NHS
England

Cancer Patient Experience Survey

2023 Results

Royal National Orthopaedic Hospital NHS Trust

Published July 2024

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

Contents

Executive summary

Questions above expected range

	Case mix adjusted scores			National score
	2023 score	Lower expected range	Upper expected range	
Q58. Cancer research opportunities were discussed with patient	**71%**	22%	67%	**45%**

Questions below expected range

	Case mix adjusted scores			National score
	2023 score	Lower expected range	Upper expected range	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	**45%**	47%	86%	**67%**
Q5. Patient received all the information needed about the diagnostic test in advance	**80%**	83%	100%	**92%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	**92%**	93%	100%	**99%**
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	**0%**	6%	59%	**32%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	**57%**	62%	97%	**79%**

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. Case-mix adjusted data, together with expected ranges, should be used to understand whether the results are significantly higher or lower than national results taking account of the patient mix.

Scoring methodology

Sixty-one questions from the questionnaire are scored as these questions relate directly to patient experience. For all but one question (Q59), the score shows the percentage of respondents who gave the most favourable response to a question. For Q59, respondents rate their overall care on a scale of 0 to 10, of which the average was calculated for this question's score. The percentages in this report have been rounded to the nearest percentage point. Therefore, in some cases the figures do not appear to add up to 100%.

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

Statistical significance

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

Suppression

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

In cases where a result is based on fewer than 10 responses, the result has been suppressed. For example, where fewer than 10 people answered a question from a particular 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 www.ncpes.co.uk. For all other outputs at Trust level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response rate

Overall response rate

31 patients responded out of a total of 73 patients, resulting in a response rate of 42%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	75	73	31	42%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	21
Online	10
Phone	0
Translation service	0
Total	**31**

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	*
Skin	0
Upper gastro	0
Urological	0
Other	*
Total	**31**

Respondents by ethnicity

	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	23
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	
Arab	*
Any other ethnic group	*
Not given	
Not given	0
Total	**31**

* indicates the count is not shown due to suppression

Expected range charts

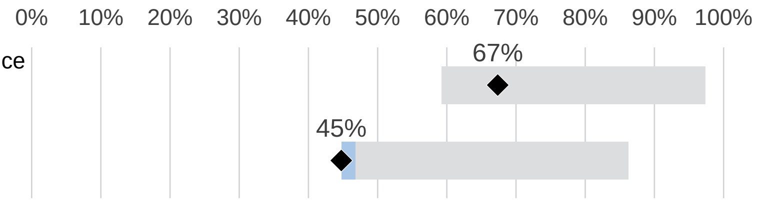
▨ Lower expected range ▨ Within expected range ■ Upper expected range ◆ Case mix adjusted score

The left outer edge of the bars is the lowest score achieved of all Trusts. The right outer edge of the bars is the highest score achieved of all Trusts.

SUPPORT FROM YOUR GP PRACTICE

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

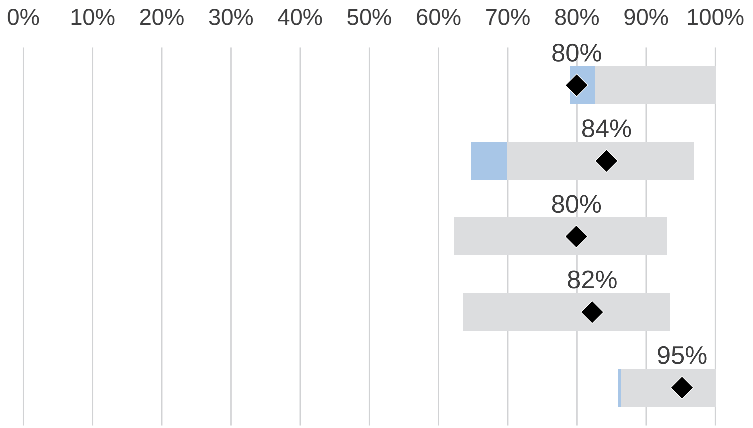
Q5. Patient received all the information needed about the diagnostic test in advance

Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient

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

Q8. Diagnostic test results were explained in a way the patient could completely understand

Q9. Enough privacy was always given to the patient when receiving diagnostic test results



FINDING OUT THAT YOU HAD CANCER

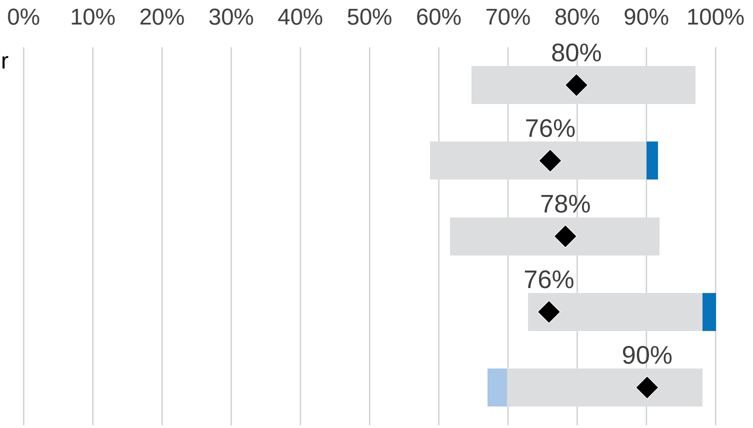
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis

Q13. Patient was definitely told sensitively that they had cancer

Q14. Cancer diagnosis explained in a way the patient could completely understand

Q15. Patient was definitely told about their diagnosis in an appropriate place

Q16. Patient was told they could go back later for more information about their diagnosis

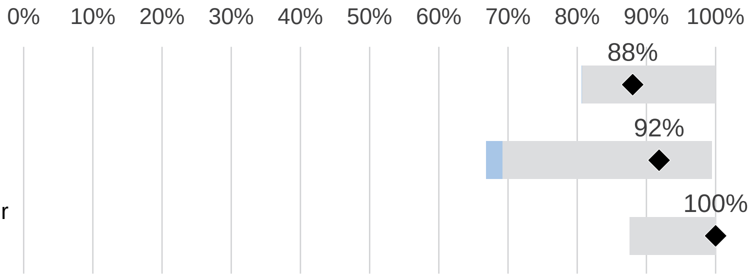


SUPPORT FROM A MAIN CONTACT PERSON

Q17. Patient had a main point of contact within the care team

Q18. Patient found it very or quite easy to contact their main contact person

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

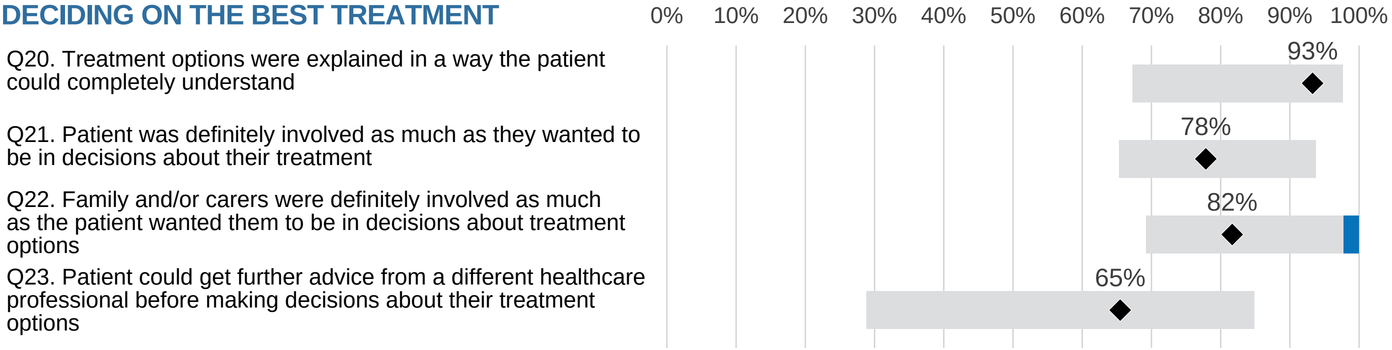


Expected range charts

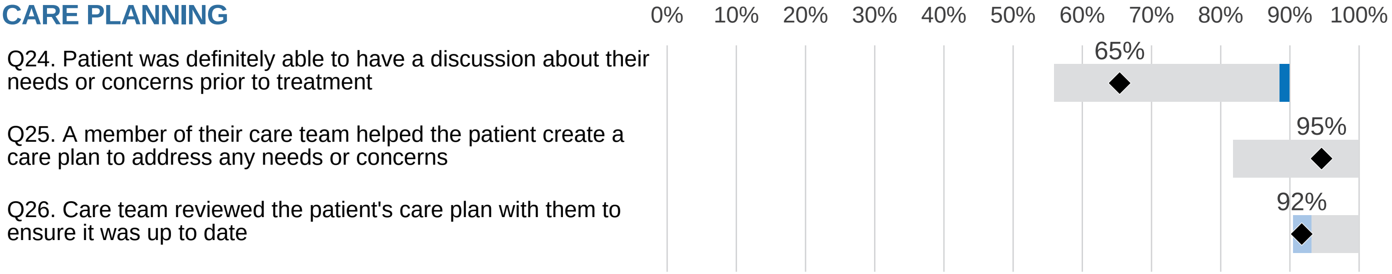
■ Lower expected range ■ Within expected range ■ Upper expected range ◆ Case mix adjusted score

The left outer edge of the bars is the lowest score achieved of all Trusts. The right outer edge of the bars is the highest score achieved of all Trusts.

