	50%	*	*	58%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	83%	75%	*	64%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	92%	75%	*	73%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	83%	92%	*	80%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	91%	75%	*	85%

SUPPORT FROM A MAIN CONTACT PERSO	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	*	*	*	92%	82%	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	80%	*	*	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	91%	*	*	91%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile								
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All			
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	82%	75%	*	76%			
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	92%	100%	*	83%			
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	84%			
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	47%			

CARE PLANNING			IN				
	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	*	*	*	*	73%	*	68%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	92%

SUPPORT FROM HOSPITAL STAFF							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	90%	*	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	82%	64%	*	67%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	43%

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	*	*	*	*	*	*	86%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	89%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	85%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	96%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	70%

IMD quintile tables

YOUR TREATMENT			IN	/ID quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough Inderstandable information about surgery	*	*	*	*	*	*	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	70%	*	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable nformation about their response to surgery	*	*	*	*	*	*	79%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	*	*	*	*	80%	*	82%
Q42_4. Patient completely had enough understandable nformation about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	*	*	*	*	*	*
243. Patient felt the length of waiting time at clinic and lay unit for cancer treatment was about right	*	*	*	70%	55%	*	68%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS		IN	/ID 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	*	*	*	73%	82%	*	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	80%	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	82%	55%	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	35%

SUPPORT WHILE AT HOME			IN	ID 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	*	*	*	*	*	*	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	42%

CARE FROM YOUR GP PRACTICE	IMD quintile								
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	47%		
Q52. Patient has had a review of cancer care by GP practice	*	*	*	42%	25%	*	24%		

IMD quintile tables

*

LIVING WITH AND BEYOND CANCER			IN	/ID 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	*	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	82%	91%	*	72%

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	*	*	*	100%	83%	*	83%			
Q57. Administration of care was very good or good	*	*	*	100%	83%	*	81%			
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	45%			
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	9.2	9.4	*	8.8			

Long-term condition status tables

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

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	76%	*	*	79%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	63%	*	*	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	*	*	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	76%	*	*	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	84%	*	*	86%

FINDING OUT THAT YOU HAD CANCER		Long-term cor	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	59%	*	*	58%
Q13. Patient was definitely told sensitively that they had cancer	67%	*	*	64%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	*	*	73%
Q15. Patient was definitely told about their diagnosis in an appropriate place	77%	*	*	80%
Q16. Patient was told they could go back later for more information about their diagnosis	90%	*	*	85%

SUPPORT FROM A MAIN CONTACT PERSON		Long-term con	dition status	
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	86%	*	*	88%
Q18. Patient found it very or quite easy to contact their main contact person	87%	*	*	85%
Q19. Patient found advice from main contact person was very or quite helpful	90%	*	*	91%

DECIDING ON THE BEST TREATMENT	Long-term condition status				
	Yes	No	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	73%	*	*	76%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	*	*	83%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	*	*	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	50%	*	*	47%	

Long-term condition status tables

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	59%	*	*	68%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	87%	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	90%	*	*	92%

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	88%	*	*	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	68%	*	*	67%
Q29. Patient was offered information about how to get financial help or benefits	40%	*	*	43%

HOSPITAL CARE		Long-term cor	dition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	90%	*	*	86%
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%	*	*	73%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	89%	*	*	89%
Q34. Patient was always able to get help from ward staff when needed	90%	*	*	90%
Q35. Patient was always able to discuss worries and fears with hospital staff	89%	*	*	85%
Q36. Hospital staff always did everything they could to help the patient control pain	94%	*	*	96%
Q37. Patient was always treated with respect and dignity while in hospital	95%	*	*	97%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an butpatient or day case	62%	*	*	70%

Long-term condition status tables

YOUR TREATMENT		Long-term co	ondition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	79%	*	*	79%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	72%	*	*	75%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	74%	*	*	79%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	78%	*	*	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	55%	*	*	68%

IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term cor	ndition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	64%	*	*	65%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	*	*	66%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	73%	*	*	77%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	*	*	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	38%	*	*	35%

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	39%	*	*	41%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	42%

CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	38%	*	*	47%	
Q52. Patient has had a review of cancer care by GP practice	23%	*	*	24%	

Long-term condition status tables

LIVING WITH AND BEYOND CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	60%	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	70%	*	*	73%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	71%	*	*	72%

YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	83%	*	*	83%
Q57. Administration of care was very good or good	83%	*	*	81%
Q58. Cancer research opportunities were discussed with patient	40%	*	*	45%
Q59. Patient's average rating of care scored from very poor to very good	8.7	*	*	8.8

2023 *

Year on year charts

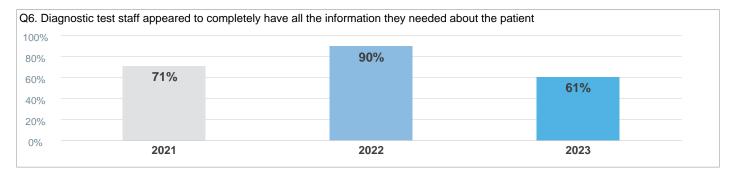
* Indicates where a score is not available due to suppression or a low base size.	** No score available for these years.	The scores are unadjusted and based on England scores only.
SUPPORT FROM YOUR GP PRACTIO	CE	
Q2. Patient only spoke to primary care profess	ional once or twice before cancer diagno	sis
100%		
80%		
60%		
40%		
20%		
0% 2021 **	2022 **	2023 *
Q3. Referral for diagnosis was explained in a w	vay the patient could completely understa	ind
100%		
80%		
60%		
40%		
20%		

2021 **

0%

DIAGNOSTIC TESTS Q5. Patient received all the information needed about the diagnostic test in advance 100% 80% 60% 60% 40% 20% 0% 2021 2022 2023

2022 **



 Q7. Patient felt the length of time waiting for diagnostic test results was about right

 100%

 80%
 82%

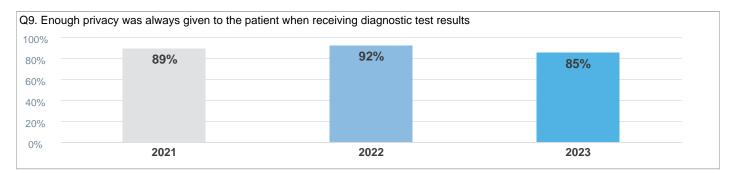
 60%
 79%

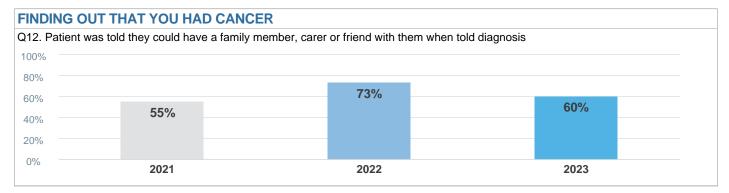
 40%
 79%

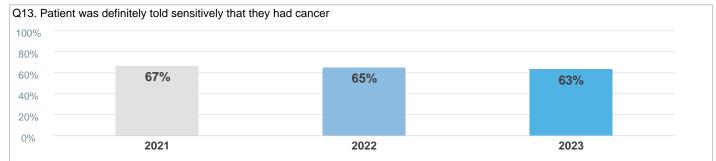
 20%
 2021
 2022

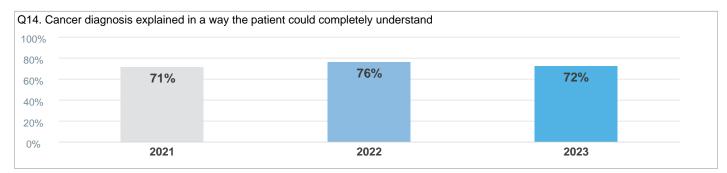
 20%
 2021
 2022

* Indic to su	ates where a score is not available uppression or a low base size.	due ** No score available for these years.	The scores are unadjusted and based on England scores only.
Q8. Diag	nostic test results were explained	I in a way the patient could completely understa	nd
80% -	74%	79%	
60% - 40% -	1470		68%
20%			
0% -	2021	2022	2023



