

# **Cancer Patient Experience Survey**

2023 Results

# The Royal Orthopaedic Hospital NHS Foundation Trust

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# **Executive summary**

The Royal Orthopaedic Hospital NHS Foundation Trust has no scores above or below expected range

### Introduction

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

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

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

### Methodology

#### Eligibility, fieldwork and survey methods

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

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

#### Note on question comparability

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

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

#### **Case-mix adjustment**

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

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

#### Scoring methodology

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

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

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

### Statistical significance

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

### **Suppression**

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

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

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

#### **Additional suppression**

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

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

### **Understanding the results**

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

### **Expected range charts**

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

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

#### Comparability tables

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

### The Royal Orthopaedic Hospital NHS Foundation Trust

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

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

### **Sub-group breakdowns**

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

### **Tumour group tables**

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

### Age group tables

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

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

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

### **Ethnicity tables**

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

#### Long-term condition status tables

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

#### IMD quintile tables

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

### Year on year charts

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

### National level and England level data

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

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

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

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

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

### **Further information**

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

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

### **Response rate**

### **Overall response rate**

30 patients responded out of a total of 65 patients, resulting in a response rate of 46%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	68	65	30	46%
National	129,231	121,121	63,438	52%

### Respondents by survey type

	Number of respondents
Paper	21
Online	9
Phone	0
Translation service	0
Total	30

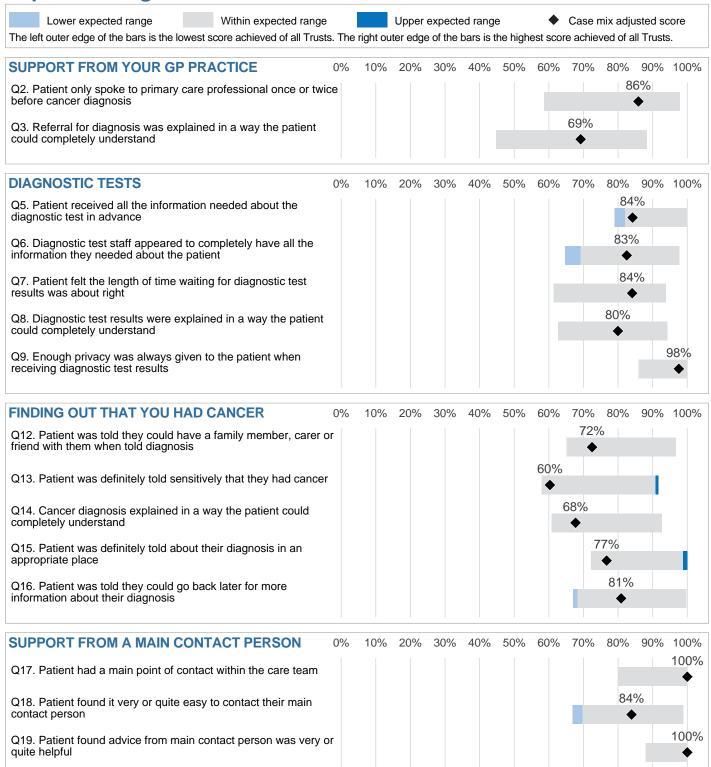
### Respondents by tumour group

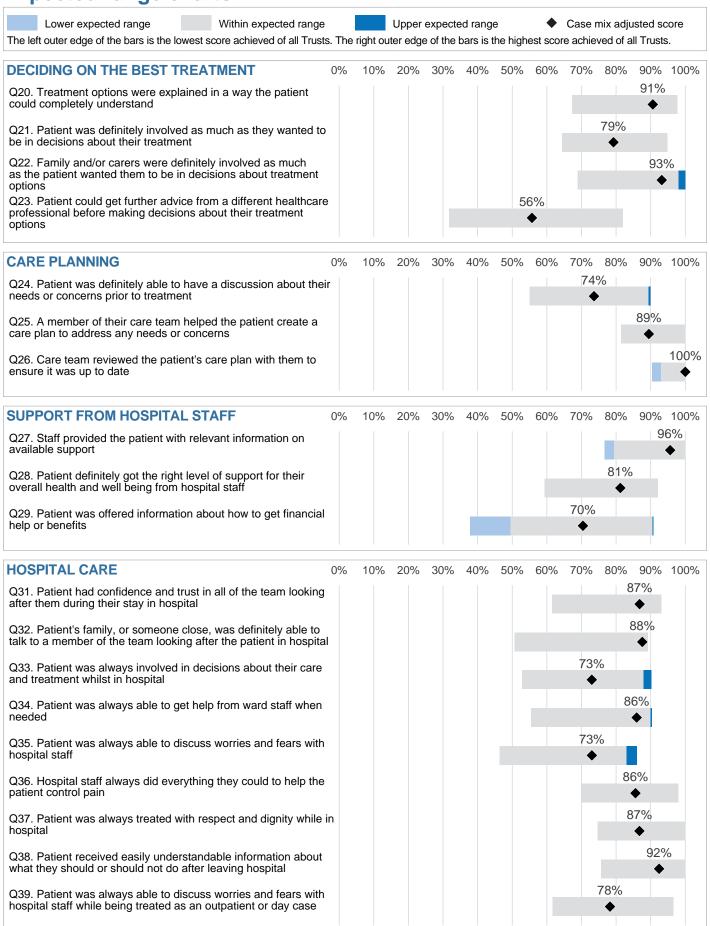
	Number of respondents
Brain / CNS	0
Breast	0
Colorectal / LGT	0
Gynaecological	0
Haematological	0
Head and neck	0
Lung	0
Prostate	0
Sarcoma	24
Skin	0
Upper gastro	0
Urological	0
Other	6
Total	30