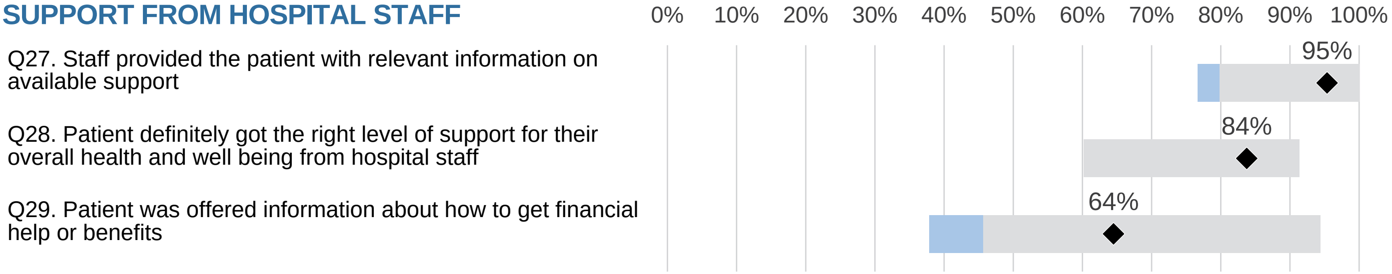
DECIDING ON THE BEST TREATMENT



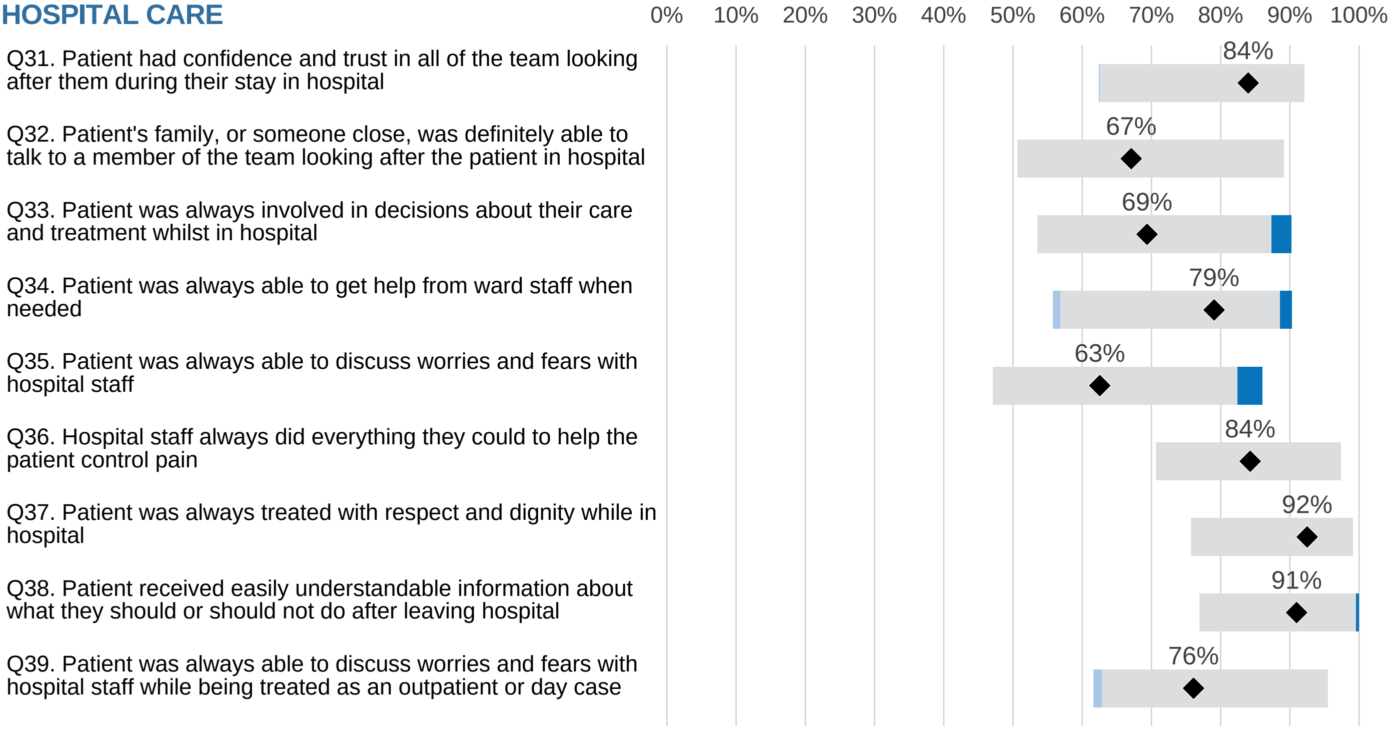
CARE PLANNING



SUPPORT FROM HOSPITAL STAFF



HOSPITAL CARE

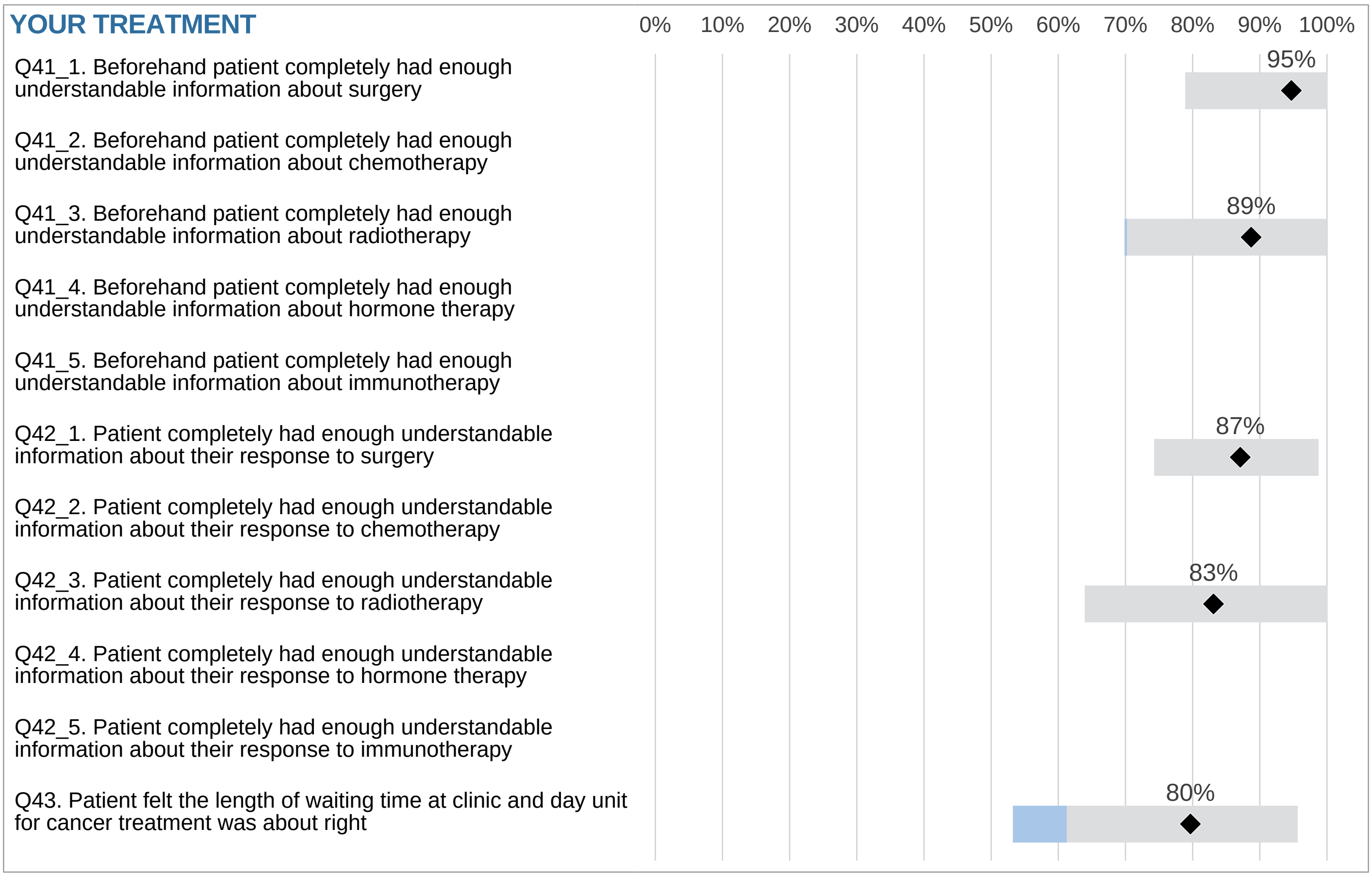


Expected range charts

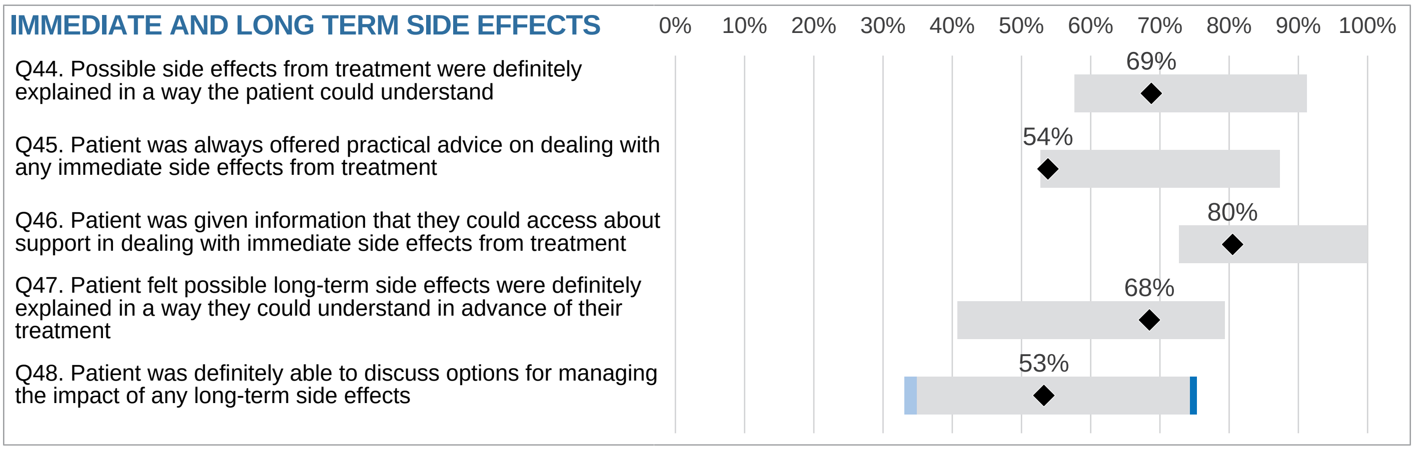
▭ Lower expected range ▭ Within expected range ■ Upper expected range ◆ Case mix adjusted score

The left outer edge of the bars is the lowest score achieved of all Trusts. The right outer edge of the bars is the highest score achieved of all Trusts.

YOUR TREATMENT



IMMEDIATE AND LONG TERM SIDE EFFECTS

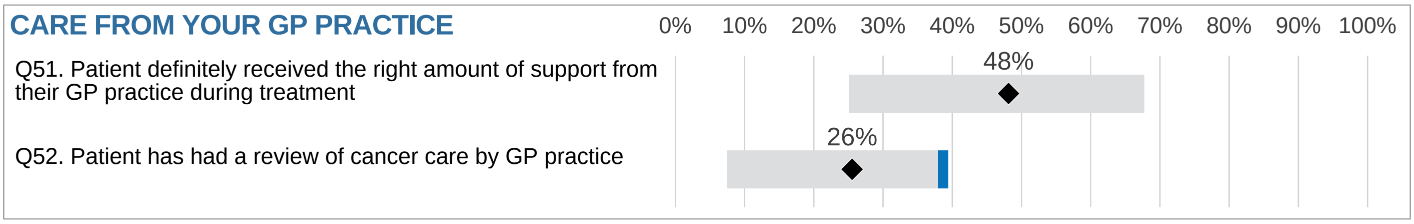


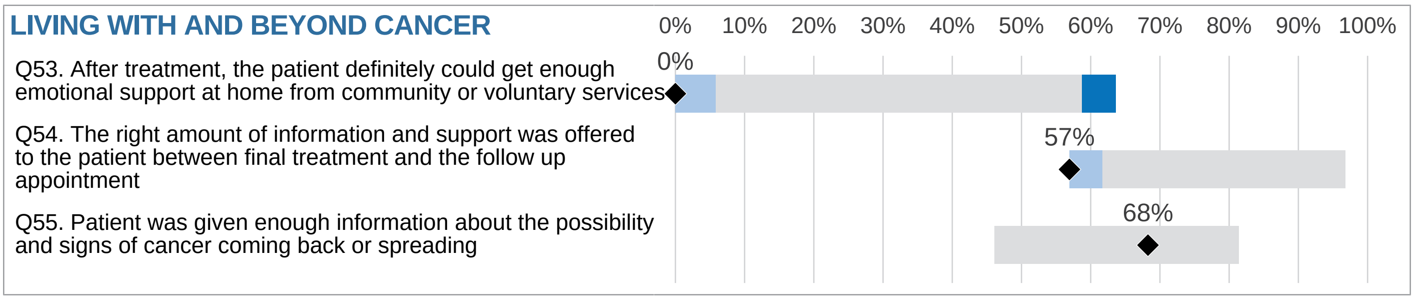
SUPPORT WHILE AT HOME

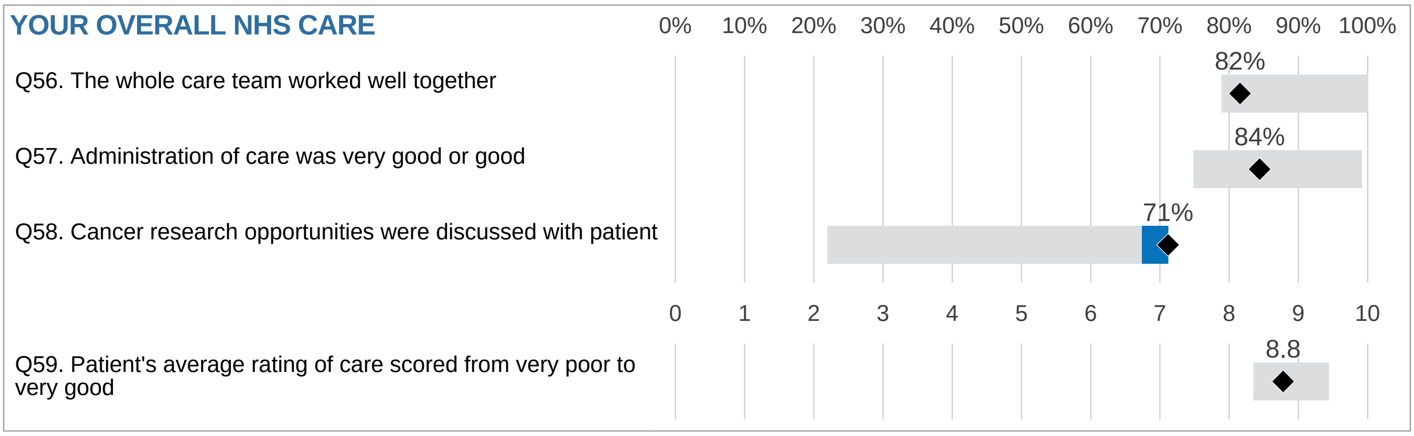
Expected range charts

🟦 Lower expected range ⬜ Within expected range 🟦 Upper expected range ◆ Case mix adjusted score

The left outer edge of the bars is the lowest score achieved of all Trusts. The right outer edge of the bars is the highest score achieved of all Trusts.







Comparability tables

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

** No score available for 2022.

▲ 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

SUPPORT FROM YOUR GP PRACTICE	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	20	**55%**	18	**56%**			**67%**	59%	97%	**78%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	29	**62%**	22	**41%**			**45%**	47%	86%	**67%**

DIAGNOSTIC TESTS	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q5. Patient received all the information needed about the diagnostic test in advance	30	**93%**	28	**75%**			**80%**	83%	100%	**92%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	32	**78%**	29	**79%**			**84%**	70%	97%	**83%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	32	**69%**	29	**72%**			**80%**	62%	93%	**78%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	32	**88%**	29	**76%**			**82%**	63%	93%	**78%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	31	**100%**	29	**93%**			**95%**	86%	100%	**95%**

FINDING OUT THAT YOU HAD CANCER	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	34	**79%**	23	**74%**			**80%**	65%	97%	**81%**
Q13. Patient was definitely told sensitively that they had cancer	37	**70%**	30	**73%**			**76%**	59%	90%	**74%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	37	**78%**	30	**70%**			**78%**	62%	92%	**77%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	36	**83%**	30	**73%**			**76%**	73%	98%	**86%**
Q16. Patient was told they could go back later for more information about their diagnosis	32	**84%**	26	**88%**			**90%**	70%	98%	**84%**

SUPPORT FROM A MAIN CONTACT PERSON	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q17. Patient had a main point of contact within the care team	34	**97%**	29	**86%**			**88%**	81%	100%	**91%**
Q18. Patient found it very or quite easy to contact their main contact person	28	**68%**	23	**91%**			**92%**	69%	99%	**84%**
Q19. Patient found advice from main contact person was very or quite helpful	30	**100%**	24	**100%**			**100%**	88%	100%	**96%**

Comparability tables

*	Indicates where a score is not available due to suppression or a low base size.	▲ or ▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	▨ Adjusted Score below Lower Expected Range ◻ Adjusted Score between Upper and Lower Expected Ranges ■ Adjusted Score above Upper Expected Range
**	No score available for 2022.			

