

Cancer Patient Experience Survey

2023 Results

West Suffolk NHS Foundation Trust

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Cancer Patient Experience Survey 2023 West Suffolk NHS Foundation Trust

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Executive summary

Questions above expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	National score
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	90%	79%	88%	83%
Q14. Cancer diagnosis explained in a way the patient could completely understand	81%	72%	81%	77%
Q18. Patient found it very or quite easy to contact their main contact person	92%	79%	90%	84%
Q35. Patient was always able to discuss worries and fears with hospital staff	76%	55%	74%	65%
Q37. Patient was always treated with respect and dignity while in hospital	95%	81%	94%	87%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	89%	69%	89%	79%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	68%	54%	67%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	72%	42%	63%	52%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	57%	39%	54%	46%
Q57. Administration of care was very good or good	92%	83%	91%	87%

West Suffolk NHS Foundation Trust has no scores 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

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

314 patients responded out of a total of 516 patients, resulting in a response rate of 61%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	543	516	314	61%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	260
Online	54
Phone	0
Translation service	0
Total	314

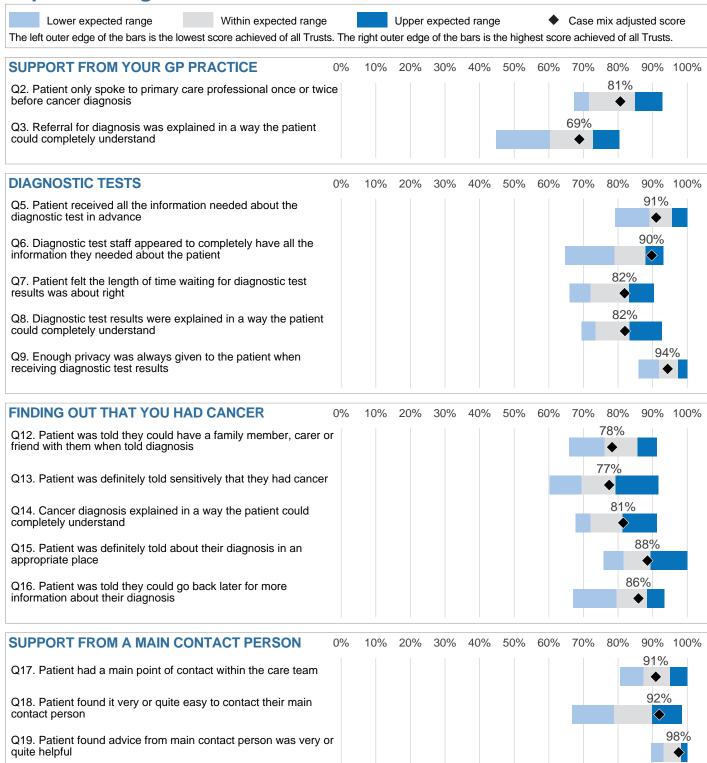
Respondents by tumour group

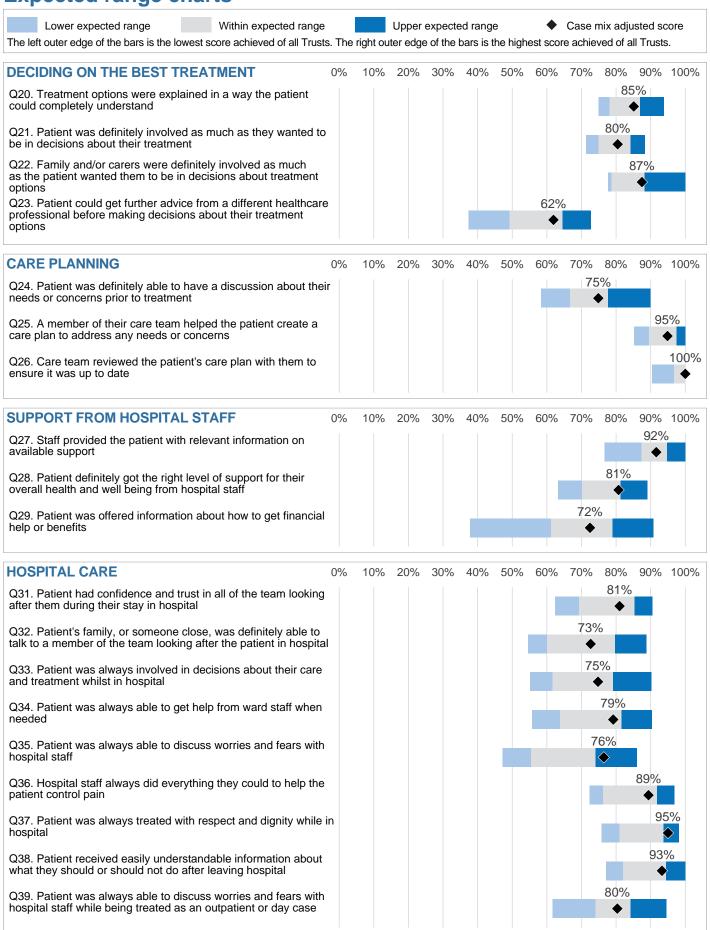
	Number of respondents
Brain / CNS	0
Breast	62
Colorectal / LGT	35
Gynaecological	8
Haematological	37
Head and neck	*
Lung	*
Prostate	57
Sarcoma	0
Skin	22
Upper gastro	9
Urological	39
Other	37
Total	314