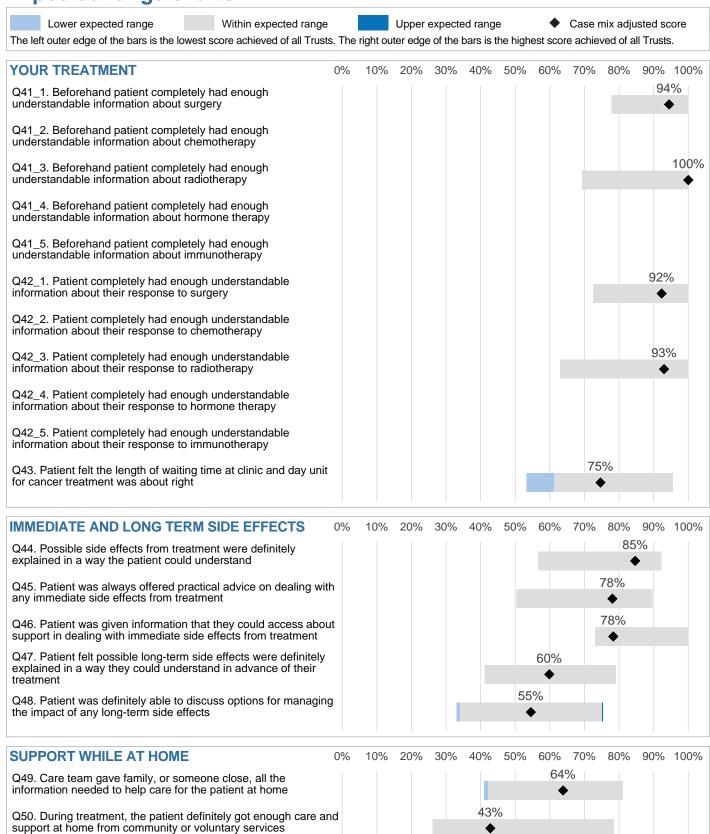
### Respondents by ethnicity

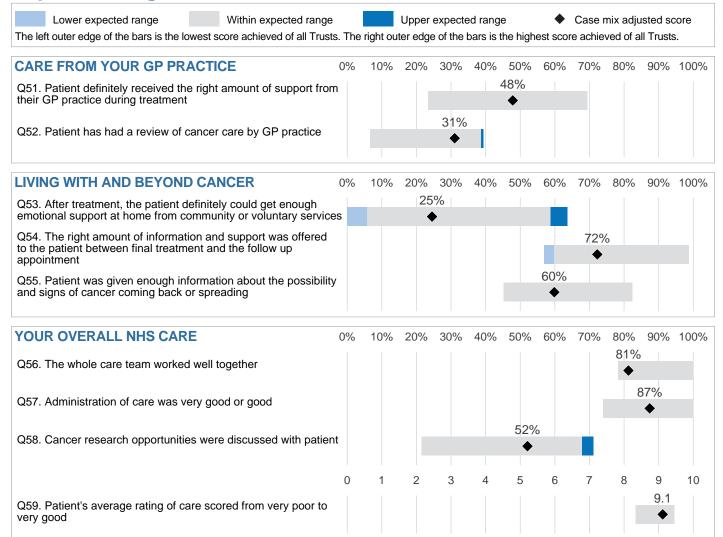
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	*
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	*
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
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	30

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









### **Comparability tables**

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

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

\*\* No score available for 2022.

			Unadjus	ted score	Case n					
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	20	55%	17	76%			86%	59%	98%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	15	47%	18	67%			69%	45%	88%	67%

			Unadjus	ted score	Case n					
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q5. Patient received all the information needed about the diagnostic test in advance	18	89%	25	80%			84%	82%	100%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	20	85%	26	77%			83%	69%	98%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	20	80%	26	77%			84%	61%	94%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	20	70%	26	73%			80%	63%	94%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	20	80%	26	96%			98%	86%	100%	95%

			Unadjus	ted score	Case n					
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	22	68%	24	67%			72%	65%	97%	81%
Q13. Patient was definitely told sensitively that they had cancer	23	70%	27	56%			60%	58%	91%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	23	70%	27	56%			68%	61%	93%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	22	68%	27	70%			77%	72%	99%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	21	67%	21	76%			81%	68%	100%	84%

			Unadjus	ted score	Case m					
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q17. Patient had a main point of contact within the care team	22	95%	26	100%	•		100%	80%	100%	91%
Q18. Patient found it very or quite easy to contact their main contact person	20	85%	25	84%			84%	70%	99%	84%
Q19. Patient found advice from main contact person was very or quite helpful	21	95%	26	100%			100%	88%	100%	96%

### **Comparability tables**

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

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

\*\* No score available for 2022.