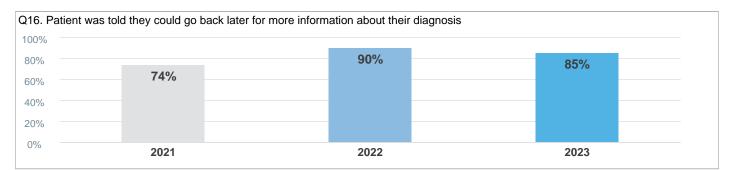


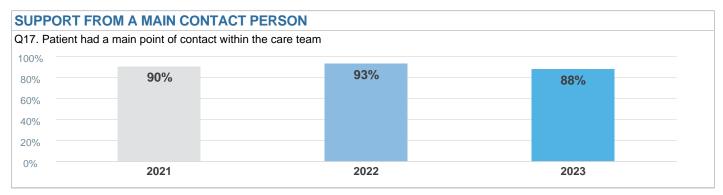


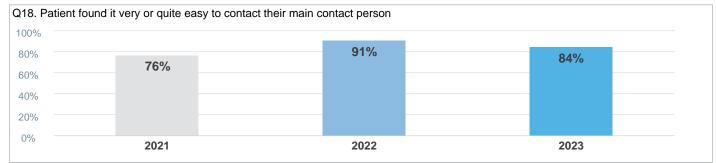


Year on year charts

 Indicates where to suppression 	e a score is not available due or a low base size.	** No score available for these years.	The scores are unadjusted and based on England scores only.
Q15. Patient was d	lefinitely told about their dia	gnosis in an appropriate place	
80%	79%	85%	79%
60% 40%	1070		
20%			
0%	2021	2022	2023







 Q19. Patient found advice from main contact person was very or quite helpful

 100%

 80%
 89%

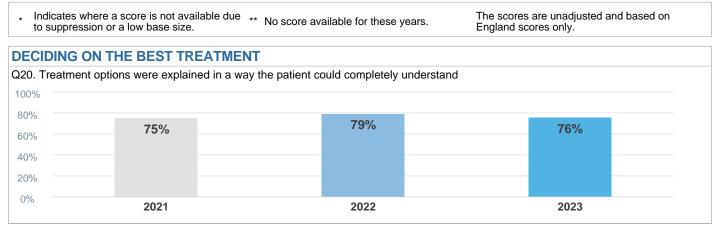
 60%
 91%

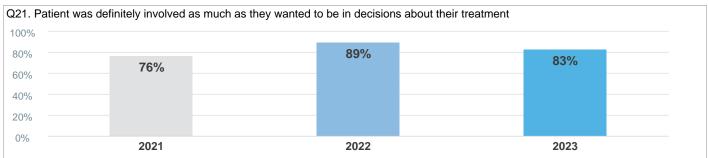
 40%
 91%

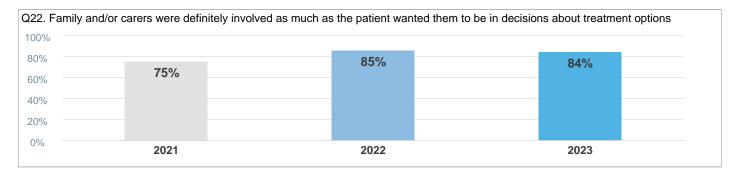
 20%
 100%

 0%
 2021
 2022

Year on year charts







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

 100%

 80%

 60%

 40%

 20%

 0%

 2021 **

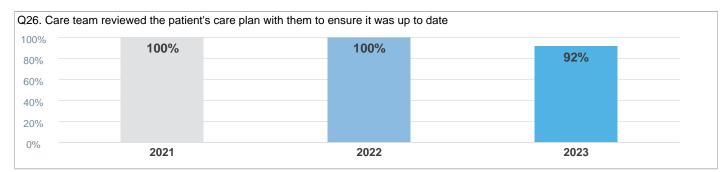
 2022 **

CARE PLANNING

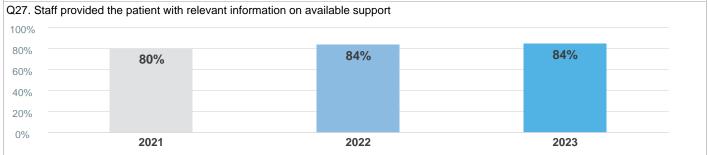
Q24. Patient was defin	nitely able to ha	ve a discussion about their needs or co	ncerns prior to treatment		
100%					
80%					
60%		72%		67%	
40%	53%				
20%					
0%					
	2021	2022		2023	