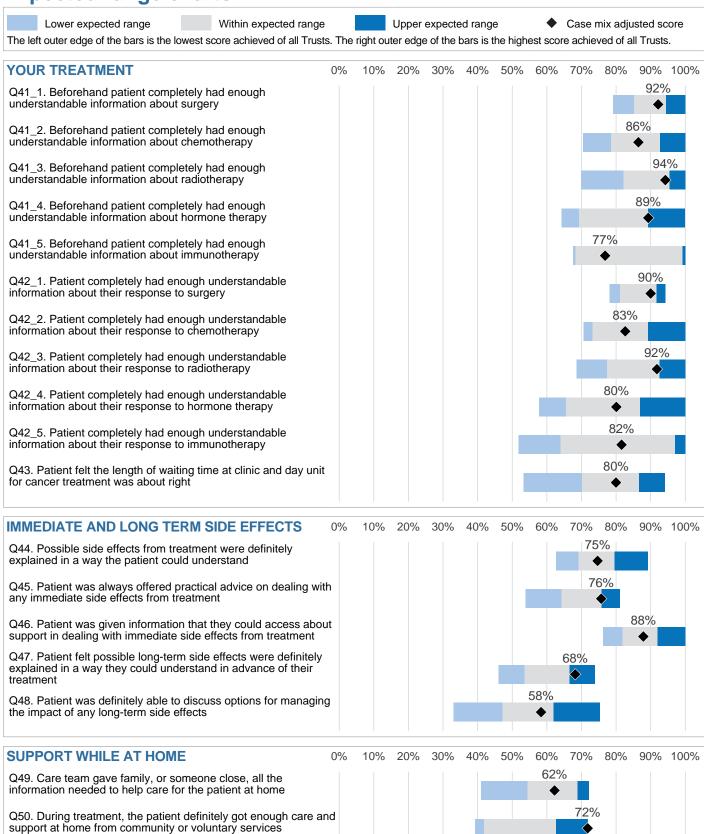
Respondents by ethnicity

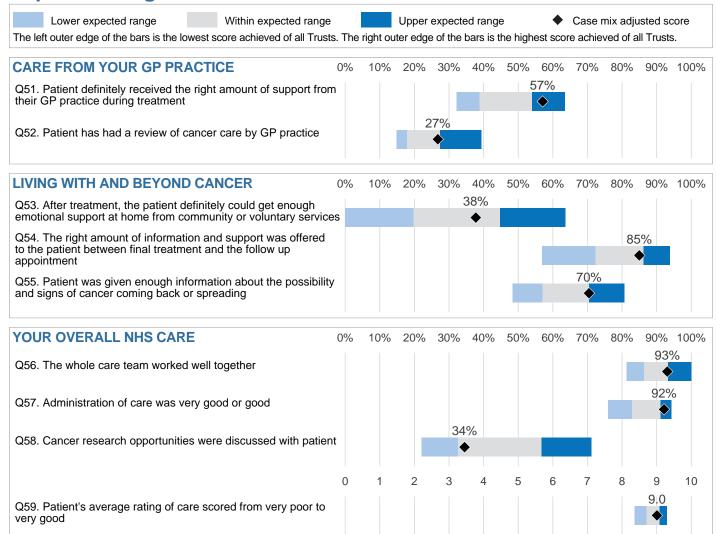
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	286
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	6
Mixed / Multiple Ethnic Groups	l
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	I
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	*
Any other ethnic group	*
Not given	
Not given	*
Total	314

^{*} indicates the count is not shown due to suppression









Comparability tables

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

▲ or ▼

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

Adjusted Score below Lower Expected Range

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

**	No	score	available	for	2022.
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			Unadjust	ted score	Case n					
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	136	83%	148	82%			81%	72%	85%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	185	65%	220	70%			69%	60%	73%	67%

		Unadjusted scores						Case mix adjusted scores			
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score	
Q5. Patient received all the information needed about the diagnostic test in advance	217	90%	254	91%			91%	89%	96%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	227	85%	266	91%			90%	79%	88%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	226	82%	267	82%			82%	72%	83%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	228	81%	269	83%			82%	74%	83%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	224	95%	271	95%			94%	92%	97%	95%	

FINDING OUT THAT YOU HAD CANCER			Unadjus	djusted scores				Case mix adjusted scores			
		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	243	77%	287	77%			78%	76%	86%	81%	
Q13. Patient was definitely told sensitively that they had cancer	268	72%	309	78%			77%	69%	79%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	268	74%	312	82%			81%	72%	81%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	267	82%	307	89%			88%	82%	89%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	238	77%	270	86%			86%	80%	88%	84%	

			Unadjust	ed score	Case n					
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q17. Patient had a main point of contact within the care team	259	90%	289	90%			91%	87%	95%	91%
Q18. Patient found it very or quite easy to contact their main contact person	214	87%	233	92%			92%	79%	90%	84%
Q19. Patient found advice from main contact person was very or quite helpful	220	96%	247	98%			98%	93%	98%	96%

Cancer Patient Experience Survey 2023 West Suffolk NHS Foundation Trust

Comparability tables

Adjusted Score below Lower

Indicates where a score is not available due to suppression or a low base size. No score available for 2022.	▲ or	•	significantly hig Change overall	her or lo	ower than 2022 score. es significant change overall		Expected Range Adjusted Score between Up and Lower Expected Range Adjusted Score above Uppe Expected Range	ės
					Unadjusted scores		Case mix adjusted scores	
	available due to suppression or a low base size.	available due to suppression or a low base size.	available due to suppression or a low base size. ▲ or ▼	available due to suppression or a low base size. A or Charge 2022 2 significantly high charge overall charge overall charge 2022 2 significantly high charge overall charge 2022 2 significantly high charge 2 significant	available due to suppression or a low base size. A or Change overall: Indicated to the control of the cont	available due to suppression or a low base size. No score available for 2022. A or V Significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	available due to suppression or a low base size. No score available for 2022. A or V Change overall: Indicates significant change overall (2021, 2022, and 2023).	available due to suppression or a low base size. No score available for 2022. Adjusted Score between Upon and Lower Expected Range (2021, 2022, and 2023). Adjusted Score above Upon Expected Range

			Unadjust	ed score	S		Case n	d scores		
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q20. Treatment options were explained in a way the patient could completely understand	239	79%	286	85%			85%	78%	87%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	262	76%	300	81%			80%	75%	84%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	207	79%	240	88%		A	87%	79%	88%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	161	61%			62%	49%	65%	57%

			Unadjust	ted score	es		Case n	d scores		
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score		expected	National score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	221	68%	254	74%			75%	67%	78%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	115	95%	151	95%			95%	90%	97%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	89	100%	120	100%			100%	97%	100%	99%

			Unadjust	ted score	s		Case n	d scores		
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q27. Staff provided the patient with relevant information on available support	178	89%	244	91%			92%	87%	95%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	262	72%	301	81%	•		81%	70%	81%	76%
Q29. Patient was offered information about how to get financial help or benefits	116	63%	135	70%			72%	61%	79%	70%

Comparability tables

* Indicates where a score is not

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

	available due to suppression or a low base size.
**	No score available for 2022.