	Unadjusted scores Case mix adjusted scores									
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q20. Treatment options were explained in a way the patient could completely understand	21	76%	24	88%			91%	67%	98%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	22	86%	27	74%			79%	64%	95%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	21	81%	25	92%			93%	69%	98%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	15	60%			56%	32%	82%	57%

			Unadjus	ted score	es		Case m	nix adjuste	ed scores	
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	22	59%	26	69%			74%	55%	89%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	13	85%	16	88%			89%	81%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	**	**	14	100%			100%	93%	100%	99%

			Unadjust	ted score	s		Case n	nix adjuste	d scores	
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q27. Staff provided the patient with relevant information on available support	18	78%	23	91%			96%	79%	100%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	23	65%	27	74%			81%	59%	92%	76%
Q29. Patient was offered information about how to get financial help or benefits	15	40%	20	70%			70%	50%	91%	70%

# **Comparability tables**

Adjusted Score below Lower

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

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	23	78%	27	81%			87%	62%	93%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	20	55%	22	86%			88%	51%	89%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	22	73%	26	69%			73%	53%	88%	70%
Q34. Patient was always able to get help from ward staff when needed	22	73%	26	77%			86%	55%	90%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	23	61%	26	65%			73%	46%	83%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	22	91%	26	77%			86%	70%	98%	84%
Q37. Patient was always treated with respect and dignity while in hospital	23	78%	26	81%			87%	75%	100%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	23	78%	25	88%			92%	76%	100%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	18	67%	21	76%			78%	62%	97%	79%

			Unadjus	ted score	S		Case n	nix adjuste	d scores	
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q41_1. Beforehand patient completely had enough understandable information about surgery	20	100%	24	88%	•		94%	78%	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	**	**	10	100%			100%	69%	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	**	**	23	87%			92%	72%	100%	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	**	**	10	90%			93%	63%	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	23	78%	26	69%			75%	61%	96%	78%

### **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. (2021, 2022, and 2023). Adjust Expect

			Unadjust	ted score	:S		Case n	nix adjuste	d scores	
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	23	70%	23	83%			85%	57%	92%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	22	64%	21	76%			78%	50%	90%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	16	88%	23	74%			78%	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	21	57%	26	54%			60%	41%	79%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	18	56%	23	52%			55%	34%	75%	55%

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	23	52%	24	63%			64%	42%	81%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	18	50%	14	43%			43%	26%	78%	52%

			Unadjus	ted score	s		Case n	nix adjuste	d scores	
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	14	29%	18	44%			48%	23%	69%	46%
Q52. Patient has had a review of cancer care by GP practice	20	10%	26	35%			31%	7%	39%	23%

			Unadjust	ted score	s		Case n	nix adjuste	d scores	
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	**	**	12	33%			25%	6%	59%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	13	85%	17	71%			72%	60%	99%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	20	60%	26	62%			60%	45%	82%	64%

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q56. The whole care team worked well together	23	83%	26	77%			81%	78%	100%	90%
Q57. Administration of care was very good or good	22	77%	26	85%			87%	74%	100%	87%
Q58. Cancer research opportunities were discussed with patient	15	47%	21	52%			52%	22%	68%	45%
Q59. Patient's average rating of care scored from very poor to very good	22	8.6	27	8.9			9.1	8.3	9.5	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	*	*	*	*	71%	*	*	*	*	74%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	63%	*	*	*	*	60%

DIAGNOSTIC TESTS							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*	*	*	*	*	82%	*	*	*	*	81%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	77%	*	*	*	*	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	82%	*	*	*	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	68%	*	*	*	*	71%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	95%	*	*	*	*	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*	*	*	*	*	71%	*	*	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	63%	*	*	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	67%	*	*	*	*	57%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	79%	*	*	*	*	73%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	81%	*	*	*	*	75%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	*	*	96%	*	*	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	86%	*	*	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	95%	*	*	*	*	96%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	90%	*	*	*	*	88%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	83%	*	*	*	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	100%	*	*	*	*	93%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	64%	*	*	*	*	60%

CARE PLANNING							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*	*	*	*	*	78%	*	*	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	93%	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	100%	*	*	*	*	100%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	*	*	90%	*	*	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	71%	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	65%	*	*	*	*	68%

HOSPITAL CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*	*	*	*	*	75%	*	*	*	*	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	*	*	*	*	*	*	*	*	84%	*	*	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	70%	*	*	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	70%	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	74%	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	70%	*	*	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	74%	*	*	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	82%	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	79%	*	*	*	*	79%

YOUR TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	*	*	90%	*	*	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	100%
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	*	*	*	*	*	*	*	*	85%	*	*	*	*	85%
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	*	*	*	*	*	*	*	*	*	*	*	*	*	91%
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%	*	*	*	*	68%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	*	*	79%	*	*	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	78%	*	*	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	74%	*	*	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*	*	55%	*	*	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	47%	*	*	*	*	48%

SUPPORT WHILE AT HOME							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	*	*	61%	*	*	*	*	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	33%	*	*	*	*	40%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	*	*	38%	*	*	*	*	43%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	29%	*	*	*	*	34%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	36%	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	75%	*	*	*	*	70%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	61%	*	*	*	*	61%

YOUR OVERALL NHS CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q56. The whole care team worked well together	*	*	*	*	*	*	*	*	77%	*	*	*	*	79%
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	78%	*	*	*	*	79%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	56%	*	*	*	*	57%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	9.0	*	*	*	*	8.9

# Age group tables

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	*	*	*	*	74%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	60%

DIAGNOSTIC TESTS									
	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	*	*	*	*	*	*	*	*	81%
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	*	*	*	*	*	*	*	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	71%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	96%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*	*	*	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	57%
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	*	*	*	*	*	*	*	*	75%

SUPPORT FROM A MAIN CONTACT PERSO	N								
	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	*	*	*	*	*	*	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	96%