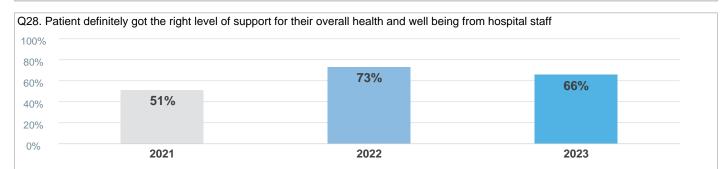
Year on year charts

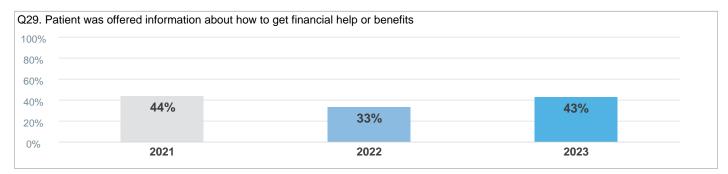
 Indicates where to suppression e 	a score is not availa or a low base size.	able due ** No score av	ailable for these ye	ears. The scores England sc	are unadjusted and based on ores only.	
	their care team hel	ped the patient create a	care plan to addr	ess any needs or conce	rns	
80%	87%		95%		89%	
60%	0170		-			
40%						
20%						
0%	2021		2022		2023	

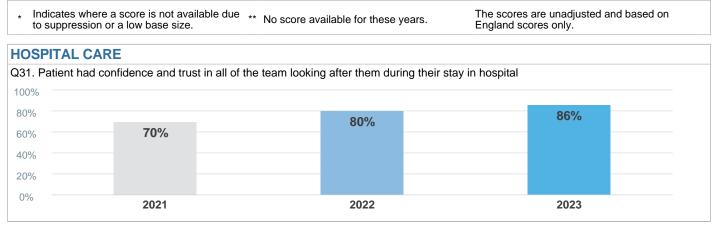


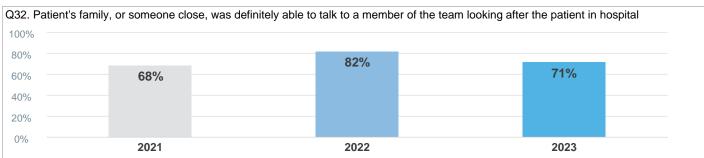
SUPPORT FROM HOSPITAL STAFF

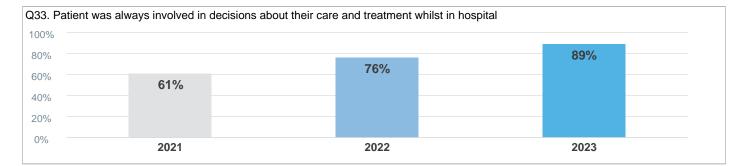












 Q34. Patient was always able to get help from ward staff when needed

 100%

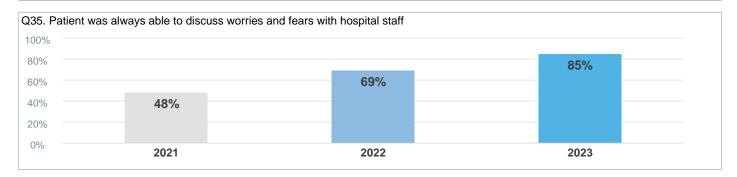
 80%
 86%

 60%
 70%

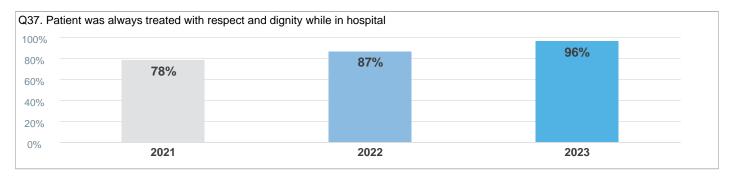
 40%
 86%

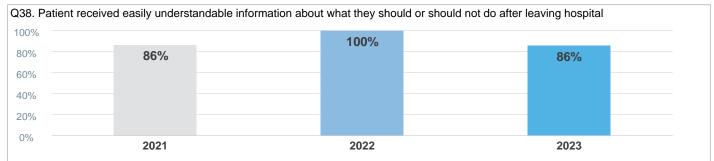
 20%
 2021

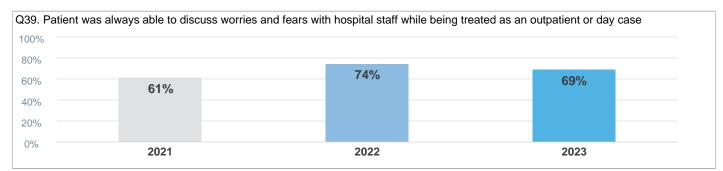
 2022
 2023

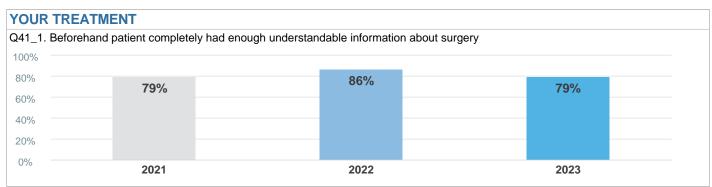


 Indicates where to suppression 	e a score is not availa or a low base size.	ble due ** No score available for these years.	The scores are unadjusted and based on England scores only.	
-	always did everythi	ng they could to help the patient control pain		
80%		92%	95%	
60%	72%			
40%				
20%				
0%	2021	2022	2023	