DECIDING ON THE BEST TREATMENT	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q20. Treatment options were explained in a way the patient could completely understand	36	**83%**	24	**92%**			**93%**	67%	98%	**82%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	37	**84%**	31	**74%**			**78%**	65%	94%	**80%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	28	**68%**	26	**81%**			**82%**	69%	98%	**83%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	12	**67%**			**65%**	29%	85%	**57%**

CARE PLANNING	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	36	**72%**	29	**62%**			**65%**	56%	89%	**72%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	25	**100%**	17	**94%**	▼		**95%**	82%	100%	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	24	**96%**	15	**93%**			**92%**	93%	100%	**99%**

SUPPORT FROM HOSPITAL STAFF	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q27. Staff provided the patient with relevant information on available support	31	**97%**	25	**92%**			**95%**	80%	100%	**91%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	37	**84%**	30	**80%**			**84%**	60%	91%	**76%**
Q29. Patient was offered information about how to get financial help or benefits	18	**50%**	14	**64%**			**64%**	46%	94%	**70%**

Comparability tables

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

** No score available for 2022.

▲ 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

HOSPITAL CARE	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	33	**76%**	31	**81%**			**84%**	63%	92%	**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	25	**60%**	22	**68%**			**67%**	51%	89%	**70%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	31	**71%**	28	**68%**			**69%**	54%	87%	**70%**
Q34. Patient was always able to get help from ward staff when needed	33	**82%**	31	**71%**			**79%**	57%	89%	**73%**
Q35. Patient was always able to discuss worries and fears with hospital staff	33	**70%**	28	**57%**			**63%**	47%	82%	**65%**
Q36. Hospital staff always did everything they could to help the patient control pain	29	**83%**	29	**79%**			**84%**	71%	97%	**84%**
Q37. Patient was always treated with respect and dignity while in hospital	33	**82%**	31	**90%**			**92%**	76%	99%	**87%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	31	**87%**	31	**87%**			**91%**	77%	100%	**88%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	26	**77%**	24	**75%**			**76%**	63%	95%	**79%**

YOUR TREATMENT	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q41_1. Beforehand patient completely had enough understandable information about surgery	33	**88%**	29	**90%**			**95%**	79%	100%	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	**	**	*	*			*			**86%**
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	15	**87%**	11	**82%**			**89%**	70%	100%	**89%**
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	**	**	*	*			*			**79%**
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	**	**	*	*			*			**84%**
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	30	**80%**			**87%**	74%	99%	**86%**
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	*	*			*			**81%**
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	11	**73%**			**83%**	64%	100%	**85%**
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	*	*			*			**76%**
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	*	*			*			**81%**
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	35	**69%**	26	**77%**			**80%**	61%	96%	**78%**

Comparability tables

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

** No score available for 2022.

▲ 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

IMMEDIATE AND LONG TERM SIDE EFFECTS	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	36	**83%**	26	**65%**			**69%**	58%	91%	**74%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	32	**69%**	27	**52%**			**54%**	53%	87%	**70%**
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	26	**77%**	22	**77%**			**80%**	73%	100%	**87%**
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	35	**69%**	25	**64%**			**68%**	41%	79%	**60%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	31	**65%**	25	**52%**			**53%**	35%	74%	**55%**

SUPPORT WHILE AT HOME	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	27	**48%**	22	**59%**			**59%**	41%	82%	**62%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	23	**30%**	16	**44%**			**41%**	28%	77%	**52%**

CARE FROM YOUR GP PRACTICE	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	26	**46%**	21	**48%**			**48%**	25%	68%	**46%**
Q52. Patient has had a review of cancer care by GP practice	34	**12%**	29	**31%**			**26%**	7%	38%	**23%**

LIVING WITH AND BEYOND CANCER	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	14	**29%**	12	**0%**	▼		**0%**	6%	59%	**32%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	20	**65%**	21	**62%**			**57%**	62%	97%	**79%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	33	**70%**	29	**72%**			**68%**	46%	81%	**64%**

YOUR OVERALL NHS CARE	Unadjusted scores						Case mix adjusted scores			National score
	2022 n	2022 score	2023 n	2023 score	Change 2022-2023	Change overall	2023 score	Lower expected range	Upper expected range	
Q56. The whole care team worked well together	35	**83%**	29	**79%**			**82%**	79%	100%	**90%**
Q57. Administration of care was very good or good	37	**89%**	30	**83%**			**84%**	75%	99%	**87%**
Q58. Cancer research opportunities were discussed with patient	23	**61%**	22	**73%**			**71%**	22%	67%	**45%**
Q59. Patient's average rating of care scored from very poor to very good	37	**8.8**	29	**8.6**			**8.8**	8.3	9.4	**8.9**

Tumour group tables

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

SUPPORT FROM YOUR GP PRACTICE	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	**41%**

DIAGNOSTIC TESTS	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	*	*	*	*	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	*	*	*	*	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	*	*	*	*	*	**93%**

FINDING OUT THAT YOU HAD CANCER	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	*	*	*	*	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	*	*	*	*	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*	**88%**

Tumour group tables

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

SUPPORT FROM A MAIN CONTACT PERSON	Tumour group												
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	*	*	*	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	*	*	*	*	*	**100%**

DECIDING ON THE BEST TREATMENT	Tumour group												
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	*	*	*	*	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	*	*	*	*	*	**67%**

CARE PLANNING	Tumour group												
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	*	*	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	*	*	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	Tumour group												
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	*	*	*	*	*	**64%**

Tumour group tables

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

HOSPITAL CARE	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**81%**
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	*	*	*	*	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	*	*	*	*	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	*	*	*	*	*	**75%**

YOUR TREATMENT	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	**82%**
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	*	*	*	*	*	*	*	*	*	*	*	*	*	**80%**
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	*	*	*	*	*	*	*	*	*	*	*	*	*	**73%**
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	*	*	*	*	*	*	*	*	*	*	*	*	*	**77%**

Tumour group tables

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

IMMEDIATE AND LONG TERM SIDE EFFECTS

	Tumour group													
	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%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	**52%**
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	*	*	*	*	*	*	*	*	*	*	*	*	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	*	*	*	*	*	**52%**

SUPPORT WHILE AT HOME

	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	*	**44%**

CARE FROM YOUR GP PRACTICE

	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	*	*	*	*	*	**31%**

Tumour group tables

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

LIVING WITH AND BEYOND CANCER	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	*	*	*	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	*	*	*	*	*	**72%**

YOUR OVERALL NHS CARE	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	**79%**
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	*	*	*	*	*	**83%**
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	*	*	*	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	*	*	*	*	*	**8.6**

Age group tables

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

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	*	*	*	*	*	*	*	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	**41%**

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	*	*	*	*	*	*	*	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	**93%**

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	*	*	*	*	*	*	*	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	**88%**

SUPPORT FROM A MAIN CONTACT PERSON	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	*	*	*	*	*	*	*	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	**100%**

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	*	*	*	*	*	*	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	**67%**

Age group tables

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

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	*	*	*	*	*	*	*	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	Age								
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	**All**
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	**64%**

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	*	*	*	*	*	*	*	*	**81%**
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	**75%**

Age group tables

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

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	*	*	*	*	*	*	*	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	**82%**
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	*	*	*	*	*	*	*	*	**80%**
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	*	*	*	*	*	*	*	*	**73%**
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	*	*	*	*	*	*	*	*	**77%**

IMMEDIATE AND LONG TERM SIDE EFFECTS	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	*	*	*	*	*	*	*	*	**65%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	**52%**
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	*	*	*	*	*	*	*	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	**52%**

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	*	*	*	*	*	*	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	**44%**

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	*	*	*	*	*	*	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	**31%**

Age group tables

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

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	*	*	*	*	*	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	**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	*	*	*	*	*	*	*	*	**79%**
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	**83%**
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	**8.6**

Male/Female/Non-binary/Other tables

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

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	*	55%	*	*	*	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	20%	58%	*	*	*	*	**41%**

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	67%	81%	*	*	*	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	73%	83%	*	*	*	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	58%	82%	*	*	*	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	64%	83%	*	*	*	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	91%	94%	*	*	*	*	**93%**

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	80%	69%	*	*	*	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	58%	83%	*	*	*	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	58%	78%	*	*	*	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	75%	72%	*	*	*	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	92%	86%	*	*	*	*	**88%**

SUPPORT FROM A MAIN CONTACT PERSON	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	77%	94%	*	*	*	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	80%	100%	*	*	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	100%	100%	*	*	*	*	**100%**

Male/Female/Non-binary/Other tables

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

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	92%	92%	*	*	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	85%	67%	*	*	*	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	75%	86%	*	*	*	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	**67%**

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	58%	65%	*	*	*	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	100%	*	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	Male/Female/Non-binary/Other						
	Female	Male	Non-binary	Prefer to self-describe	Prefer not to say	Not given	**All**
Q27. Staff provided the patient with relevant information on available support	92%	92%	*	*	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	69%	88%	*	*	*	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	**64%**

Male/Female/Non-binary/Other tables

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

HOSPITAL CARE	Male/Female/Non-binary/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	69%	89%	*	*	*	*	**81%**
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	50%	83%	*	*	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	50%	81%	*	*	*	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	62%	78%	*	*	*	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	55%	59%	*	*	*	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	58%	94%	*	*	*	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	77%	100%	*	*	*	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	89%	*	*	*	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	60%	86%	*	*	*	*	**75%**

YOUR TREATMENT	Male/Female/Non-binary/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	75%	100%	*	*	*	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	**82%**
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	67%	89%	*	*	*	*	**80%**
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	*	*	*	*	*	*	**73%**
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	73%	80%	*	*	*	*	**77%**

Male/Female/Non-binary/Other tables

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

IMMEDIATE AND LONG TERM SIDE EFFECTS	Male/Female/Non-binary/Other						
	Female	Male	Non-binary	Prefer to self-describe	Prefer not to say	Not given	**All**
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	45%	80%	*	*	*	*	**65%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	42%	60%	*	*	*	*	**52%**
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	69%	*	*	*	*	**77%**
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	67%	62%	*	*	*	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	45%	57%	*	*	*	*	**52%**

SUPPORT WHILE AT HOME	Male/Female/Non-binary/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	50%	67%	*	*	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	**44%**

CARE FROM YOUR GP PRACTICE	Male/Female/Non-binary/Other						
	Female	Male	Non-binary	Prefer to self-describe	Prefer not to say	Not given	**All**
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	50%	*	*	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	31%	31%	*	*	*	*	**31%**

LIVING WITH AND BEYOND CANCER	Male/Female/Non-binary/Other						
	Female	Male	Non-binary	Prefer to self-describe	Prefer not to say	Not given	**All**
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	55%	70%	*	*	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	76%	*	*	*	*	**72%**

Male/Female/Non-binary/Other tables

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

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	67%	88%	*	*	*	*	**79%**
Q57. Administration of care was very good or good	62%	100%	*	*	*	*	**83%**
Q58. Cancer research opportunities were discussed with patient	90%	58%	*	*	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	7.9	9.1	*	*	*	*	**8.6**

Ethnicity tables

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

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	60%	*	*	*	*	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	44%	*	*	*	*	*	**41%**

DIAGNOSTIC TESTS	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q5. Patient received all the information needed about the diagnostic test in advance	71%	*	*	*	*	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	78%	*	*	*	*	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	68%	*	*	*	*	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	*	*	*	*	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	91%	*	*	*	*	*	**93%**

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	67%	*	*	*	*	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	67%	*	*	*	*	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	65%	*	*	*	*	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	65%	*	*	*	*	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	84%	*	*	*	*	*	**88%**

SUPPORT FROM A MAIN CONTACT PERSON	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q17. Patient had a main point of contact within the care team	86%	*	*	*	*	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	88%	*	*	*	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	100%	*	*	*	*	*	**100%**

DECIDING ON THE BEST TREATMENT	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q20. Treatment options were explained in a way the patient could completely understand	88%	*	*	*	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	67%	*	*	*	*	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	*	*	*	*	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	**67%**

Ethnicity tables

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

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	57%	*	*	*	*	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	*	*	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	92%	*	*	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q27. Staff provided the patient with relevant information on available support	89%	*	*	*	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	*	*	*	*	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	50%	*	*	*	*	*	**64%**

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	79%	*	*	*	*	*	**81%**
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	69%	*	*	*	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	*	*	*	*	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	67%	*	*	*	*	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	48%	*	*	*	*	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	77%	*	*	*	*	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	92%	*	*	*	*	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	*	*	*	*	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	*	*	*	*	*	**75%**

Ethnicity tables

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

YOUR TREATMENT	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	*	*	*	*	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	**82%**
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	78%	*	*	*	*	*	**80%**
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	*	*	*	*	*	*	**73%**
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	74%	*	*	*	*	*	**77%**

IMMEDIATE AND LONG TERM SIDE EFFECTS	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	48%	*	*	*	*	*	**52%**
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	69%	*	*	*	*	*	**77%**
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	*	*	*	*	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	47%	*	*	*	*	*	**52%**

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	56%	*	*	*	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	36%	*	*	*	*	*	**44%**

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q51. Patient definitely received the right amount of support from their GP practice during treatment	50%	*	*	*	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	36%	*	*	*	*	*	**31%**

Ethnicity tables

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

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	*	*	*	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	61%	*	*	*	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	*	*	*	*	*	**72%**

YOUR OVERALL NHS CARE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	**All**
Q56. The whole care team worked well together	78%	*	*	*	*	*	**79%**
Q57. Administration of care was very good or good	83%	*	*	*	*	*	**83%**
Q58. Cancer research opportunities were discussed with patient	69%	*	*	*	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	8.4	*	*	*	*	*	**8.6**

IMD quintile tables

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

SUPPORT FROM YOUR GP PRACTICE	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	50%	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	27%	*	**41%**

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	*	*	*	80%	64%	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	82%	73%	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	73%	55%	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	82%	67%	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	91%	92%	*	**93%**

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	*	*	*	*	45%	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	91%	58%	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	82%	55%	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	82%	58%	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	91%	*	**88%**

SUPPORT FROM A MAIN CONTACT PERSON	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q17. Patient had a main point of contact within the care team	*	*	*	*	75%	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	**100%**