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	*	*	*	*	*	*	*	*	88%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	93%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	60%

# Age group tables

CARE PLANNING					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*	*	*	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	100%

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	*	*	*	*	*	*	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	68%

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	*	*	*	*	*	*	*	*	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	*	*	*	*	*	*	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	79%

# Age group tables

YOUR TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	100%
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	*	*	*	*	*	*	*	*	85%
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	*	*	*	*	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	*	*	68%

<b>IMMEDIATE AND LONG TERM SIDE EFFEC</b>	TS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	48%

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	*	*	*	*	*	*	*	*	40%

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	*	*	*	*	*	*	*	*	43%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	34%

# Age group tables

LIVING WITH AND BEYOND CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	70%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	61%

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	*	*	*	*	*	*	*	*	79%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	57%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	8.9

SUPPORT FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	60%	*	*	*	*	*	74%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	60%	*	*	*	*	60%

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	80%	83%	*	*	*	*	81%			
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	69%	92%	*	*	*	*	79%			
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	83%	*	*	*	*	79%			
Q8. Diagnostic test results were explained in a way the patient could completely understand	81%	58%	*	*	*	*	71%			
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	100%	92%	*	*	*	*	96%			

FINDING OUT THAT YOU HAD CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	69%	64%	*	*	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	61%	50%	*	*	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	61%	50%	*	*	*	*	57%
Q15. Patient was definitely told about their diagnosis in an appropriate place	72%	75%	*	*	*	*	73%
Q16. Patient was told they could go back later for more information about their diagnosis	67%	*	*	*	*	*	75%

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q17. Patient had a main point of contact within the care team	94%	100%	*	*	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	87%	75%	*	*	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	100%	92%	*	*	*	*	96%

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	81%	100%	*	*	*	*	88%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	72%	83%	*	*	*	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	94%	91%	*	*	*	*	93%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	60%

CARE PLANNING		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	61%	82%	*	*	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	80%	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	100%

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	88%	90%	*	*	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	72%	75%	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	54%	*	*	*	*	*	68%

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	67%	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	87%	80%	*	*	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	61%	82%	*	*	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	61%	91%	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	73%	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	61%	91%	*	*	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	72%	82%	*	*	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	82%	91%	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	69%	91%	*	*	*	*	79%

YOUR TREATMENT			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	82%	100%	*	*	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	100%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable nformation about their response to surgery	81%	90%	*	*	*	*	85%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	91%
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	61%	80%	*	*	*	*	68%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	80%	80%	*	*	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	80%	*	*	*	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	60%	90%	*	*	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	50%	58%	*	*	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	46%	50%	*	*	*	*	48%

SUPPORT WHILE AT HOME			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	44%	82%	*	*	*	*	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	40%

CARE FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	38%	*	*	*	*	*	43%
Q52. Patient has had a review of cancer care by GP practice	44%	18%	*	*	*	*	34%

LIVING WITH AND BEYOND CANCER			Male/Fema				
	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	*	*	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	67%	*	*	*	*	*	70%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	44%	83%	*	*	*	*	61%

# Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q56. The whole care team worked well together	71%	91%	*	*	*	*	79%	
Q57. Administration of care was very good or good	78%	82%	*	*	*	*	79%	
Q58. Cancer research opportunities were discussed with patient	54%	60%	*	*	*	*	57%	
Q59. Patient's average rating of care scored from very poor to very good	8.7	9.3	*	*	*	*	8.9	

# **Ethnicity tables**

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	*	*	*	*	*	*	74%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	60%

DIAGNOSTIC TESTS	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*	*	*	81%		
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	*	*	*	*	*	*	79%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	71%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	96%		

FINDING OUT THAT YOU HAD CANCER				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	57%
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	*	*	*	*	*	*	75%

SUPPORT FROM A MAIN CONTACT PERSO	N			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	96%

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%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	77%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	93%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	60%	

# **Ethnicity tables**

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	*	*	*	*	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	100%

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	68%

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	*	*	*	*	*	*	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	*	*	*	*	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	79%

# **Ethnicity tables**

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	100%
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	*	*	*	*	*	*	85%
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	*	*	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	68%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	48%

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	*	*	*	*	*	*	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	40%

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	*	*	*	*	*	*	43%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	34%

# **Ethnicity tables**

LIVING WITH AND BEYOND CANCER				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	31%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	70%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	61%	

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	*	*	*	*	*	*	79%
Q57. Administration of care was very good or good	*	*	*	*	*	*	79%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	57%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	8.9

# **IMD** quintile tables

SUPPORT FROM YOUR GP PRACTICE			IM	1D 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	*	*	*	*	*	*	74%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	60%

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	*	*	*	*	*	*	81%
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	*	*	*	*	*	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	71%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	96%

FINDING OUT THAT YOU HAD CANCER			IN	1D 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	*	*	*	*	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	57%
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	*	*	*	*	*	*	75%

<b>SUPPORT FROM A MAIN CONTACT PERSO</b>	N	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	96%

## **IMD** quintile tables

DECIDING ON THE BEST TREATMENT			IM	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*	*	*	88%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	93%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	60%

CARE PLANNING	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	100%

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	*	*	*	*	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	68%

HOSPITAL CARE			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*	*	*	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	*	*	*	*	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	86%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	79%

## **IMD** quintile tables

YOUR TREATMENT			IIV	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	100%
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	*	*	*	*	*	*	85%
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	*	*	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	68%