			Unadjus	ted score	S		Case n	d 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	88	70%	105	81%			81%	69%	85%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62	69%	87	72%			73%	60%	80%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	87	61%	106	75%			75%	62%	79%	70%
Q34. Patient was always able to get help from ward staff when needed	84	75%	104	79%			79%	64%	82%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	85	59%	101	75%			76%	55%	74%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	73	81%	85	89%			89%	76%	92%	84%
Q37. Patient was always treated with respect and dignity while in hospital	88	83%	103	95%			95%	81%	94%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87	82%	105	93%			93%	82%	94%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	233	76%	257	81%			80%	74%	84%	79%

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q41_1. Beforehand patient completely had enough understandable information about surgery	150	88%	165	92%			92%	85%	94%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	95	76%	94	86%			86%	79%	93%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	51	84%	88	94%			94%	82%	95%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	42	71%	63	90%		A	89%	69%	89%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	23	78%	22	77%			77%	68%	99%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	162	90%			90%	81%	92%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	90	82%			83%	73%	89%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	86	92%			92%	77%	93%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	61	82%			80%	66%	87%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	22	82%			82%	64%	97%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	260	79%	295	81%			80%	70%	87%	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.
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			Unadjus	ted score	es		Case n	d scores		
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	240	68%	270	74%			75%	69%	80%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	222	65%	248	75%	A		76%	64%	76%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	170	84%	192	88%			88%	82%	92%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	213	59%	239	68%		A	68%	54%	67%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	171	56%	202	58%			58%	47%	62%	55%

			Unadjus	ted score		Case n				
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	156	60%	172	62%			62%	54%	69%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	70	57%	88	72%			72%	42%	63%	52%

			Unadjust	ted score		Case n				
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	National score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	120	48%	166	58%			57%	39%	54%	46%
Q52. Patient has had a review of cancer care by GP practice	256	18%	292	26%		A	27%	18%	27%	23%

			Unadjust	ed score	s		Case n	nix adjuste	d scores	Ī
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	44	34%	54	37%			38%	20%	45%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	122	83%	153	86%			85%	72%	86%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	207	67%	222	72%			70%	57%	70%	64%

			Unadjus	ted score	es		Case n	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	254	94%	292	93%			93%	86%	93%	90%
Q57. Administration of care was very good or good	258	89%	304	92%			92%	83%	91%	87%
Q58. Cancer research opportunities were discussed with patient	131	28%	156	33%			34%	33%	57%	45%
Q59. Patient's average rating of care scored from very poor to very good	257	9.0	299	9.0			9.0	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	100%	86%	*	41%	*	*	86%	*	94%	*	86%	82%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	89%	48%	*	33%	*	*	82%	*	86%	*	79%	67%	70%

DIAGNOSTIC TESTS							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	88%	94%	*	85%	*	*	95%	*	100%	*	97%	92%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	89%	88%	*	88%	*	*	95%	*	95%	*	94%	93%	91%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	87%	88%	*	88%	*	*	80%	*	81%	*	86%	81%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	83%	88%	*	74%	*	*	84%	*	90%	*	89%	78%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	98%	94%	*	93%	*	*	100%	*	95%	*	92%	96%	95%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	90%	91%	*	78%	*	*	83%	*	52%	*	56%	67%	77%
Q13. Patient was definitely told sensitively that they had cancer	*	87%	86%	*	70%	*	*	77%	*	82%	*	81%	65%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	87%	94%	*	68%	*	*	82%	*	91%	*	87%	69%	82%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	100%	97%	*	81%	*	*	93%	*	90%	*	87%	83%	89%
Q16. Patient was told they could go back later for more information about their diagnosis	*	92%	87%	*	80%	*	*	95%	*	72%	*	78%	83%	86%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	95%	100%	*	100%	*	*	88%	*	86%	*	83%	76%	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	89%	100%	*	97%	*	*	90%	*	100%	*	88%	88%	92%
Q19. Patient found advice from main contact person was very or quite helpful	*	98%	100%	*	100%	*	*	100%	*	100%	*	96%	96%	98%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	87%	90%	*	80%	*	*	83%	*	100%	*	91%	75%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	82%	88%	*	76%	*	*	81%	*	95%	*	81%	79%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	91%	96%	*	80%	*	*	90%	*	92%	*	81%	86%	88%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	70%	79%	*	50%	*	*	71%	*	42%	*	55%	42%	61%

CARE PLANNING							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	76%	87%	*	68%	*	*	84%	*	80%	*	72%	62%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	91%	100%	*	94%	*	*	96%	*	*	*	93%	95%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	*	100%	*	*	100%	*	*	*	100%	100%	100%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	98%	93%	*	91%	*	*	93%	*	100%	*	80%	88%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	92%	94%	*	76%	*	*	78%	*	73%	*	82%	77%	81%
Q29. Patient was offered information about how to get financial help or benefits	*	84%	89%	*	74%	*	*	46%	*	*	*	50%	59%	70%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	77%	79%	*	94%	*	*	*	*	*	*	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	*	65%	74%	*	83%	*	*	*	*	*	*	73%	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	81%	72%	*	88%	*	*	*	*	*	*	71%	*	75%
Q34. Patient was always able to get help from ward staff when needed	*	86%	80%	*	94%	*	*	*	*	*	*	75%	*	79%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	81%	71%	*	100%	*	*	*	*	*	*	75%	*	75%
Q36. Hospital staff always did everything they could to help the patient control pain	*	88%	86%	*	100%	*	*	*	*	*	*	82%	*	89%
Q37. Patient was always treated with respect and dignity while in hospital	*	90%	96%	*	100%	*	*	*	*	*	*	95%	*	95%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	86%	100%	*	100%	*	*	*	*	*	*	86%	*	93%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	85%	86%	*	76%	*	*	86%	*	95%	*	80%	67%	81%

