

Cancer Patient Experience Survey

2023 Results

Cheshire and Merseyside Cancer Alliance

First published July 2024; updated November 2024 to include Integrated Care Board data

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Executive summary

Questions above expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q34. Patient was always able to get help from ward staff when needed	77%	69%	76%	73%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	85%	74%	85%	79%

Questions below expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q29. Patient was offered information about how to get financial help or benefits	63%	65%	75%	70%

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%.

This document was reissued in November 2024 to include an Integrated Care Board expected range summary section.

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.

How alliance and ICB results are generated

Alliance and ICB results are derived using the post code of each patient, rather than by mapping trust results to ICBs or alliances. This mapping is achieved using lookup files released by the Office for National Statistics.

Alliance and ICB results therefore reflect the experience of people referred from within the geographical footprint.

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

Scoring methodology

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

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

Statistical significance

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

Suppression

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

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

For alliances 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** alliance has a score suppressed. If this happens, we will suppress another alliance's results (both the alliance 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 alliance.

The same rule applies to groups in each sub-group breakdown. For example, if only one alliance has the 85+ age group suppressed for Q25 we will need to suppress another alliance'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 alliance scored for each question in the survey compared with England results. It is aimed at helping individual alliances 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 alliance.

Alliances 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 alliance performs better than what alliances 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 alliance's size and demographics.

Comparability tables

The comparability tables show the 2022 and 2023 unadjusted scores for this alliance 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 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 alliances 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.

Trust expected range summary

The number of scored questions that fell below, within and above the expected range for each trust within the alliance.

ICB expected range summary

The number of scored questions that fell below, within and above the expected range for each ICB within the alliance.

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 other reports.

Overall response rate at response rate sections shows national level counts and response rate. For cancer alliances and its comparison at comparability tables section, all data is presented at the England level.

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 alliance level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response rate

Overall response rate

1,818 patients responded out of a total of 3,521 patients, resulting in a response rate of 52%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	3,764	3,521	1,818	52%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	1,453
Online	364
Phone	1
Translation service	0
Total	1,818