<b>IMMEDIATE AND LONG TERM SIDE EFFEC</b>	TS		IIV	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	48%

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	*	*	*	*	*	*	40%	

CARE FROM YOUR GP PRACTICE			IN	1D 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	*	*	*	*	*	*	43%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	34%

## **IMD** quintile tables

LIVING WITH AND BEYOND CANCER		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	70%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	61%

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	*	*	*	*	*	*	79%
Q57. Administration of care was very good or good	*	*	*	*	*	*	79%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	57%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	8.9

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	*	*	*	74%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	55%	*	*	60%			

DIAGNOSTIC TESTS		Long-term cor	ndition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	*	*	81%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	87%	*	*	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	*	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	87%	*	*	71%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	100%	*	*	96%

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	73%	*	*	67%
Q13. Patient was definitely told sensitively that they had cancer	53%	*	*	57%
Q14. Cancer diagnosis explained in a way the patient could completely understand	60%	*	*	57%
Q15. Patient was definitely told about their diagnosis in an appropriate place	73%	*	*	73%
Q16. Patient was told they could go back later for more information about their diagnosis	75%	*	*	75%

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	100%	*	*	97%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	*	81%
Q19. Patient found advice from main contact person was very or quite helpful	93%	*	*	96%

DECIDING ON THE BEST TREATMENT		Long-term con	dition status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	85%	*	*	88%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	*	*	77%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	93%	*	*	93%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	60%

CARE PLANNING	Long-term condition status			
	Yes	No	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	67%	*	*	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	89%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	86%	*	*	88%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	80%	*	*	68%

HOSPITAL CARE		Long-term co	ndition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	80%	*	*	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	83%	*	*	84%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	60%	*	*	69%
Q34. Patient was always able to get help from ward staff when needed	67%	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	47%	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	67%	*	*	72%
Q37. Patient was always treated with respect and dignity while in hospital	87%	*	*	76%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	71%	*	*	86%
Q39. Patient was always able to discuss worries and lears with hospital staff while being treated as an outpatient or day case	82%	*	*	79%

YOUR TREATMENT		Long-term co	ondition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	*	*	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	100%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*
Q42_1. Patient completely had enough understandable nformation about their response to surgery	80%	*	*	85%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	*	*	*	*
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	*	*	*	91%
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	71%	*	*	68%

<b>IMMEDIATE AND LONG TERM SIDE EFFECTS</b>		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	85%	*	*	80%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	75%	*	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	71%	*	*	72%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	*	*	54%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	*	*	48%

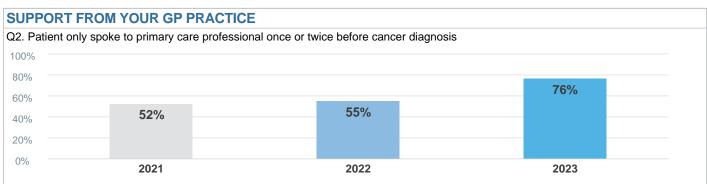
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	46%	*	*	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	40%

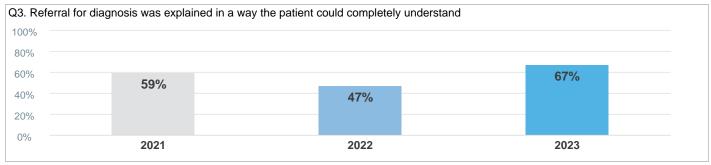
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	33%	*	*	43%	
Q52. Patient has had a review of cancer care by GP practice	40%	*	*	34%	

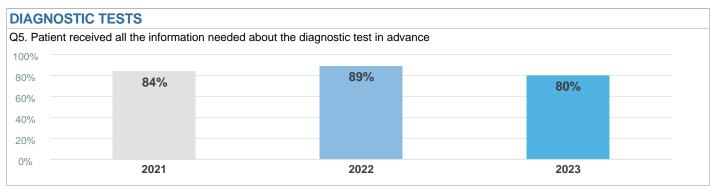
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	70%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	57%	*	*	61%

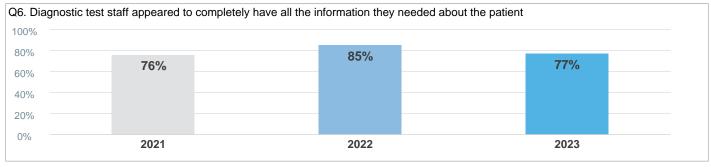
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	80%	*	*	79%
Q57. Administration of care was very good or good	87%	*	*	79%
Q58. Cancer research opportunities were discussed with patient	60%	*	*	57%
Q59. Patient's average rating of care scored from very poor to very good	9.1	*	*	8.9