YOUR TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	93%	93%	*	*	*	*	*	*	100%	*	87%	100%	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	82%	93%	*	88%	*	*	*	*	*	*	88%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	97%	*	*	*	*	*	96%	*	*	*	*	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	95%	*	*	*	*	*	94%	*	*	*	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	93%	96%	*	*	*	*	*	*	100%	*	83%	85%	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	65%	92%	*	85%	*	*	*	*	*	*	87%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	90%	*	*	*	*	*	92%	*	*	*	*	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	85%	*	*	*	*	*	88%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	83%	88%	*	67%	*	*	90%	*	100%	*	84%	67%	81%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	86%	87%	*	61%	*	*	60%	*	67%	*	77%	68%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	82%	78%	*	68%	*	*	67%	*	82%	*	80%	79%	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	96%	96%	*	74%	*	*	90%	*	*	*	72%	83%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	81%	68%	*	50%	*	*	68%	*	80%	*	64%	67%	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	64%	68%	*	38%	*	*	60%	*	*	*	47%	63%	58%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	67%	81%	*	54%	*	*	50%	*	*	*	59%	56%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	71%	77%	*	50%	*	*	70%	*	*	*	*	82%	72%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	70%	50%	*	50%	*	*	65%	*	55%	*	53%	50%	58%
Q52. Patient has had a review of cancer care by GP practice	*	33%	34%	*	22%	*	*	14%	*	18%	*	24%	39%	26%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	46%	*	*	*	*	*	*	*	*	*	*	*	37%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	90%	94%	*	80%	*	*	80%	*	88%	*	91%	80%	86%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	78%	61%	*	60%	*	*	70%	*	94%	*	72%	78%	72%

YOUR OVERALL NHS CARE							Tumo	our gro	up					
	Brain / CNS Breast Colorectal / LGT Cynaecological Haematological Head and neck Lung Prostate Sarcoma Skin Upper gastro Urological Otther												All	
Q56. The whole care team worked well together	*	95%	91%	*	97%	*	*	90%	*	100%	*	89%	91%	93%
Q57. Administration of care was very good or good	*	93%	94%	*	97%	*	*	83%	*	100%	*	89%	92%	92%
Q58. Cancer research opportunities were discussed with patient	*	37%	58%	*	43%	*	*	26%	*	17%	*	47%	24%	33%
Q59. Patient's average rating of care scored from very poor to very good	*	9.2	9.2	*	9.2	*	*	8.8	*	9.1	*	8.9	8.9	9.0

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	88%	86%	78%	83%	92%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	74%	69%	64%	74%	80%	70%

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	*	*	*	85%	97%	92%	90%	100%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	86%	88%	93%	89%	100%	91%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	76%	75%	84%	83%	94%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	76%	85%	91%	77%	81%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	86%	97%	97%	95%	94%	95%

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	*	*	*	65%	74%	77%	83%	58%	77%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	70%	80%	78%	78%	76%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	74%	80%	87%	82%	83%	82%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	83%	88%	91%	90%	87%	89%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	91%	83%	88%	84%	80%	86%

SUPPORT FROM A MAIN CONTACT PERSO	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	*	86%	95%	91%	90%	81%	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	89%	91%	95%	91%	93%	92%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	100%	97%	99%	96%	100%	98%

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	*	*	*	74%	95%	91%	80%	78%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	74%	83%	83%	81%	68%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	71%	88%	86%	93%	73%	88%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	78%	60%	60%	56%	62%	61%

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	*	*	*	48%	76%	78%	78%	67%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	88%	90%	98%	96%	91%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	100%	100%	100%	100%	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	*	*	*	95%	97%	92%	91%	76%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	74%	83%	83%	82%	76%	81%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	84%	86%	65%	67%	*	70%

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	*	*	*	46%	88%	92%	85%	73%	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	*	*	*	25%	69%	76%	88%	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	46%	65%	81%	83%	70%	75%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	54%	82%	84%	86%	*	79%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	50%	82%	80%	85%	50%	75%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	67%	94%	91%	100%	*	89%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	85%	100%	96%	97%	100%	95%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	85%	94%	100%	97%	90%	93%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	71%	78%	86%	78%	78%	81%

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	*	*	*	80%	96%	94%	93%	91%	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	69%	95%	90%	85%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	97%	91%	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	96%	85%	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	85%	92%	94%	87%	91%	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	62%	95%	83%	83%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	94%	88%	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	84%	80%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	83%	71%	78%	85%	85%	81%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	68%	79%	76%	69%	83%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	70%	82%	75%	72%	75%	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	76%	94%	88%	87%	82%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	60%	77%	67%	66%	59%	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	42%	53%	59%	64%	46%	58%

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	*	*	*	33%	65%	66%	60%	75%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	55%	85%	70%	*	72%

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	*	*	*	33%	73%	54%	61%	*	58%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	27%	27%	18%	31%	24%	26%

LIVING WITH AND BEYOND CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	30%	53%	43%	*	37%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	83%	85%	88%	85%	82%	86%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	61%	71%	72%	76%	59%	72%

YOUR OVERALL NHS CARE									
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	*	87%	98%	94%	93%	90%	93%
Q57. Administration of care was very good or good	*	*	*	83%	100%	93%	92%	82%	92%
Q58. Cancer research opportunities were discussed with patient	*	*	*	29%	26%	42%	24%	*	33%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.8	9.3	9.2	8.9	9.1	9.0

SUPPORT FROM YOUR GP PRACTICE	ROM YOUR GP PRACTICE					Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	76%	89%	*	*	*	*	82%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	71%	70%	*	*	*	73%	70%				

DIAGNOSTIC TESTS			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	88%	94%	*	*	*	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	89%	93%	*	*	*	90%	91%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	86%	*	*	*	90%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	85%	82%	*	*	*	80%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	96%	*	*	*	90%	95%

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	77%	78%	*	*	*	67%	77%	
Q13. Patient was definitely told sensitively that they had cancer	80%	77%	*	*	*	65%	78%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	81%	83%	*	*	*	82%	82%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	93%	*	*	*	82%	89%	
Q16. Patient was told they could go back later for more information about their diagnosis	86%	86%	*	*	*	80%	86%	

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	93%	87%	*	*	*	92%	90%	
Q18. Patient found it very or quite easy to contact their main contact person	91%	94%	*	*	*	82%	92%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	98%	*	*	*	91%	98%	

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	83%	87%	*	*	*	77%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	84%	*	*	*	62%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	86%	88%	*	*	*	91%	88%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	60%	62%	*	*	*	*	61%