* In to	dicates where a score is not available due ** suppression or a low base size.	No score available for these years.	The scores are unadjusted and based on England scores only.
Q41_2	. Beforehand patient completely had enoug	gh understandable information about che	motherapy
100%			
80%			
60%			
40%			
20%			
0%	2021 **	2022 **	2023 *

Q41_3.	Beforehand patient complete	ly had enough understandable information	n about radiotherapy	
100%				
80%	79%	91%		
60%	1370		74%	
40%				
20%				
0%	2021	2022	2023	

Q41_4.	Beforehand patient completely had enough	understandable information about horn	none therapy	
100%				
80%				
60%				
40%				
20%				
0%	2021 **	2022 **	2023 *	
	2021	2022	2023	

 Q41_5. Beforehand patient completely had enough understandable information about immunotherapy

 100%

 80%

 60%

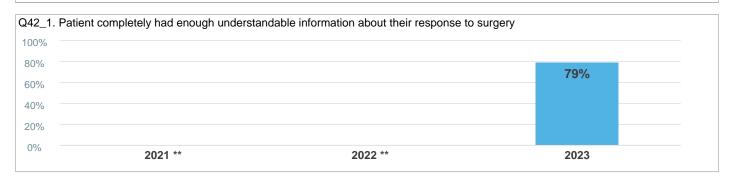
 40%

 20%

 0%

 2021 **

 2022 **



2023

Year on year charts

2021 **

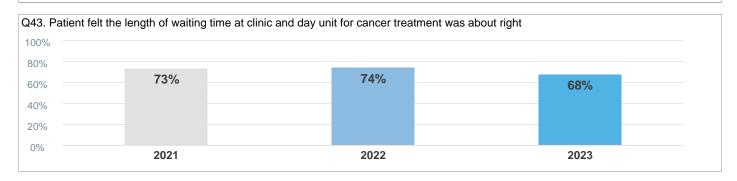
0%

* Indi to s	icates where a score is not available due ** uppression or a low base size.	No score available for these years.	The scores are unadjusted ar England scores only.	nd based on
Q42_2.	Patient completely had enough understand	able information about their response	e to chemotherapy	
100%				
80%				
60%				
40%				
20%				
0%	2021 **	2022 **	2023 *	
Q42_3.	Patient completely had enough understand	able information about their response	e to radiotherapy	
100%				
80%			81%	
60%				
40%				
20%				

Q42_4	Patient completely had enough understandab	le information about their response	e to hormone therapy	
100%				
80%				
60%				
40%				
20%				
0%	2021 **	2022 **	2023 *	

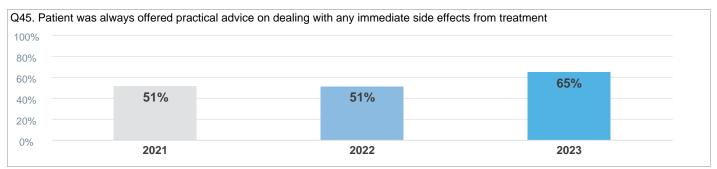
2022 **

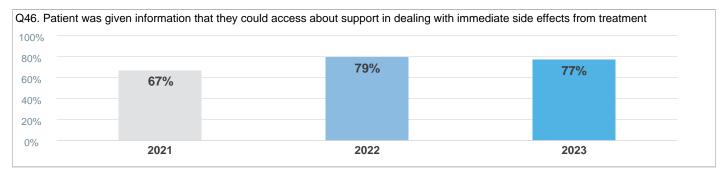
Q42_5.	Patient completely had enough understand	able information about their response	to immunotherapy
100%			
80%			
60%			
40%			
20%			
0%	0004 **	2022 **	0000 *
	2021 **	2022 **	2023 *