IMD quintile tables

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

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	*	*	*	*	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	82%	83%	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	90%	90%	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	**67%**

CARE PLANNING	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	70%	58%	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q27. Staff provided the patient with relevant information on available support	*	*	*	100%	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	80%	75%	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	**64%**

HOSPITAL CARE	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	73%	83%	*	**81%**
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	80%	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	82%	50%	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	*	*	*	73%	75%	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	60%	50%	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	82%	70%	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	91%	83%	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	82%	83%	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	80%	*	**75%**

IMD quintile tables

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

YOUR TREATMENT	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	83%	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	**82%**
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	*	*	*	90%	67%	*	**80%**
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	*	*	*	*	*	*	**73%**
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	*	*	*	70%	70%	*	**77%**

IMMEDIATE AND LONG TERM SIDE EFFECTS	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	80%	*	*	**65%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	60%	50%	*	**52%**
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	*	*	*	*	50%	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	40%	*	**52%**

SUPPORT WHILE AT HOME	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	**44%**

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	*	*	*	*	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	*	*	*	30%	33%	*	**31%**

IMD quintile tables

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

LIVING WITH AND BEYOND CANCER	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	**All**
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	82%	50%	*	**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	*	*	*	82%	67%	*	**79%**
Q57. Administration of care was very good or good	*	*	*	91%	75%	*	**83%**
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.9	8.0	*	**8.6**

Long-term condition status tables

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

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	30%	*	*	**56%**
Q3. Referral for diagnosis was explained in a way the patient could completely understand	27%	*	*	**41%**

DIAGNOSTIC TESTS	Long-term condition status			
	Yes	No	Not given	**All**
Q5. Patient received all the information needed about the diagnostic test in advance	64%	*	*	**75%**
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	73%	*	*	**79%**
Q7. Patient felt the length of time waiting for diagnostic test results was about right	60%	*	*	**72%**
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	*	*	**76%**
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	88%	*	*	**93%**

FINDING OUT THAT YOU HAD CANCER	Long-term condition status			
	Yes	No	Not given	**All**
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	67%	*	*	**74%**
Q13. Patient was definitely told sensitively that they had cancer	75%	*	*	**73%**
Q14. Cancer diagnosis explained in a way the patient could completely understand	67%	*	*	**70%**
Q15. Patient was definitely told about their diagnosis in an appropriate place	69%	*	*	**73%**
Q16. Patient was told they could go back later for more information about their diagnosis	82%	*	*	**88%**

SUPPORT FROM A MAIN CONTACT PERSON	Long-term condition status			
	Yes	No	Not given	**All**
Q17. Patient had a main point of contact within the care team	87%	*	*	**86%**
Q18. Patient found it very or quite easy to contact their main contact person	83%	*	*	**91%**
Q19. Patient found advice from main contact person was very or quite helpful	100%	*	*	**100%**

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	91%	*	*	**92%**
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	69%	*	*	**74%**
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	77%	*	*	**81%**
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	**67%**

Long-term condition status tables

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

CARE PLANNING	Long-term condition status			
	Yes	No	Not given	**All**
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	60%	*	*	**62%**
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	**94%**
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	**93%**

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	No	Not given	**All**
Q27. Staff provided the patient with relevant information on available support	90%	*	*	**92%**
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	*	*	**80%**
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	**64%**

HOSPITAL CARE	Long-term condition status			
	Yes	No	Not given	**All**
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	81%	*	*	**81%**
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%	*	*	**68%**
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	*	*	**68%**
Q34. Patient was always able to get help from ward staff when needed	69%	*	*	**71%**
Q35. Patient was always able to discuss worries and fears with hospital staff	50%	*	*	**57%**
Q36. Hospital staff always did everything they could to help the patient control pain	80%	*	*	**79%**
Q37. Patient was always treated with respect and dignity while in hospital	88%	*	*	**90%**
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	81%	*	*	**87%**
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	*	*	**75%**

Long-term condition status tables

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

YOUR TREATMENT	Long-term condition status			
	Yes	No	Not given	**All**
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	*	*	**90%**
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*****
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	**82%**
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	80%	*	*	**80%**
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	*	*	*	**73%**
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	62%	*	*	**77%**

IMMEDIATE AND LONG TERM SIDE EFFECTS	Long-term condition status			
	Yes	No	Not given	**All**
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	58%	*	*	**65%**
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	54%	*	*	**52%**
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	70%	*	*	**77%**
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	55%	*	*	**64%**
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	45%	*	*	**52%**

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	50%	*	*	**59%**
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	**44%**

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	55%	*	*	**48%**
Q52. Patient has had a review of cancer care by GP practice	29%	*	*	**31%**

Long-term condition status tables

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

LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	**All**
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	**0%**
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	55%	*	*	**62%**
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	*	*	**72%**

YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	**All**
Q56. The whole care team worked well together	73%	*	*	**79%**
Q57. Administration of care was very good or good	80%	*	*	**83%**
Q58. Cancer research opportunities were discussed with patient	80%	*	*	**73%**
Q59. Patient's average rating of care scored from very poor to very good	8.1	*	*	**8.6**

Year on year charts

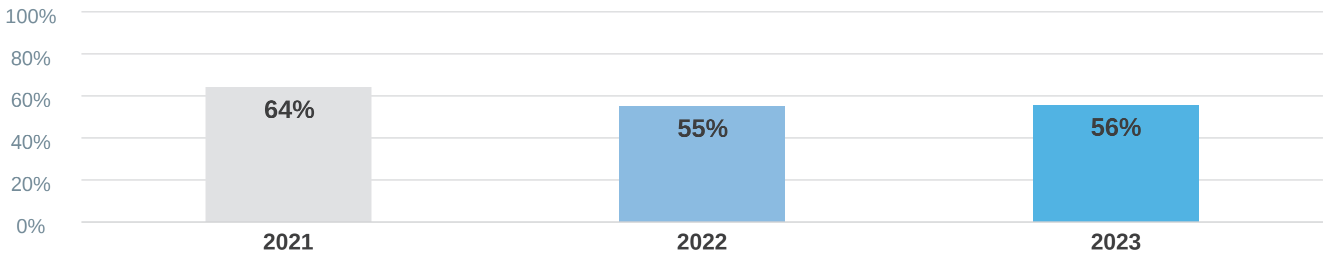
* Indicates where a score is not available due to suppression or a low base size.

** No score available for these years.

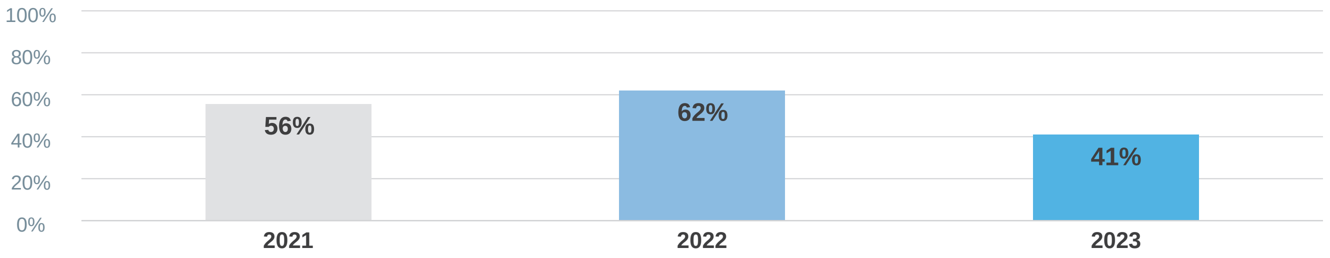
The scores are unadjusted and based on England scores only.

SUPPORT FROM YOUR GP PRACTICE

Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis

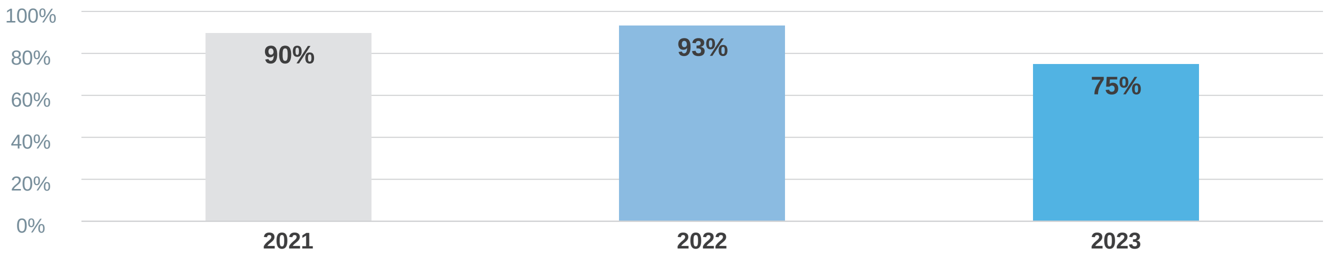


Q3. Referral for diagnosis was explained in a way the patient could completely understand

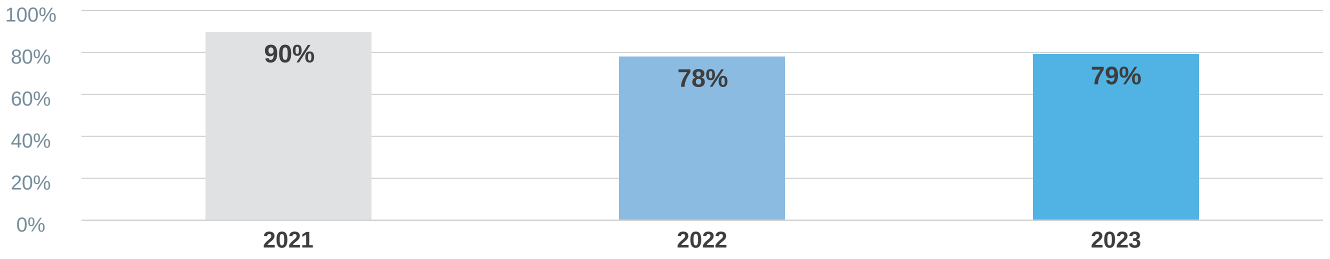


DIAGNOSTIC TESTS

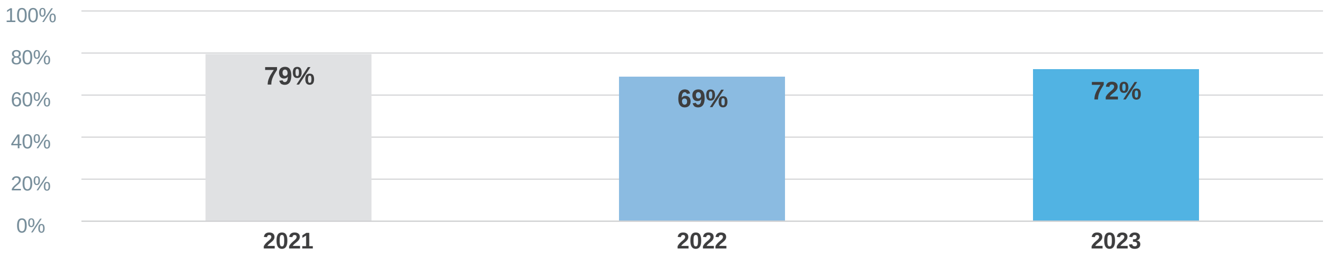
Q5. Patient received all the information needed about the diagnostic test in advance



Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient



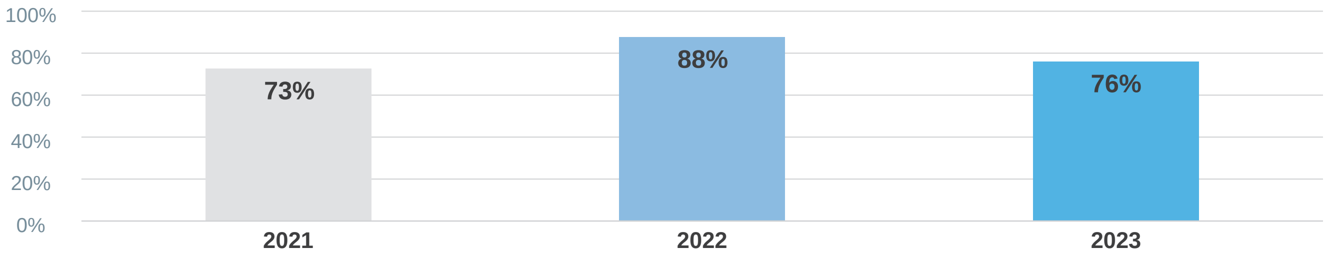
Q7. Patient felt the length of time waiting for diagnostic test results was about right



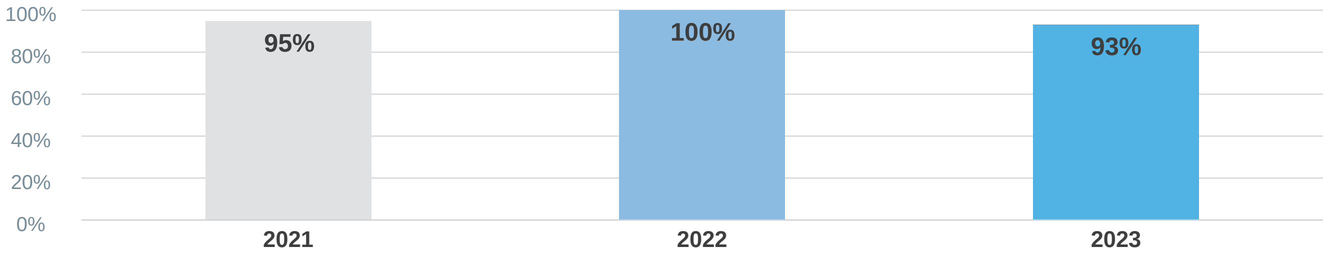
Year on year charts

* 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.