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	72%	77%	*	*	*	*	74%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	96%	*	*	*	*	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	*	*	*	*	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	90%	93%	*	*	*	92%	91%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	80%	83%	*	*	*	71%	81%	
Q29. Patient was offered information about how to get financial help or benefits	68%	71%	*	*	*	80%	70%	

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	82%	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	61%	88%	*	*	*	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	73%	78%	*	*	*	*	75%
Q34. Patient was always able to get help from ward staff when needed	79%	82%	*	*	*	*	79%
Q35. Patient was always able to discuss worries and fears with hospital staff	72%	83%	*	*	*	*	75%
Q36. Hospital staff always did everything they could to help the patient control pain	88%	90%	*	*	*	*	89%
Q37. Patient was always treated with respect and dignity while in hospital	95%	97%	*	*	*	*	95%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	95%	*	*	*	*	93%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	84%	*	*	*	85%	81%

YOUR TREATMENT			Male/Fema	ile/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	89%	96%	*	*	*	*	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	78%	95%	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	95%	93%	*	*	*	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	88%	91%	*	*	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	60%	*	*	*	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	89%	91%	*	*	*	*	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	71%	95%	*	*	*	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	92%	*	*	*	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	88%	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	73%	*	*	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	82%	*	*	*	80%	81%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		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	75%	73%	*	*	*	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	74%	75%	*	*	*	77%	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	85%	*	*	*	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	69%	67%	*	*	*	64%	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	60%	*	*	*	50%	58%

SUPPORT WHILE AT HOME	PORT 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	60%	64%	*	*	*	*	62%				
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	70%	72%	*	*	*	*	72%				

CARE FROM YOUR GP PRACTICE	ARE 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	59%	58%	*	*	*	*	58%		
Q52. Patient has had a review of cancer care by GP practice	30%	21%	*	*	*	21%	26%		

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	33%	42%	*	*	*	*	37%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	88%	*	*	*	*	86%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	71%	71%	*	*	*	80%	72%	

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	95%	92%	*	*	*	93%	93%	
Q57. Administration of care was very good or good	94%	91%	*	*	*	93%	92%	
Q58. Cancer research opportunities were discussed with patient	31%	35%	*	*	*	*	33%	
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.1	*	*	*	8.5	9.0	

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	82%	*	*	*	*	*	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	*	*	*	*	*	70%

DIAGNOSTIC TESTS	Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	92%	*	*	*	*	*	91%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	90%	*	*	*	*	*	91%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	82%	*	*	*	*	*	82%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	83%	*	*	*	*	*	83%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	*	*	*	*	*	95%	

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	78%	*	*	*	*	*	77%	
Q13. Patient was definitely told sensitively that they had cancer	78%	*	*	*	*	*	78%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	82%	*	*	*	*	*	82%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	89%	*	*	*	*	*	89%	
Q16. Patient was told they could go back later for more information about their diagnosis	86%	*	*	*	*	*	86%	

SUPPORT FROM A MAIN CONTACT PERSO	N Ethnicity			Ethnicity	y		
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	90%	*	*	*	*	*	90%
Q18. Patient found it very or quite easy to contact their main contact person	92%	*	*	*	*	*	92%
Q19. Patient found advice from main contact person was very or quite helpful	98%	*	*	*	*	*	98%

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	85%	*	*	*	*	*	85%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	*	*	*	*	*	81%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	87%	*	*	*	*	*	88%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	60%	*	*	*	*	*	61%	

CARE PLANNING							
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	*	*	*	*	*	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	*	*	*	*	*	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	91%	*	*	*	*	*	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	81%	*	*	*	*	*	81%
Q29. Patient was offered information about how to get financial help or benefits	68%	*	*	*	*	*	70%

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	82%	*	*	*	*	*	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	72%	*	*	*	*	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	74%	*	*	*	*	*	75%
Q34. Patient was always able to get help from ward staff when needed	80%	*	*	*	*	*	79%
Q35. Patient was always able to discuss worries and fears with hospital staff	76%	*	*	*	*	*	75%
Q36. Hospital staff always did everything they could to help the patient control pain	89%	*	*	*	*	*	89%
Q37. Patient was always treated with respect and dignity while in hospital	96%	*	*	*	*	*	95%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	94%	*	*	*	*	*	93%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	*	*	*	*	*	81%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	92%	*	*	*	*	*	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	94%	*	*	*	*	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	90%	*	*	*	*	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	74%	*	*	*	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	*	*	*	*	*	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	*	*	*	*	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	93%	*	*	*	*	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	83%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	80%	*	*	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	81%	*	*	*	*	*	81%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	*	*	*	*	*	74%
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	87%	*	*	*	*	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	68%	*	*	*	*	*	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	*	*	*	*	*	58%

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	62%	*	*	*	*	*	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	72%	*	*	*	*	*	72%

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	59%	*	*	*	*	*	58%
Q52. Patient has had a review of cancer care by GP practice	26%	*	*	*	*	*	26%

LIVING WITH AND BEYOND CANCER							
	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	35%	*	*	*	*	*	37%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	86%	*	*	*	*	*	86%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	71%	*	*	*	*	*	72%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	93%	*	*	*	*	*	93%
Q57. Administration of care was very good or good	92%	*	*	*	*	*	92%
Q58. Cancer research opportunities were discussed with patient	33%	*	*	*	*	*	33%
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	*	*	*	*	9.0

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile						
	1 (most deprived) 2 3 4 5 (least deprived)					Non- England	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	81%	85%	72%	*	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	65%	70%	79%	*	70%

DIAGNOSTIC TESTS			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	89%	94%	94%	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	89%	93%	87%	*	91%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	83%	79%	85%	*	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	83%	82%	83%	*	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	95%	94%	98%	*	95%

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	*	*	73%	76%	81%	*	77%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	75%	76%	84%	*	78%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	79%	81%	88%	*	82%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	84%	89%	95%	*	89%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	84%	84%	88%	*	86%	

SUPPORT FROM A MAIN CONTACT PERSO	N		IIV	1D 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	*	*	88%	89%	93%	*	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	93%	90%	91%	*	92%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	97%	97%	98%	*	98%

IMD quintile tables

DECIDING ON THE BEST TREATMENT			IIV	ID 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	*	*	85%	82%	92%	*	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	79%	78%	88%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	81%	87%	95%	*	88%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	63%	52%	64%	*	61%