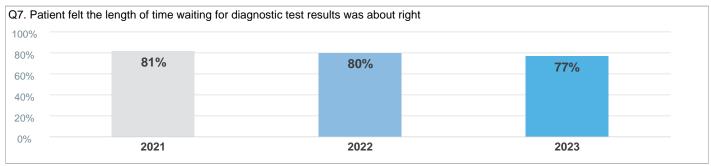




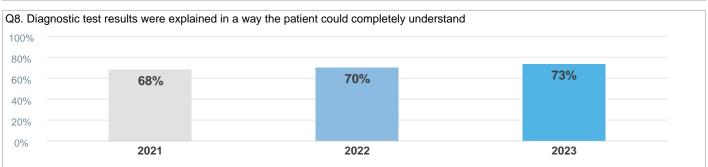


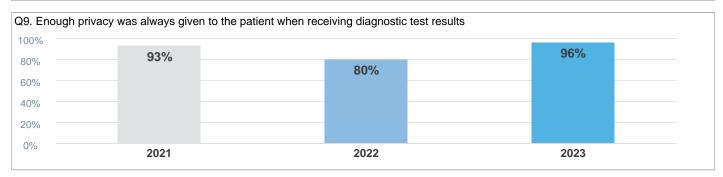


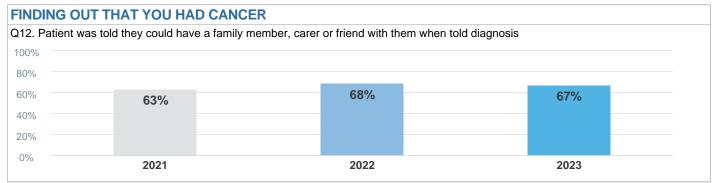


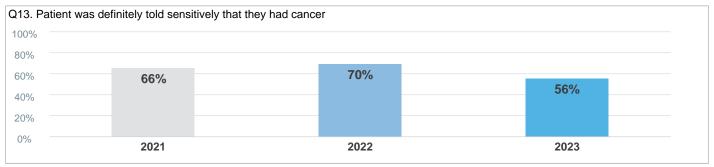


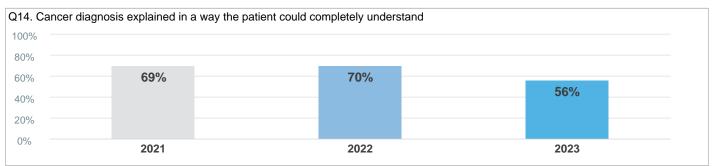


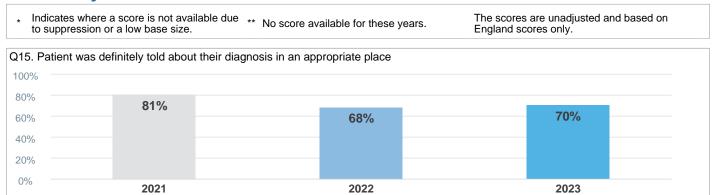


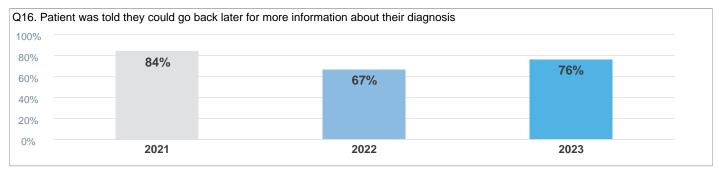


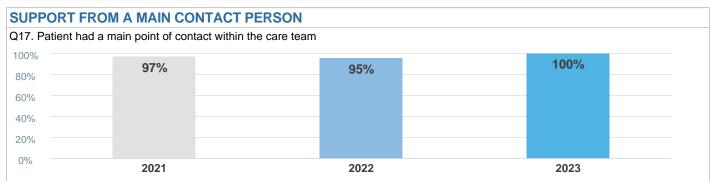


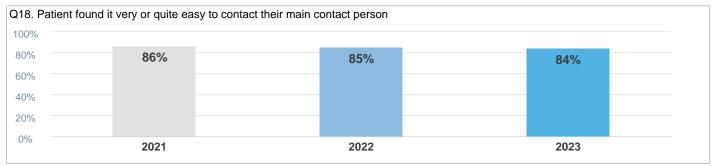


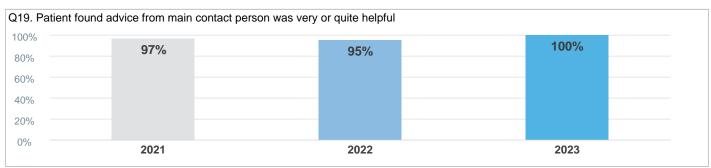




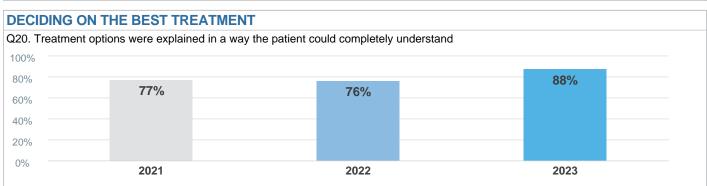


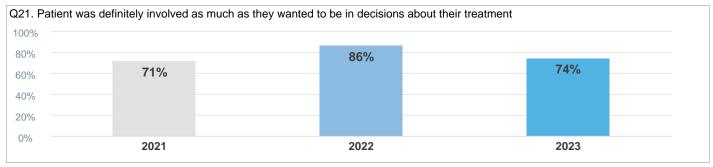