Q8. Diagnostic test results were explained in a way the patient could completely understand

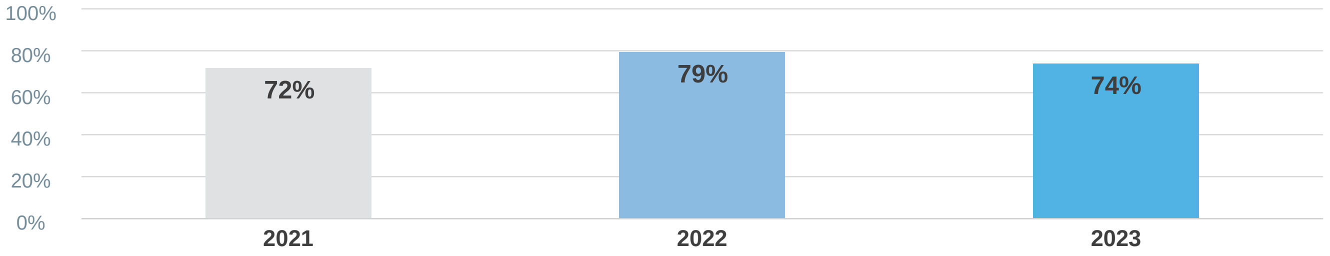


Q9. Enough privacy was always given to the patient when receiving diagnostic test results

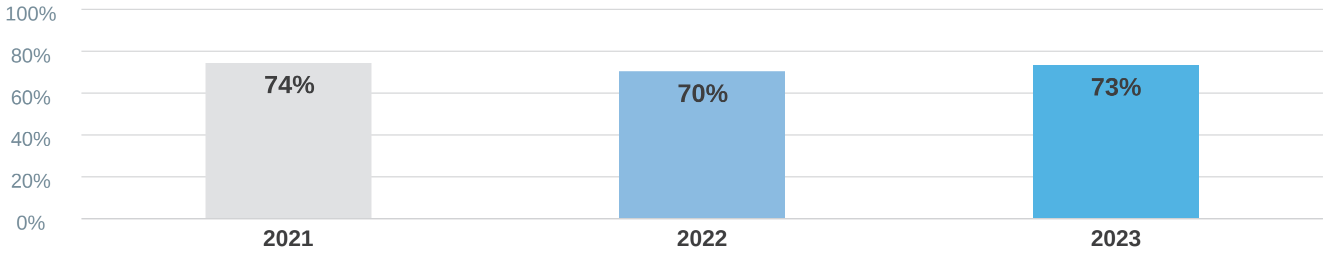


FINDING OUT THAT YOU HAD CANCER

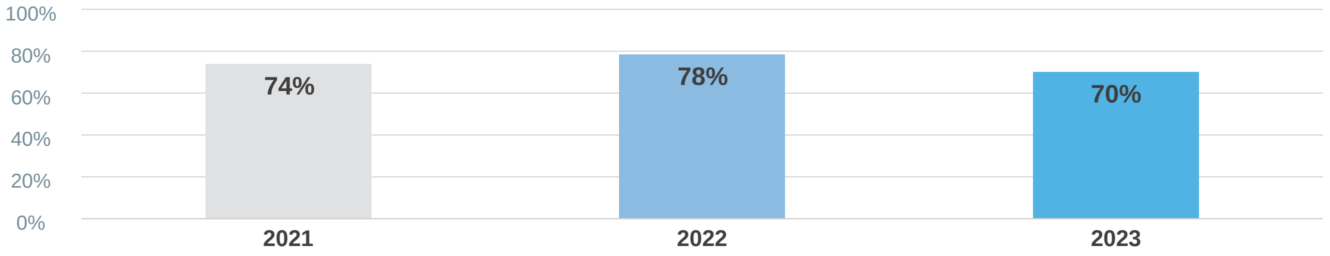
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis



Q13. Patient was definitely told sensitively that they had cancer



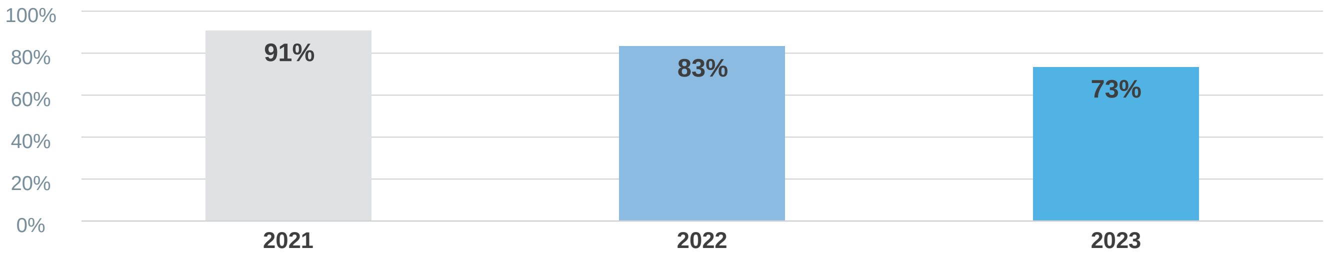
Q14. Cancer diagnosis explained in a way the patient could completely understand



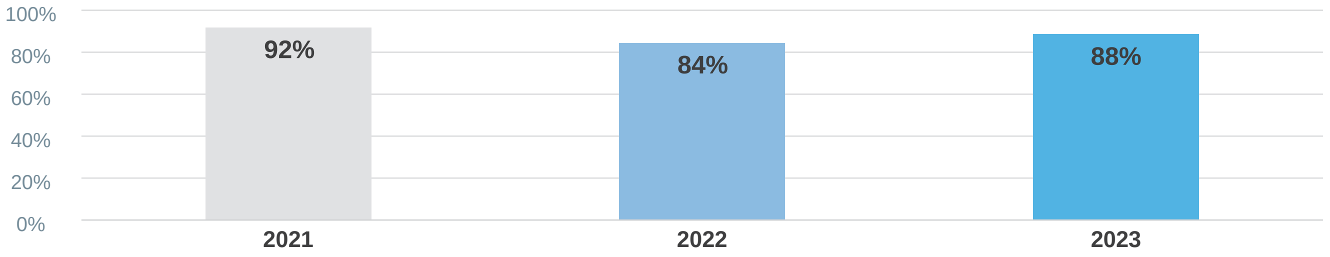
Year on year charts

*	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.

Q15. Patient was definitely told about their diagnosis in an appropriate place

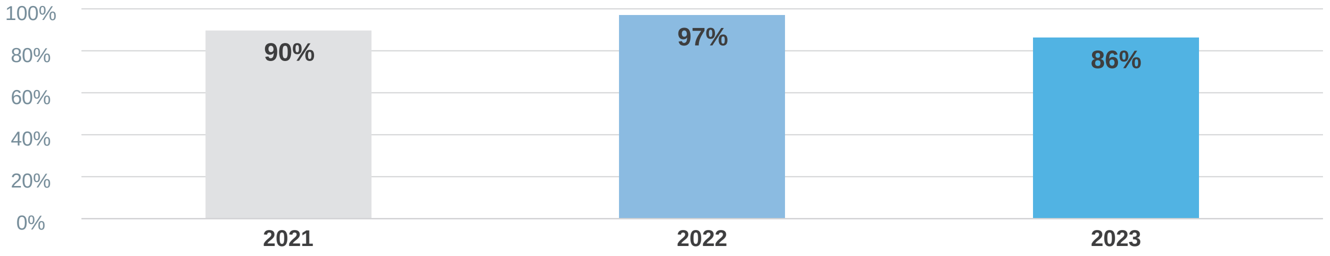


Q16. Patient was told they could go back later for more information about their diagnosis

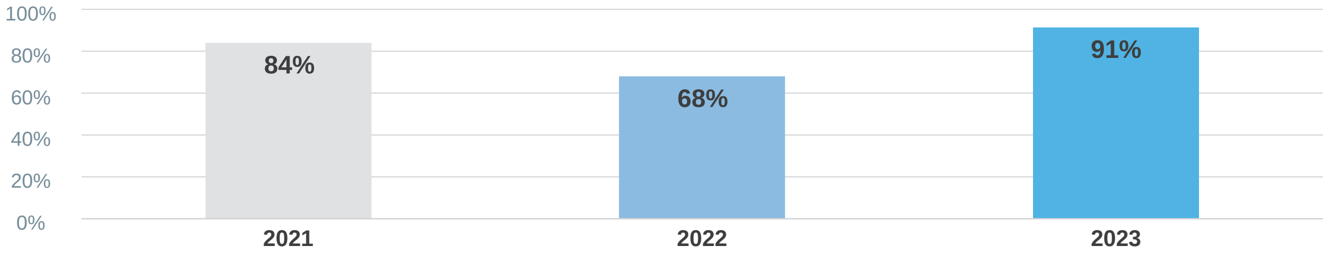


SUPPORT FROM A MAIN CONTACT PERSON

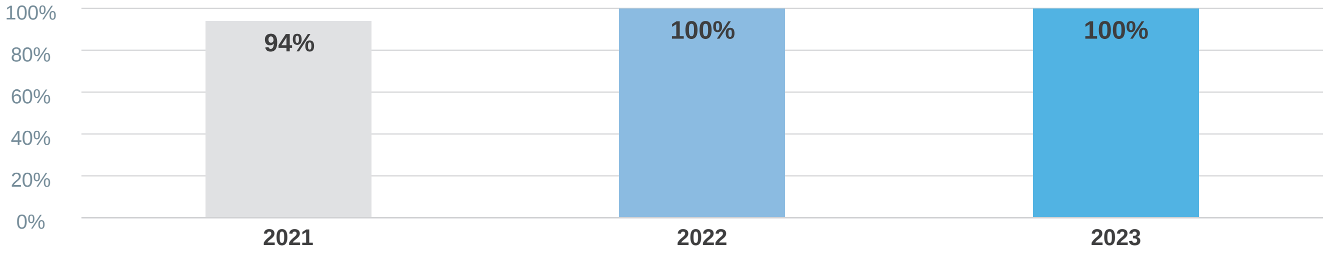
Q17. Patient had a main point of contact within the care team



Q18. Patient found it very or quite easy to contact their main contact person



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

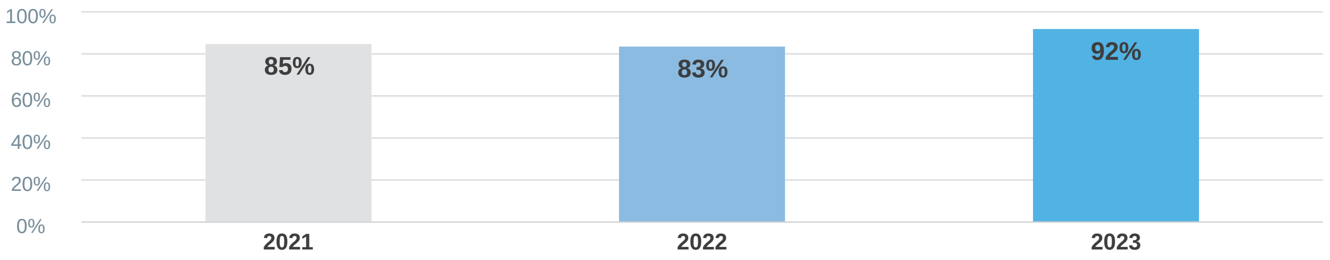


Year on year charts

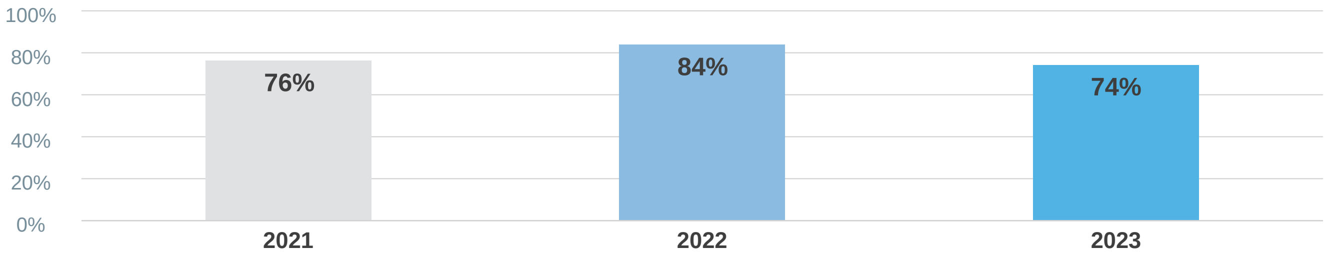
*	Indicates where a score is not available due to suppression or a low base size.	**	No score available for these years.	The scores are unadjusted and based on England scores only.