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	*	*	71%	78%	85%	*	74%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	95%	98%	86%	*	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	100%	100%	100%	*	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	*	*	92%	95%	90%	*	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	77%	84%	85%	*	81%
Q29. Patient was offered information about how to get financial help or benefits	*	*	65%	78%	77%	*	70%

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	*	*	81%	78%	78%	*	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	*	*	78%	68%	71%	*	72%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	67%	79%	83%	*	75%		
Q34. Patient was always able to get help from ward staff when needed	*	*	76%	75%	82%	*	79%		
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	68%	75%	81%	*	75%		
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	88%	90%	88%	*	89%		
Q37. Patient was always treated with respect and dignity while in hospital	*	*	93%	92%	100%	*	95%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	93%	96%	96%	*	93%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	80%	82%	90%	*	81%		

IMD quintile tables

YOUR TREATMENT			IN	1D quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	92%	91%	90%	*	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	80%	83%	89%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	93%	97%	95%	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	83%	88%	100%	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	60%	*	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	88%	89%	90%	*	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	77%	83%	81%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	93%	93%	95%	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	77%	88%	75%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	64%	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	80%	80%	85%	*	81%

IMMEDIATE AND LONG TERM SIDE EFFEC	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	*	*	71%	74%	80%	*	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	73%	75%	72%	*	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	84%	88%	95%	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	61%	72%	70%	*	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	51%	63%	69%	*	58%

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	*	*	61%	64%	65%	*	62%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	67%	63%	92%	*	72%	

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	*	*	54%	60%	61%	*	58%
Q52. Patient has had a review of cancer care by GP practice	*	*	24%	24%	33%	*	26%

IMD quintile tables

LIVING WITH AND BEYOND CANCER							
	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	*	*	18%	57%	*	*	37%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	85%	93%	81%	*	86%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	70%	68%	80%	*	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	*	*	93%	93%	94%	*	93%
Q57. Administration of care was very good or good	*	*	91%	92%	96%	*	92%
Q58. Cancer research opportunities were discussed with patient	*	*	29%	36%	38%	*	33%
Q59. Patient's average rating of care scored from very poor to very good	*	*	8.9	9.0	9.4	*	9.0

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status							
	Yes	No	Not given	All				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	83%	83%	*	82%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	71%	70%	71%	70%				

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%	88%	92%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	91%	89%	92%	91%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	84%	78%	85%	82%
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	84%	85%	83%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	93%	92%	95%

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	81%	72%	70%	77%
Q13. Patient was definitely told sensitively that they had cancer	79%	77%	67%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	83%	82%	81%	82%
Q15. Patient was definitely told about their diagnosis in appropriate place	90%	88%	81%	89%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	85%	79%	86%

SUPPORT FROM A MAIN CONTACT PERSO	Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	91%	87%	89%	90%
Q18. Patient found it very or quite easy to contact their main contact person	93%	91%	88%	92%
Q19. Patient found advice from main contact person was very or quite helpful	99%	96%	94%	98%

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	86%	84%	83%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	78%	67%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	90%	83%	87%	88%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	63%	56%	*	61%

CARE PLANNING	Long-term condition status					
	Yes No Not given Al					
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	75%	71%	79%	74%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	96%	91%	*	95%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	*	100%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	90%	95%	88%	91%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	82%	79%	78%	81%	
Q29. Patient was offered information about how to get financial help or benefits	65%	76%	77%	70%	

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%	86%	*	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	74%	67%	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	80%	65%	*	75%
Q34. Patient was always able to get help from ward staff when needed	78%	83%	*	79%
Q35. Patient was always able to discuss worries and fears with hospital staff	77%	74%	*	75%
Q36. Hospital staff always did everything they could to help the patient control pain	90%	86%	*	89%
Q37. Patient was always treated with respect and dignity while in hospital	97%	94%	*	95%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	97%	*	93%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	79%	83%	81%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	94%	88%	*	92%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	84%	87%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	100%	*	94%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	95%	73%	*	90%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	*	*	77%
Q42_1. Patient completely had enough understandable information about their response to surgery	92%	86%	*	90%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	85%	72%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	92%	91%	*	92%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	88%	67%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	88%	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	84%	76%	80%	81%

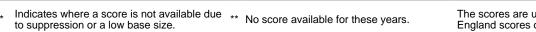
IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	70%	81%	81%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	79%	65%	81%	75%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	92%	83%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	70%	65%	60%	68%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	59%	50%	58%

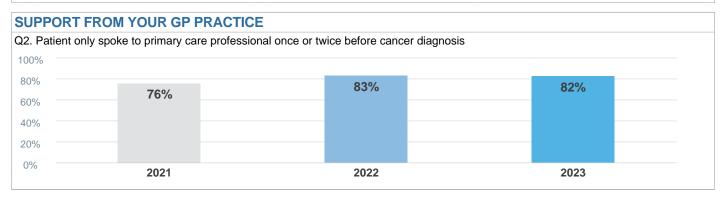
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	61%	65%	50%	62%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	70%	73%	*	72%	

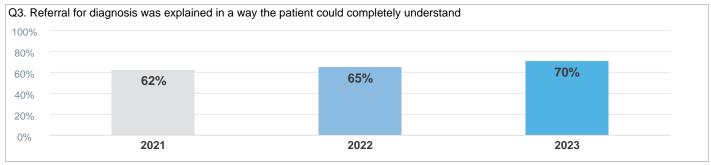
CARE FROM YOUR GP PRACTICE	Long-term condition status			
	Yes No Not given All			
Q51. Patient definitely received the right amount of support from their GP practice during treatment	62%	52%	*	58%
Q52. Patient has had a review of cancer care by GP practice	28%	21%	22%	26%

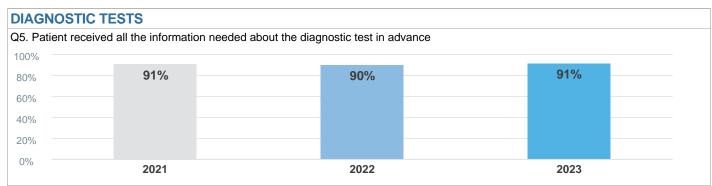
LIVING WITH AND BEYOND CANCER		Long-term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	40%	30%	*	37%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	87%	84%	*	86%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	75%	64%	79%	72%