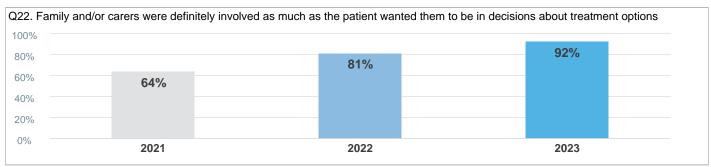


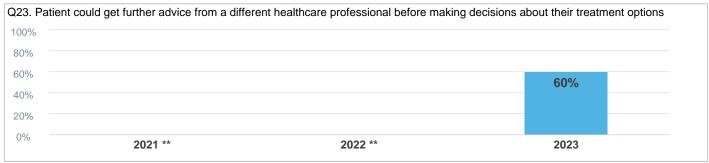


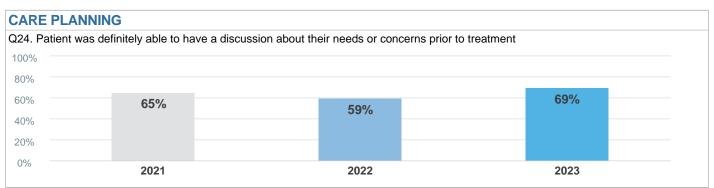




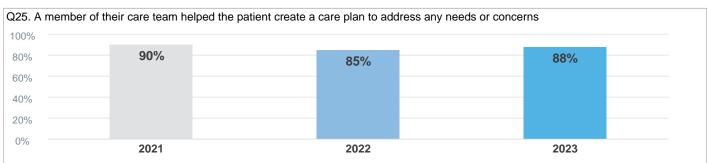




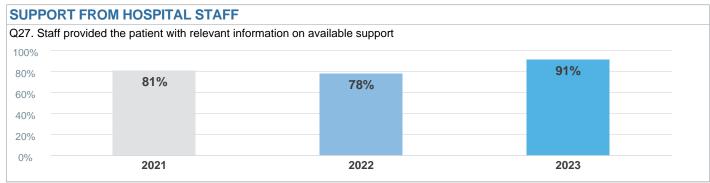


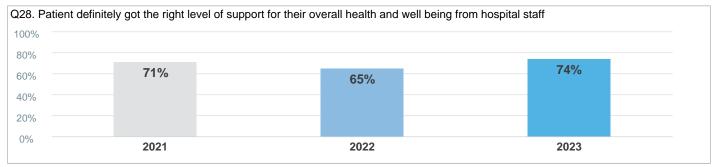


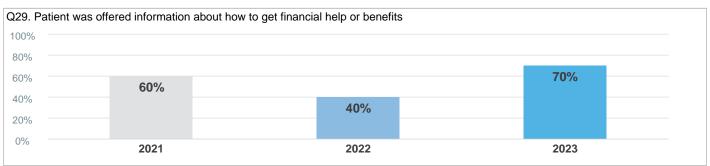




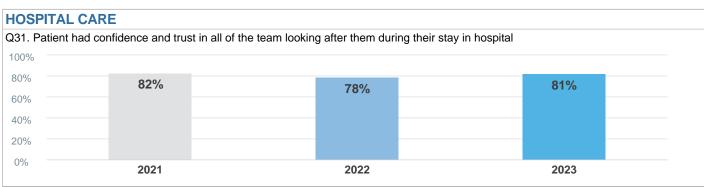


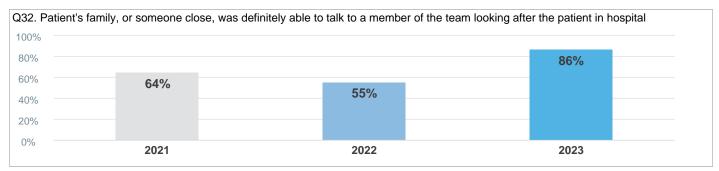


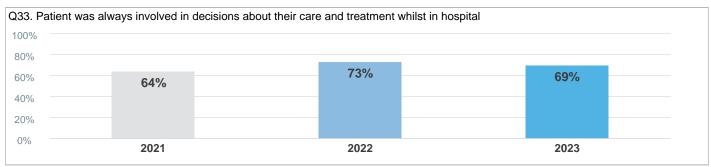


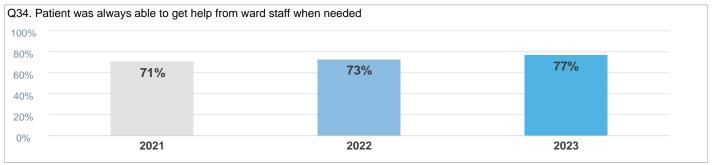


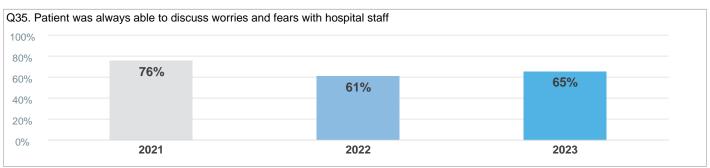




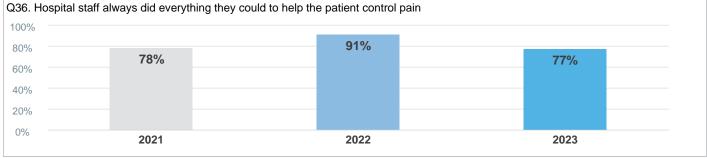