Year on year charts

Indicates where a score is not available due ** No score available for these years. The scores are unadjusted and based on to suppression or a low base size. England scores only. **IMMEDIATE AND LONG TERM SIDE EFFECTS** Q44. Possible side effects from treatment were definitely explained in a way the patient could understand 100% 80% 70% 60% 65% 64% 40% 20% 0% 2021 2022 2023





 Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment

 100%

 80%

 60%

 40%
 54%

 20%

 0%
 2021

 2022
 2023

Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects

100%

80%

60%

40%

43%

39%

32%

0%

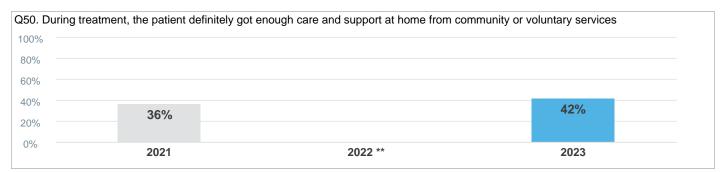
2021

2022

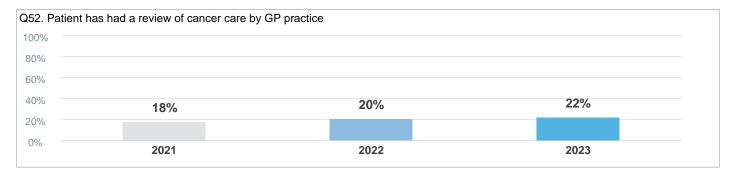
2023

Year on year charts

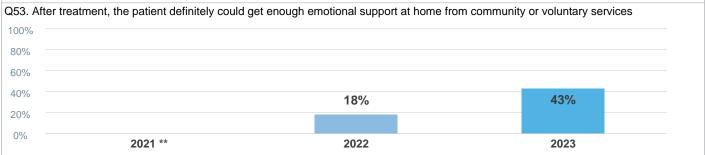
 Indicate to suppl 	s where a score is not available due ression or a low base size.	The scores are unadjusted and based on England scores only.								
SUPPORT WHILE AT HOME										
Q49. Care t	eam gave family, or someone close	, all the information needed to help care for	or the patient at home							
100%										
80%										
60%	76%	71%								
40%			41%							
20%										
0%	2021	2022	2023							



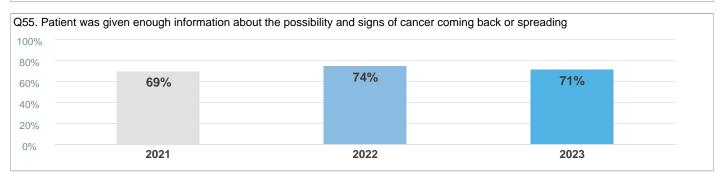
CARE FROM YOUR GP PRACTICE Q51. Patient definitely received the right amount of support from their GP practice during treatment 100% 80% 60% 40% 20% 36% 0% 2021 2022 2023



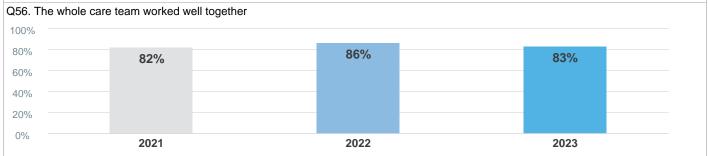
LIVING WITH AND BEYOND CANCER

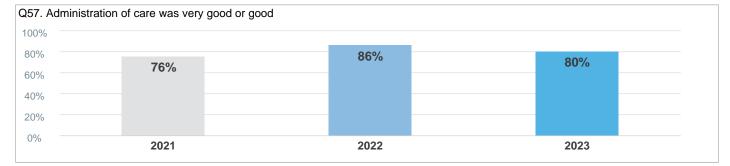


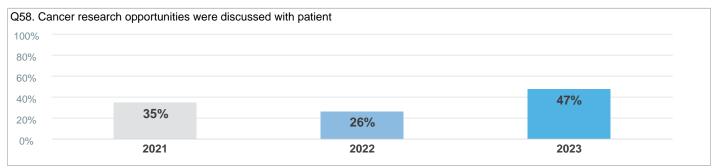












	Indicates where a score is not available due ** No score available for these years. to suppression or a low base size.			S. The scores England sc	The scores are unadjusted and based on England scores only.		
	verage rating of ca	are scored from very poor	to very good				
0 8			8.9		0.7		
o 6	8.5		0.9		8.7		
1							
00	2024		2022		2022		
	2021		2022		2023		