DECIDING ON THE BEST TREATMENT

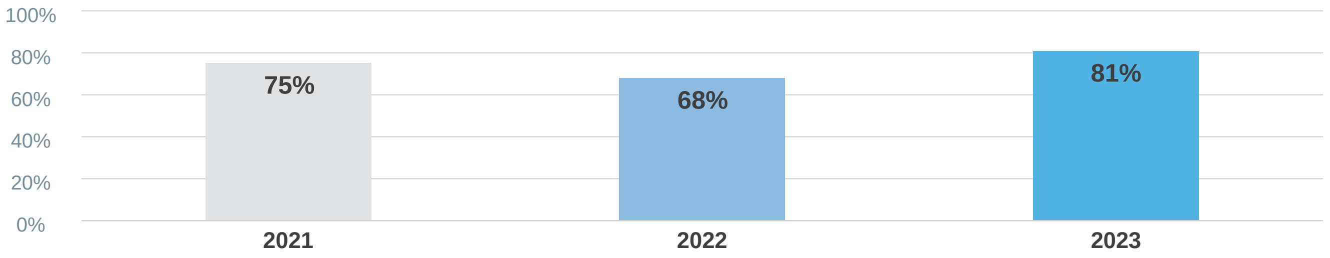
Q20. Treatment options were explained in a way the patient could completely understand



Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment



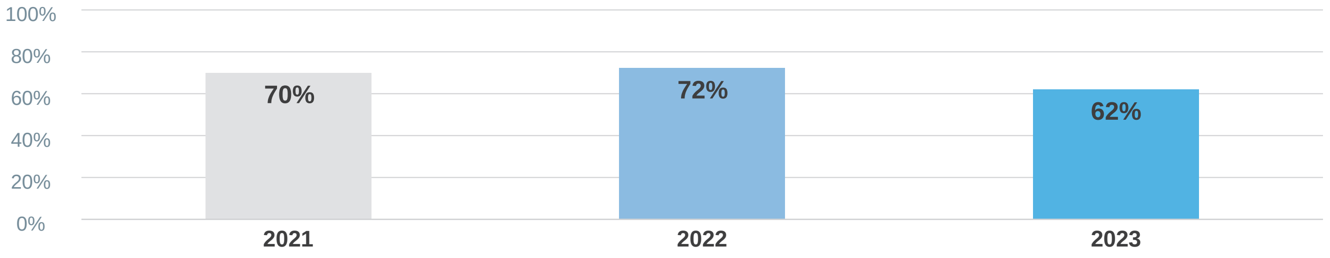
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options



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

CARE PLANNING

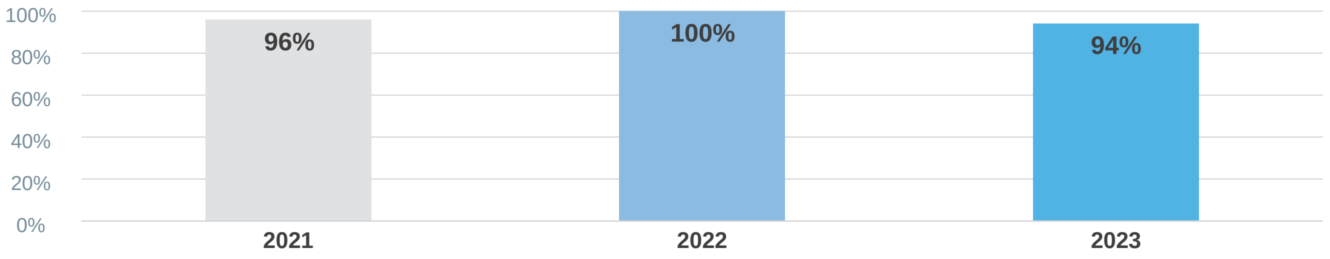
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment



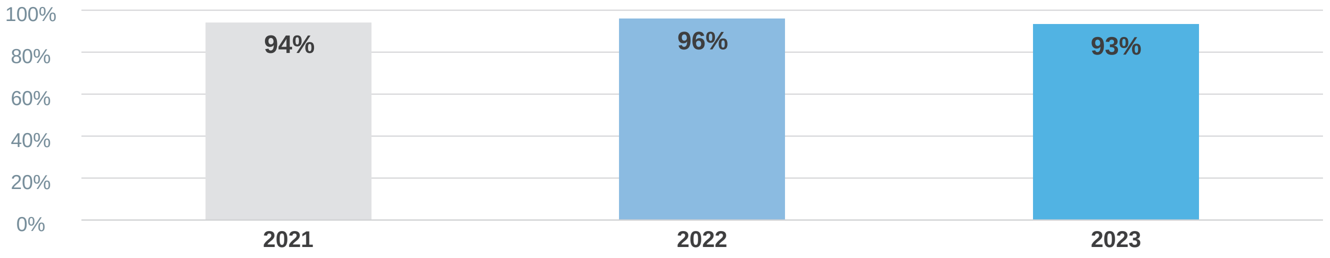
Year on year charts

*	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.

Q25. A member of their care team helped the patient create a care plan to address any needs or concerns

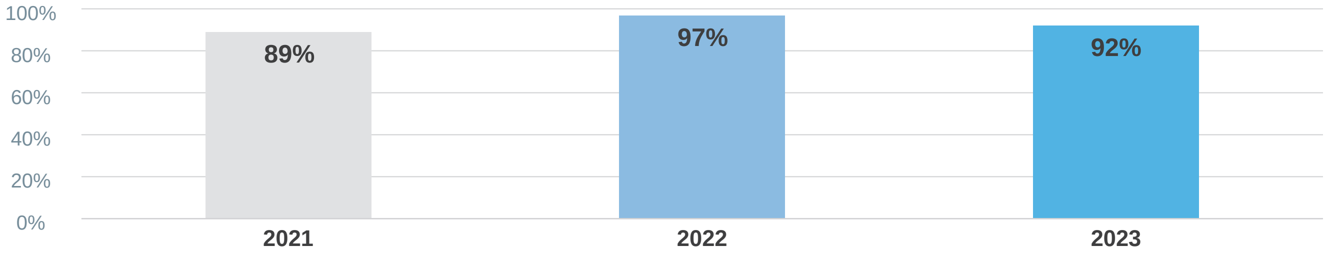


Q26. Care team reviewed the patient's care plan with them to ensure it was up to date

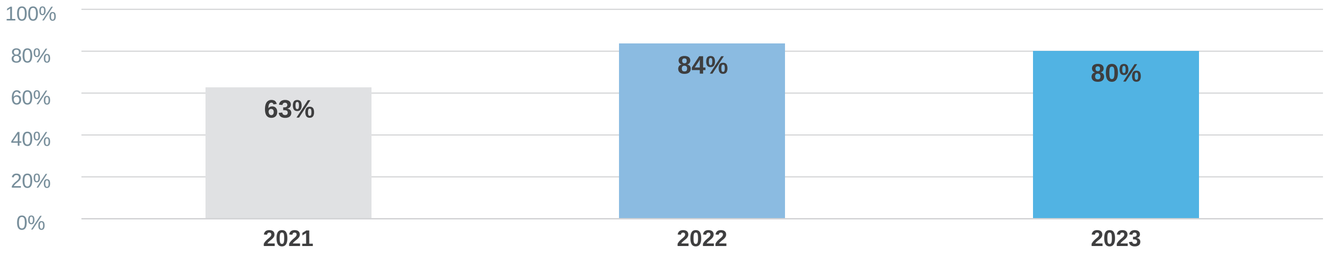


SUPPORT FROM HOSPITAL STAFF

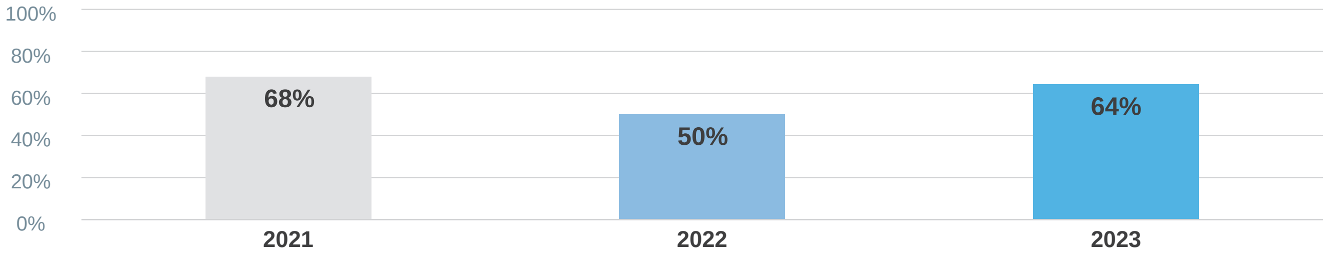
Q27. Staff provided the patient with relevant information on available support



Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff



Q29. Patient was offered information about how to get financial help or benefits

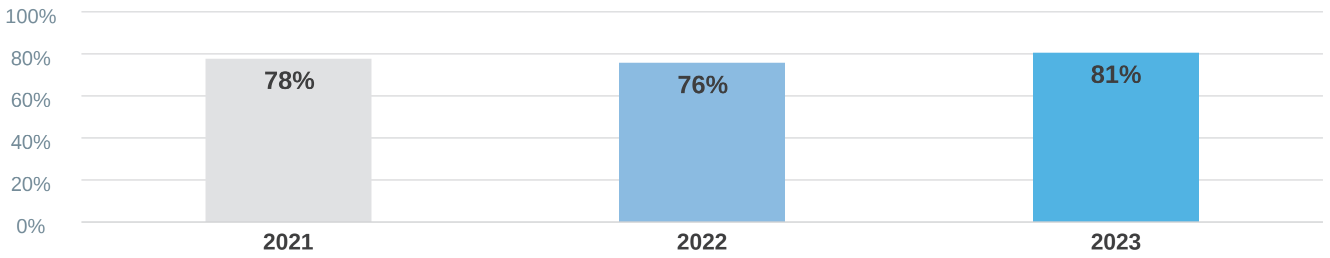


Year on year charts

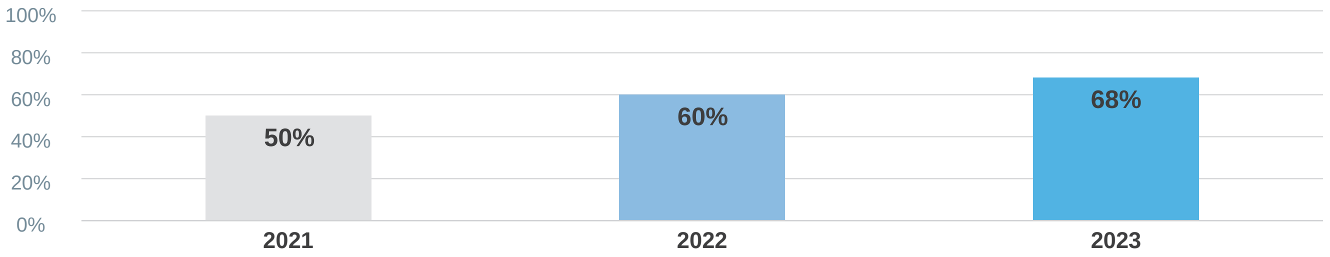
* Indicates where a score is not available due to suppression or a low base size.	**	No score available for these years.	The scores are unadjusted and based on England scores only.

HOSPITAL CARE

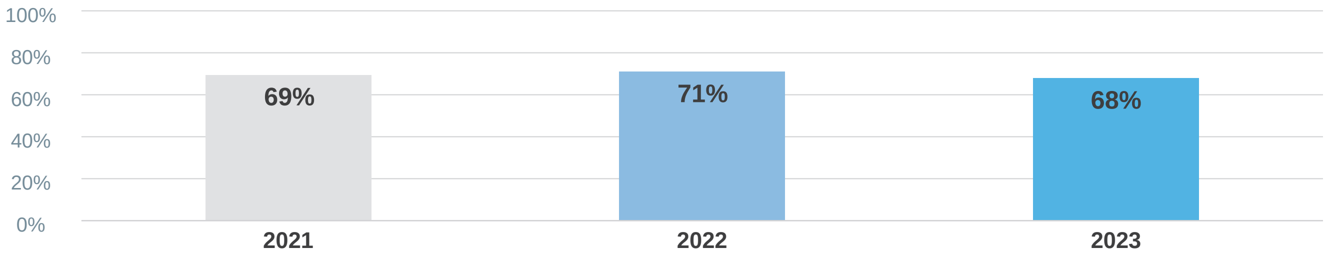
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital



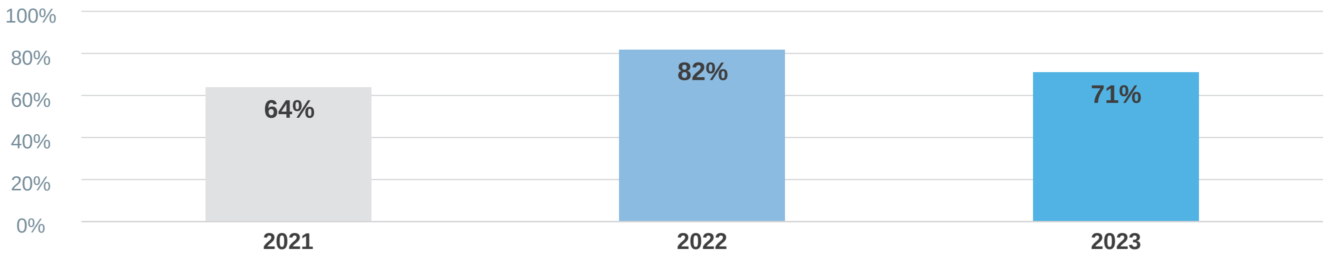
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital



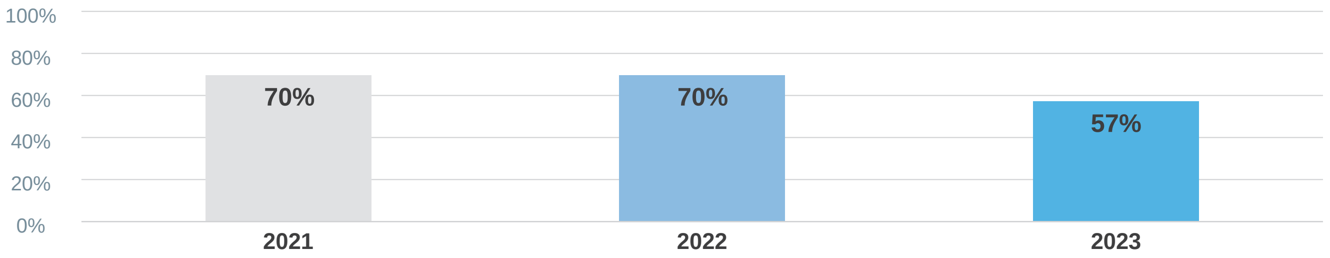
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital