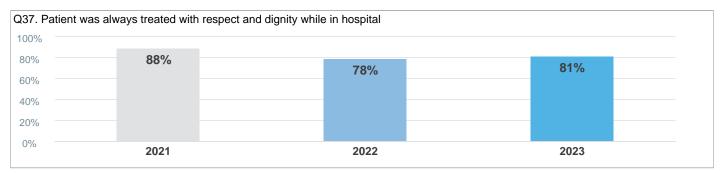


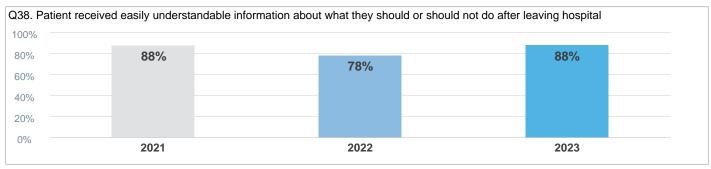


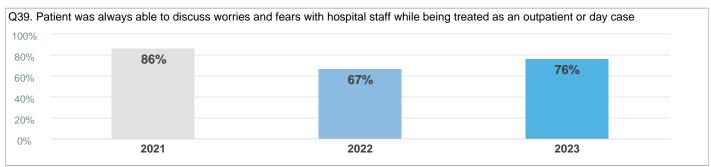


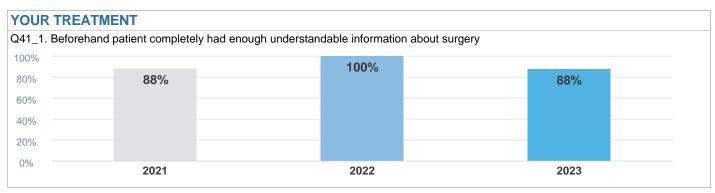


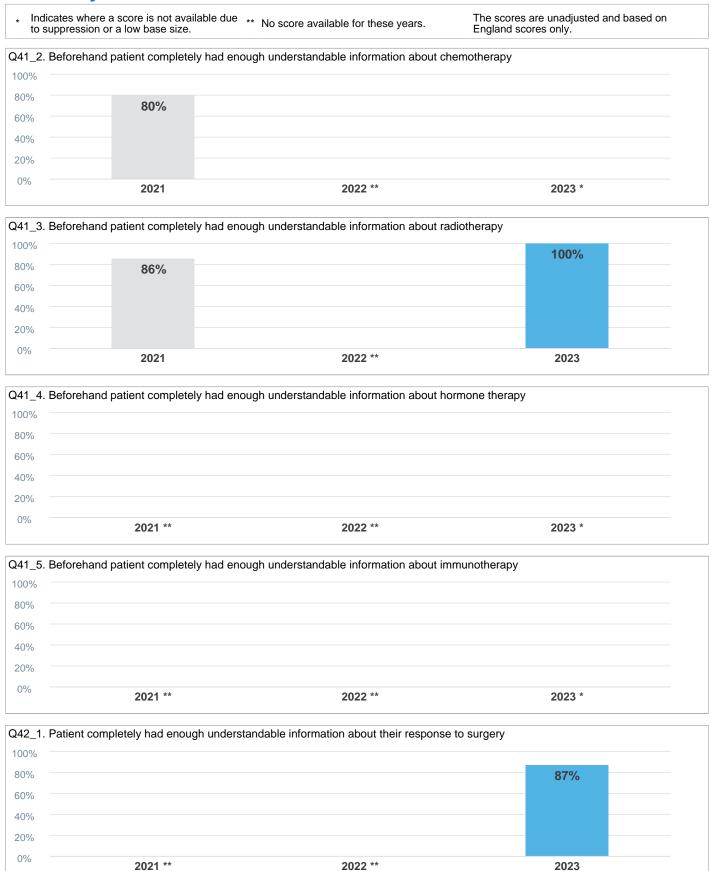






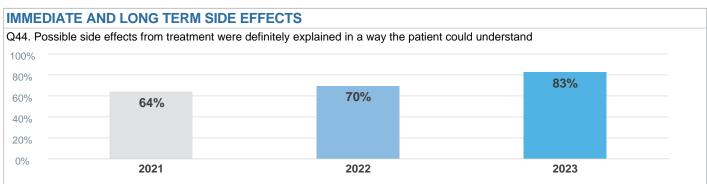


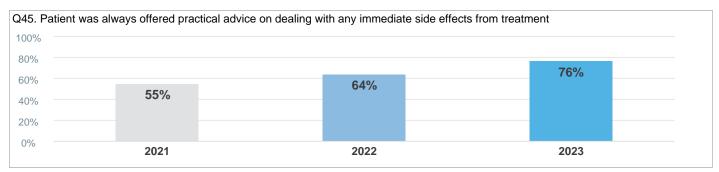


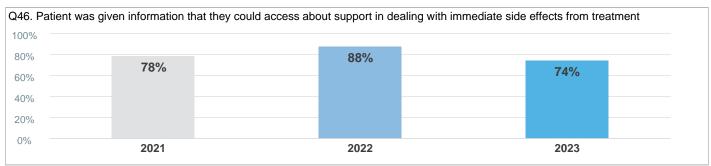


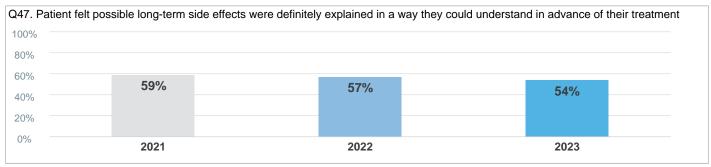


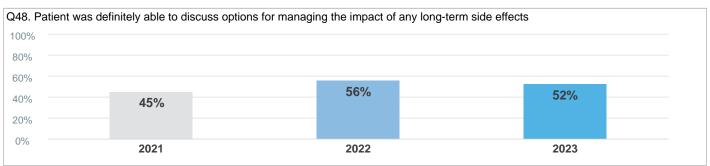


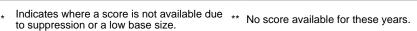












The scores are unadjusted and based on England scores only.