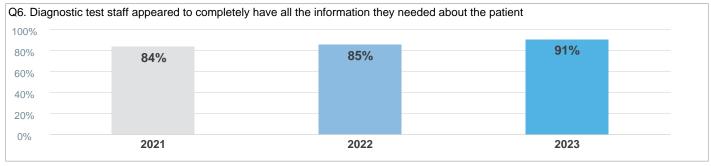
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given				
Q56. The whole care team worked well together	93%	92%	94%	93%	
Q57. Administration of care was very good or good	92%	92%	89%	92%	
Q58. Cancer research opportunities were discussed with patient	36%	30%	*	33%	
Q59. Patient's average rating of care scored from very poor to very good	9.1	8.9	8.7	9.0	

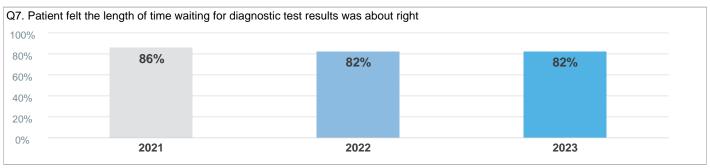




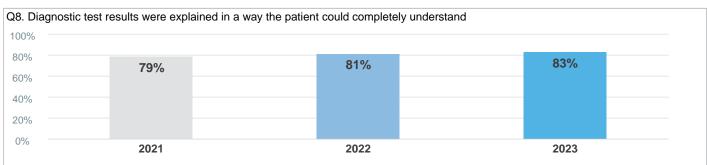


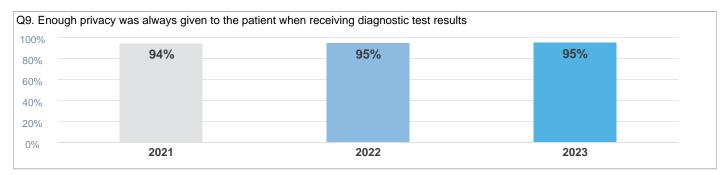


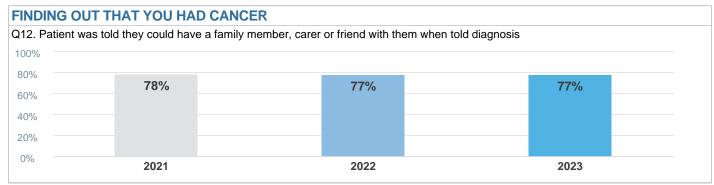


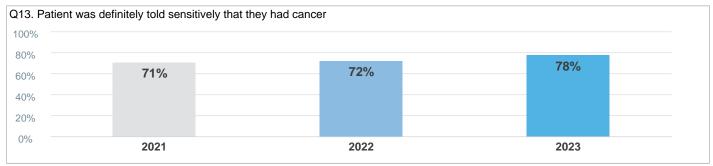


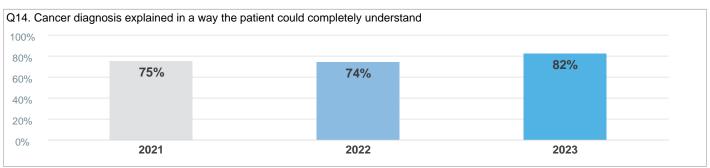


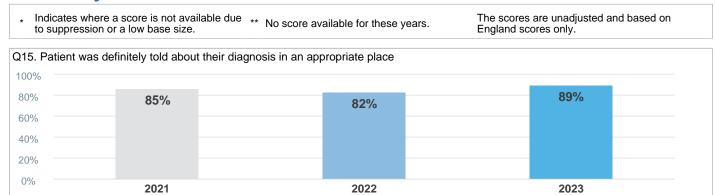


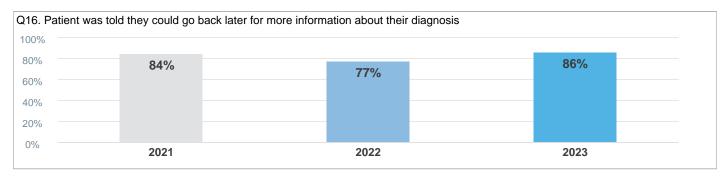


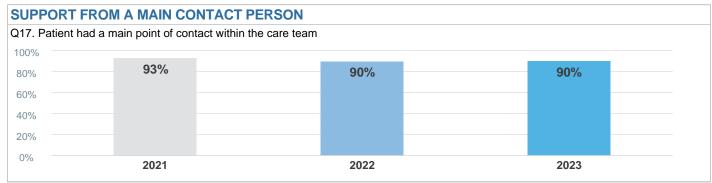


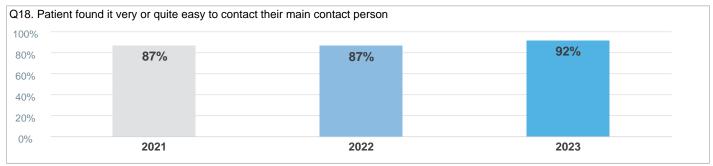