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



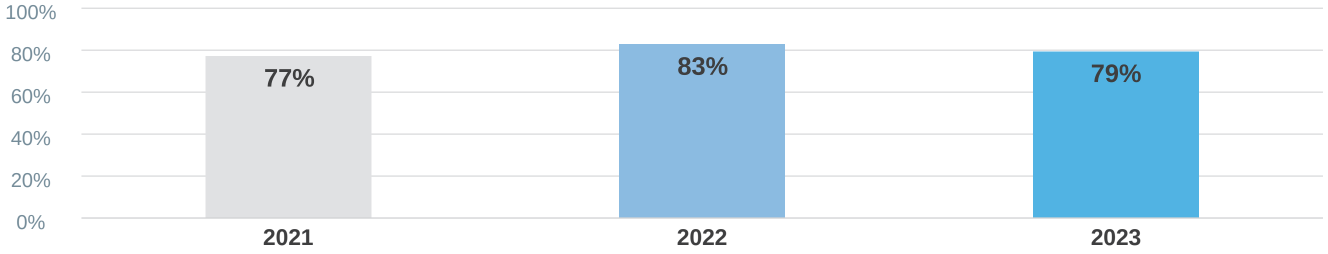
Q35. Patient was always able to discuss worries and fears with hospital staff



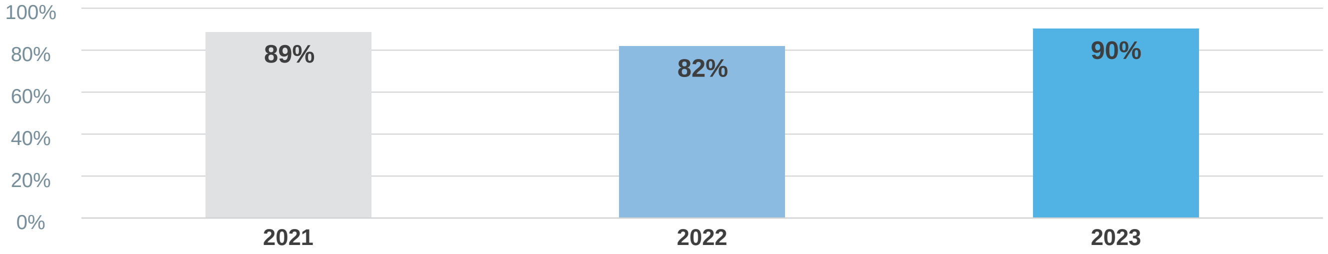
Year on year charts

* 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.

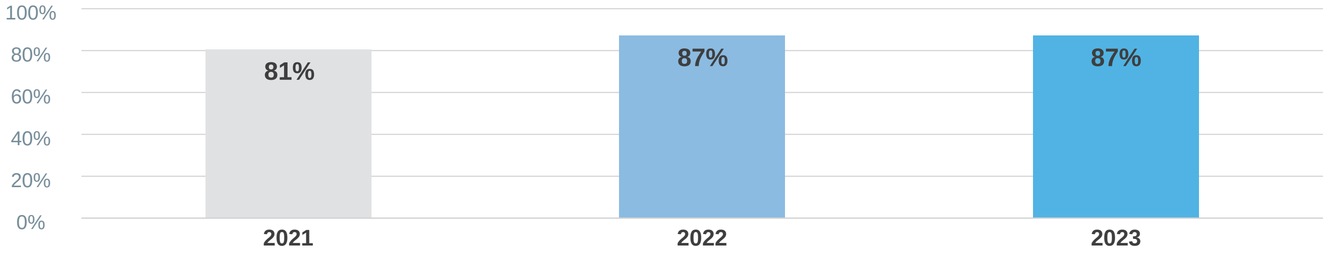
Q36. Hospital staff always did everything they could to help the patient control pain



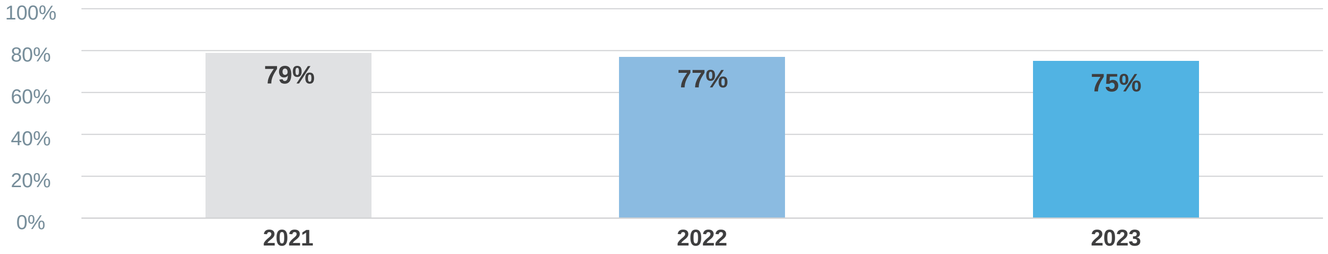
Q37. Patient was always treated with respect and dignity while in hospital



Q38. Patient received easily understandable information about what they should or should not do after leaving hospital

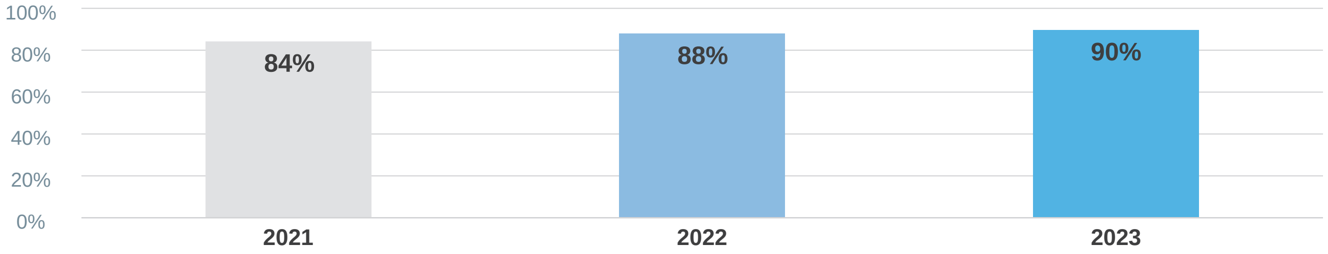


Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case



YOUR TREATMENT

Q41_1. Beforehand patient completely had enough understandable information about surgery



Year on year charts

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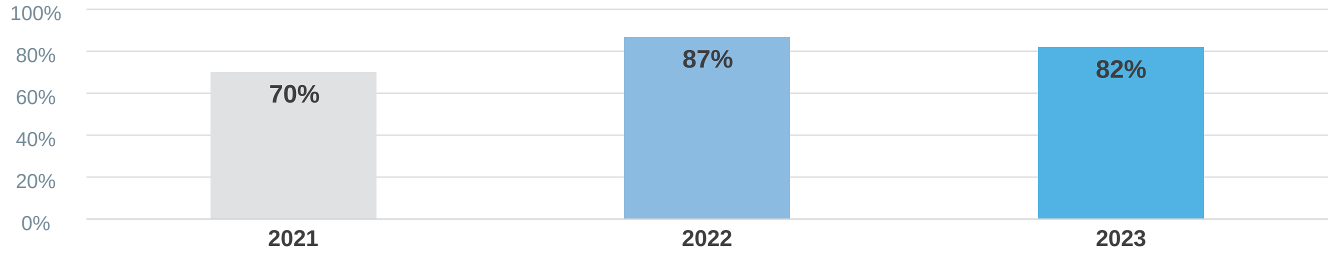
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy

Q41_3. Beforehand patient completely had enough understandable information about radiotherapy



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

Year on year charts

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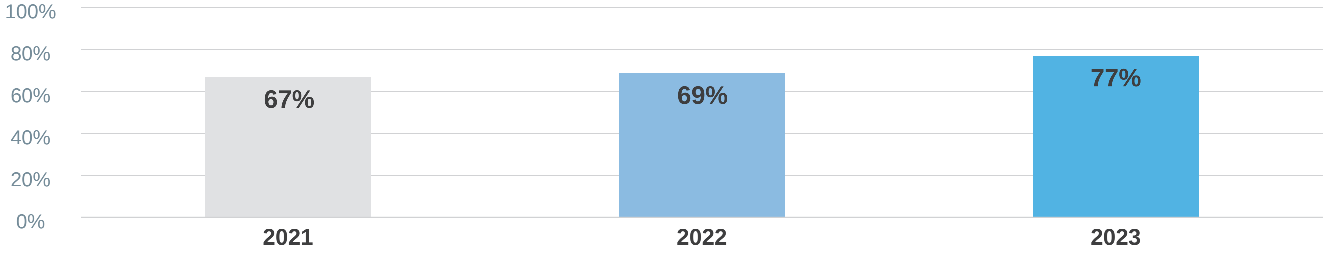
Q42_2. Patient completely had enough understandable information about their response to chemotherapy

Q42_3. Patient completely had enough understandable information about their response to radiotherapy

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



Year on year charts

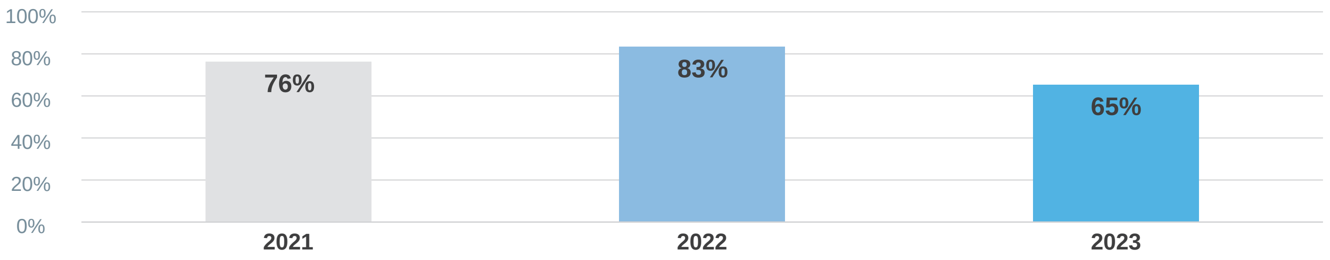
* Indicates where a score is not available due to suppression or a low base size.

** No score available for these years.

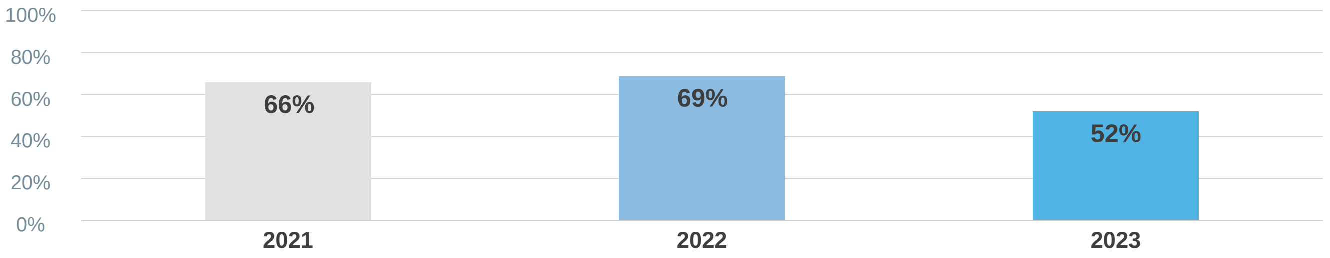
The scores are unadjusted and based on England scores only.

IMMEDIATE AND LONG TERM SIDE EFFECTS

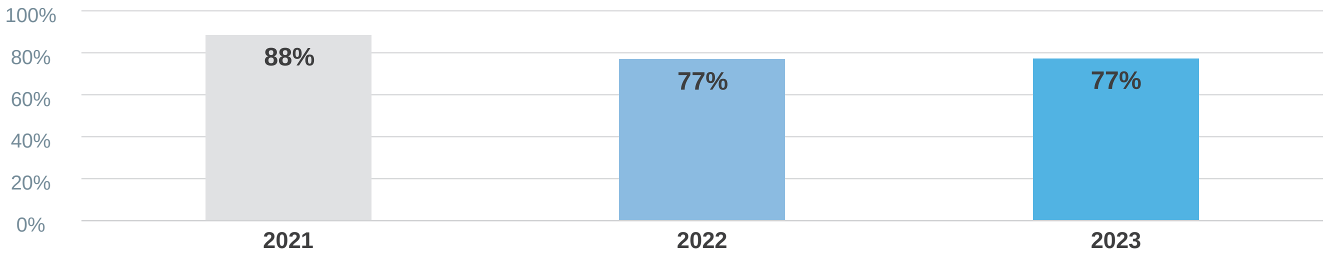
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand



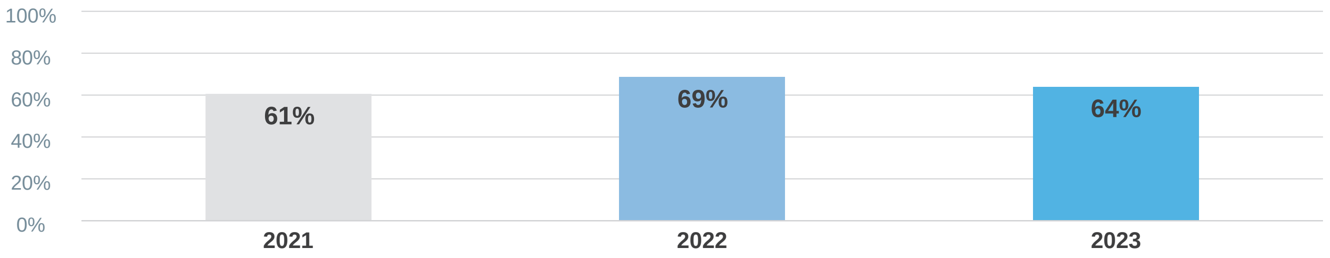
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment