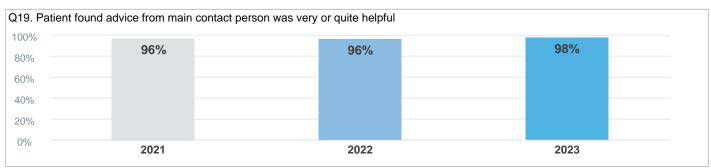




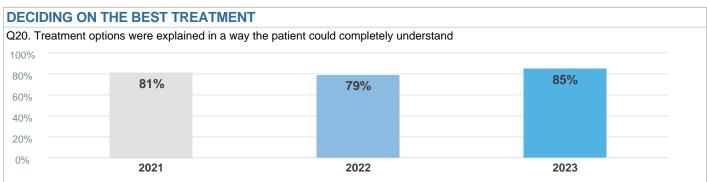


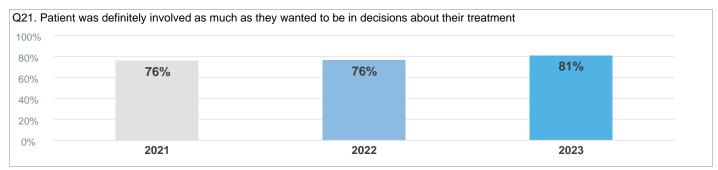


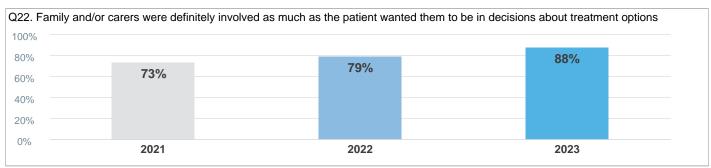


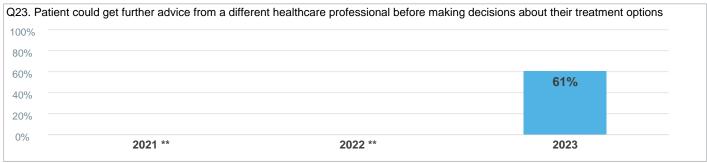


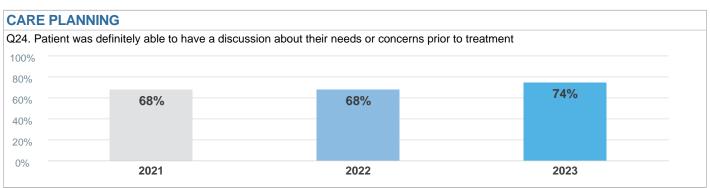




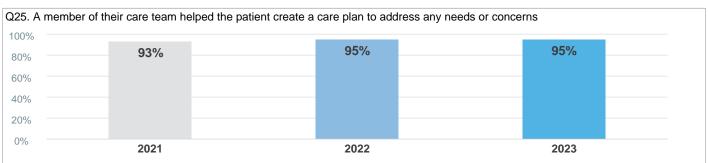


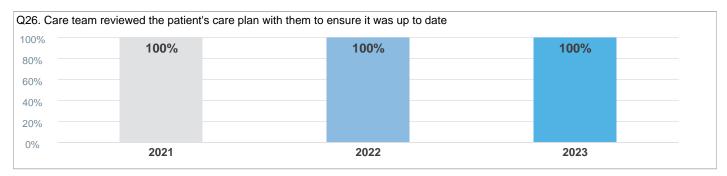


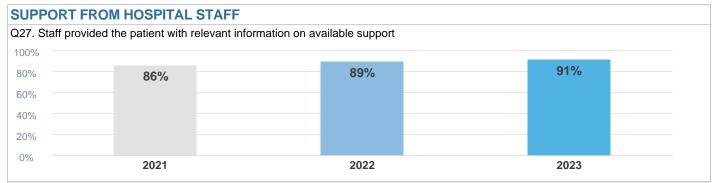


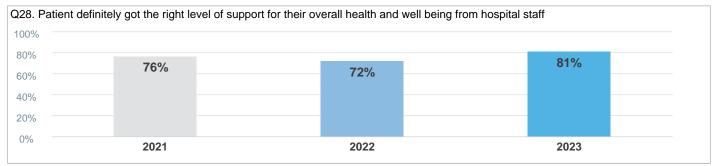


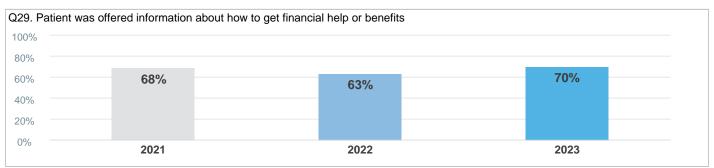


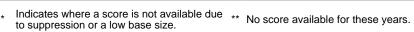


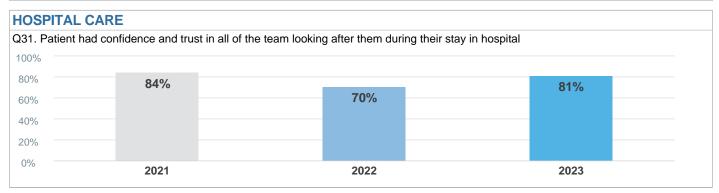


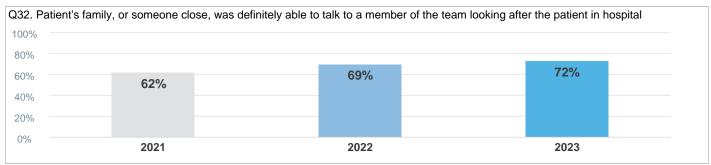


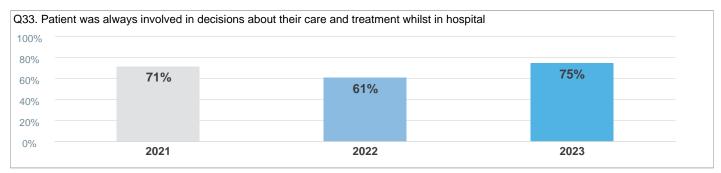


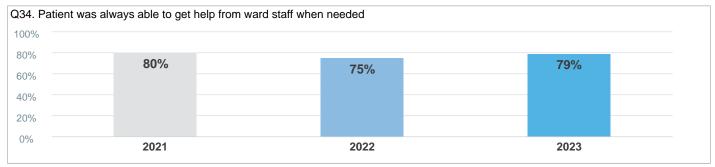


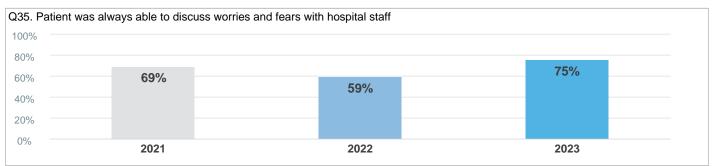












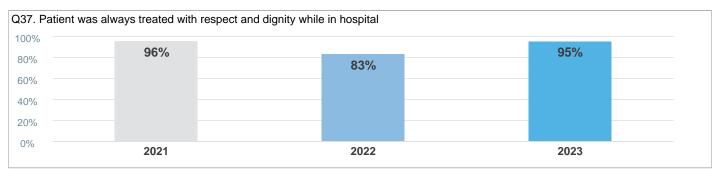
2023

Year on year charts

2021

20%





2022