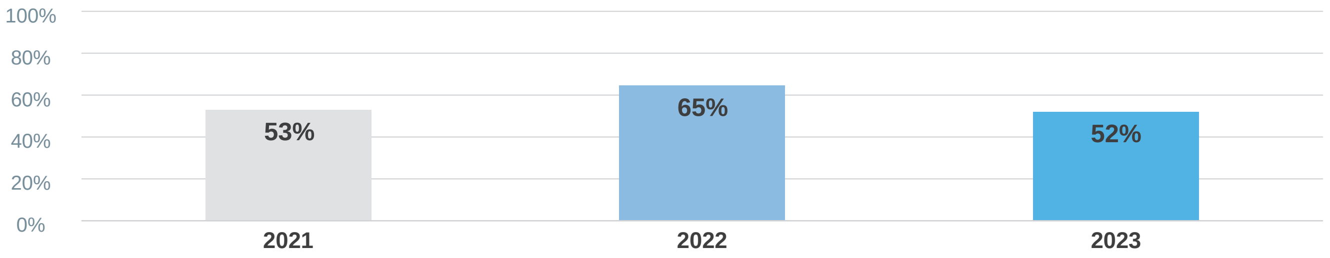
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment



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



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



Year on year charts

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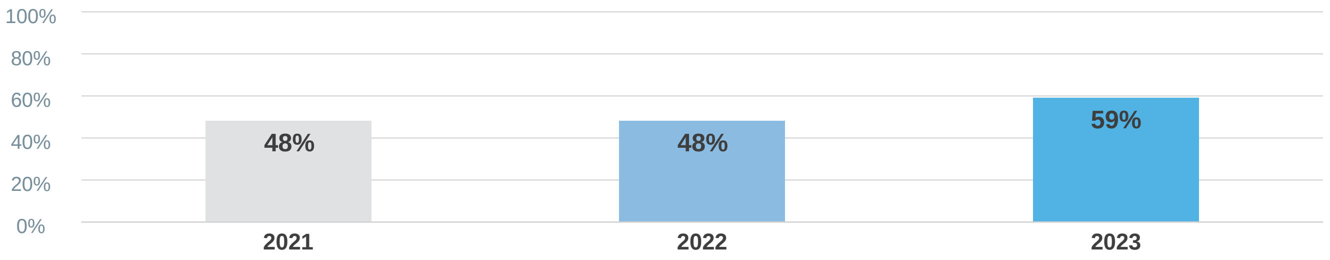
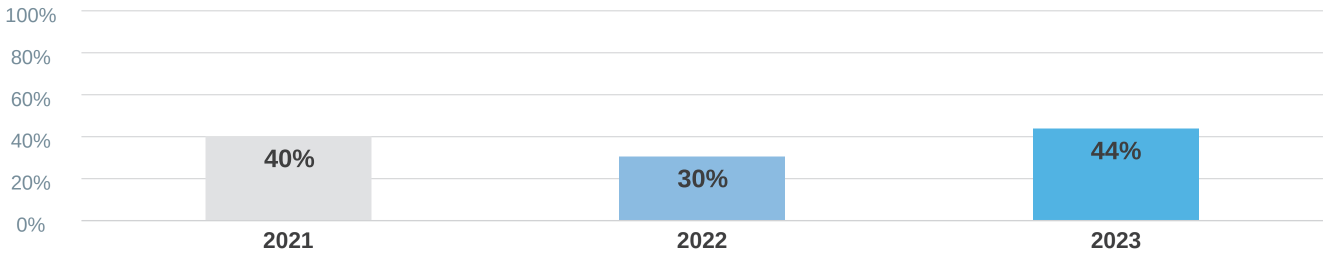
SUPPORT WHILE AT HOME

Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home

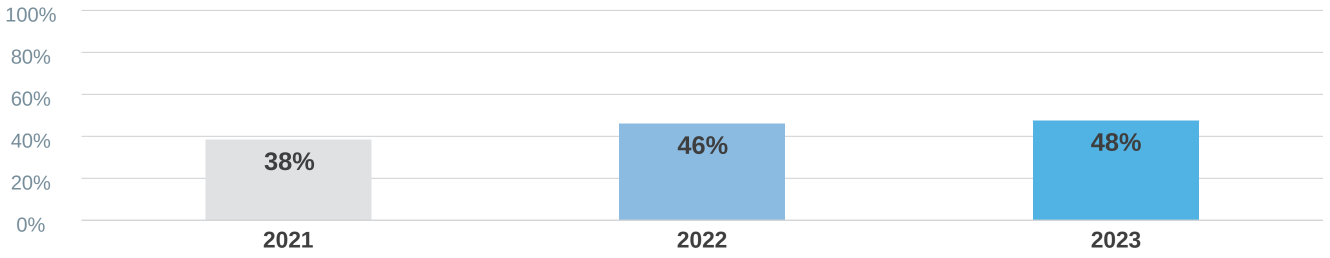


Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services

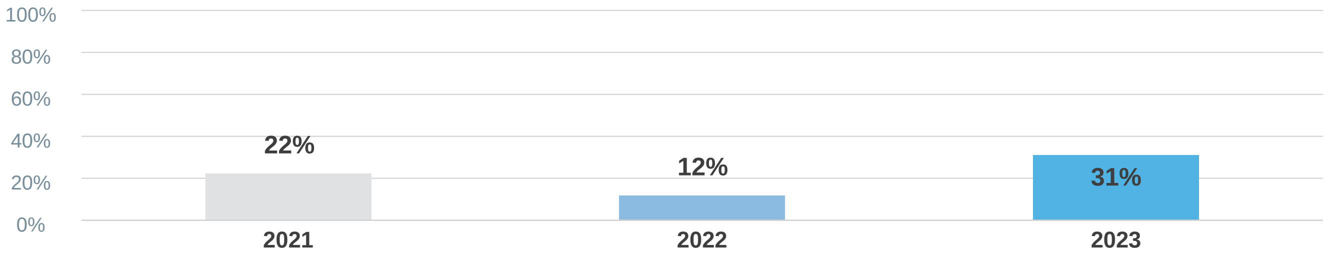


CARE FROM YOUR GP PRACTICE

Q51. Patient definitely received the right amount of support from their GP practice during treatment

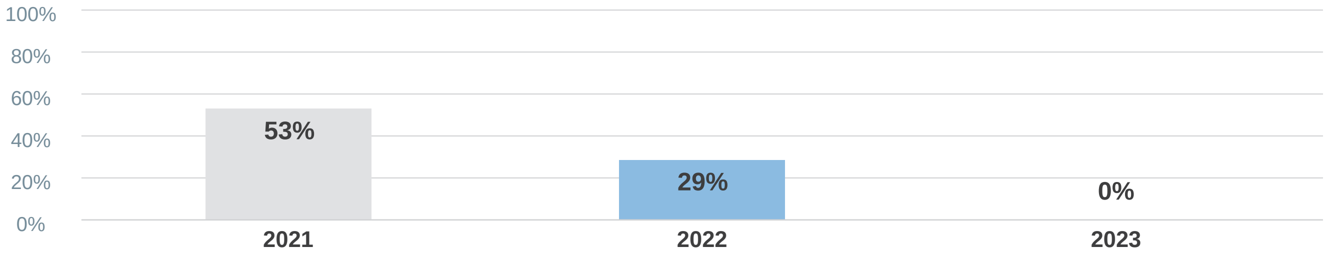


Q52. Patient has had a review of cancer care by GP practice



LIVING WITH AND BEYOND CANCER

Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services



Year on year charts

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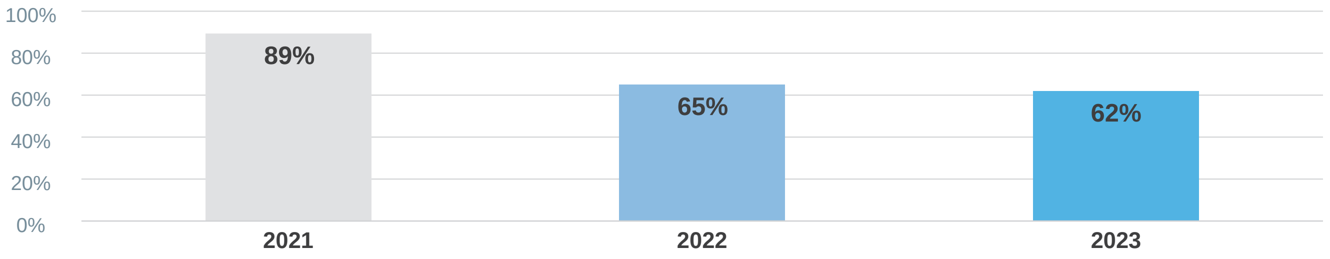
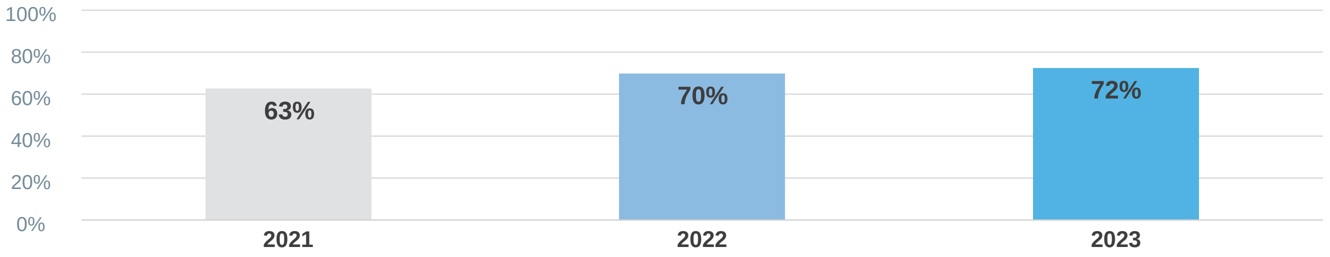
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment

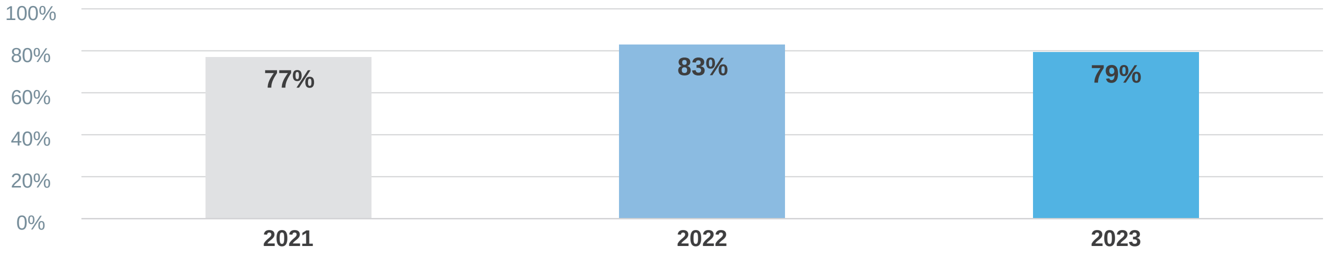


Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading

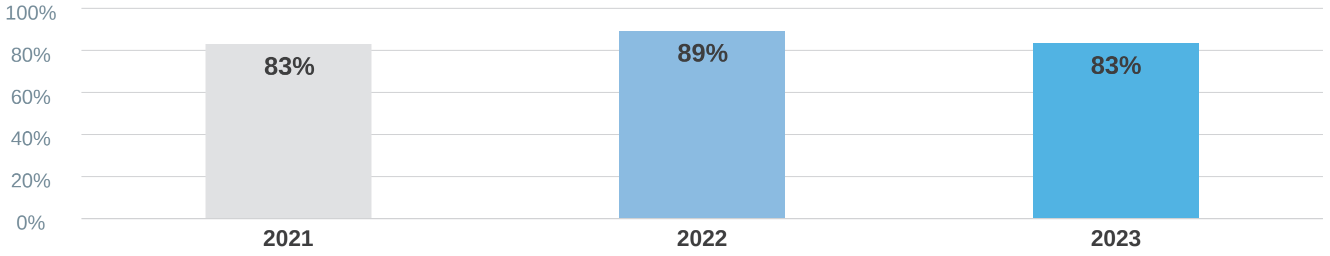


YOUR OVERALL NHS CARE

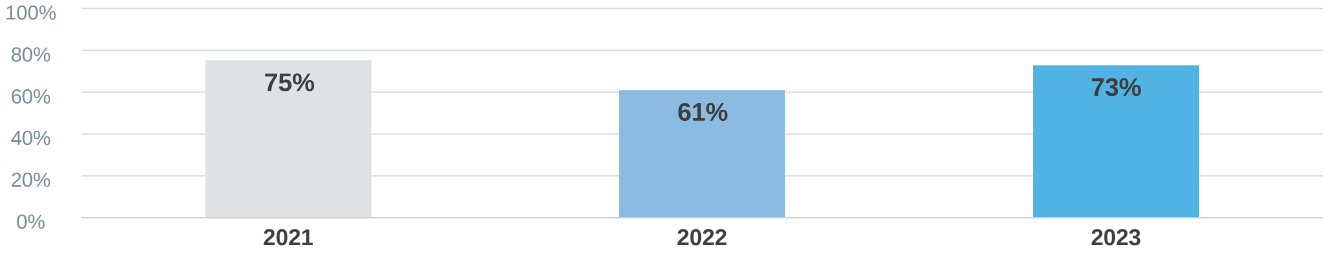
Q56. The whole care team worked well together



Q57. Administration of care was very good or good



Q58. Cancer research opportunities were discussed with patient



Year on year charts

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Q59. Patient's average rating of care scored from very poor to very good