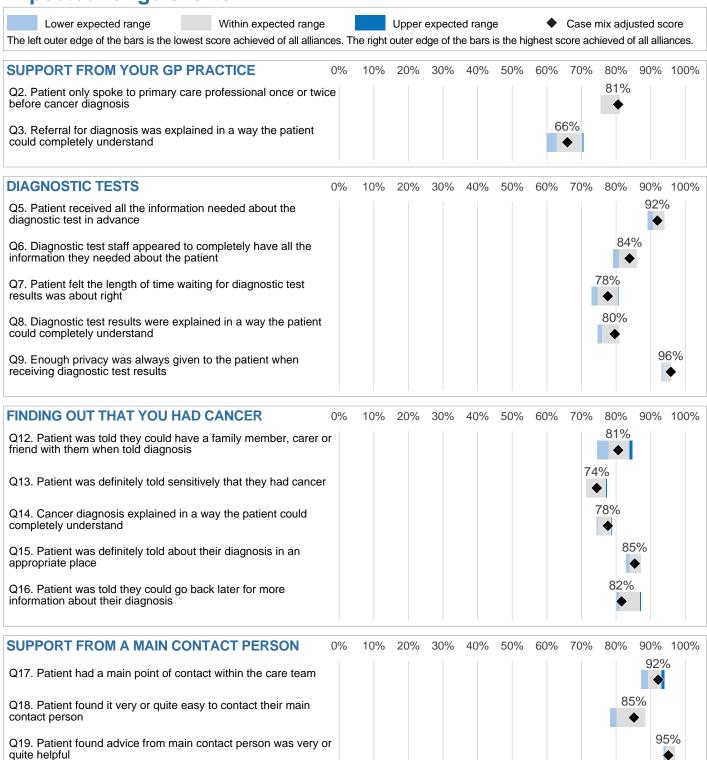
Respondents by tumour group

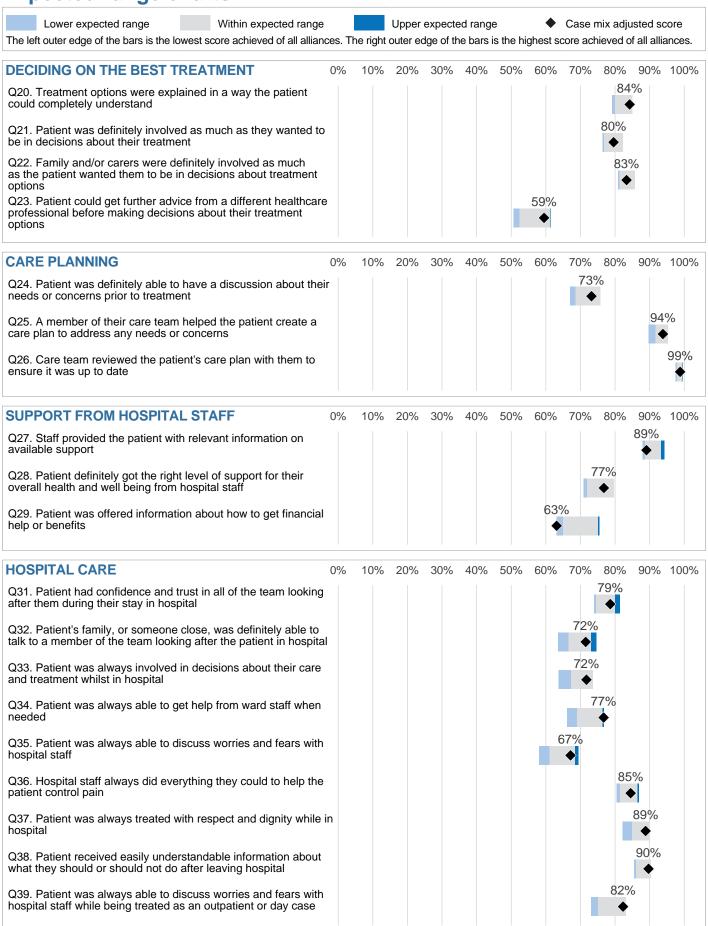
	Number of respondents
Brain / CNS	11
Breast	261
Colorectal / LGT	217
Gynaecological	79
Haematological	314
Head and neck	46
Lung	124
Prostate	187
Sarcoma	10
Skin	127
Upper gastro	76
Urological	162
Other	204
Total	1,818

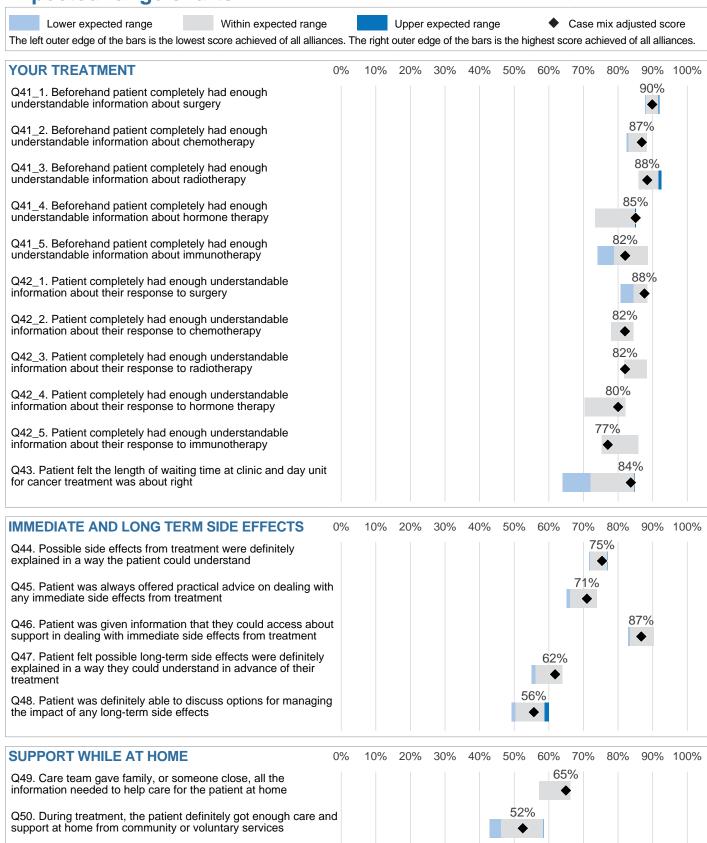
Respondents by ethnicity

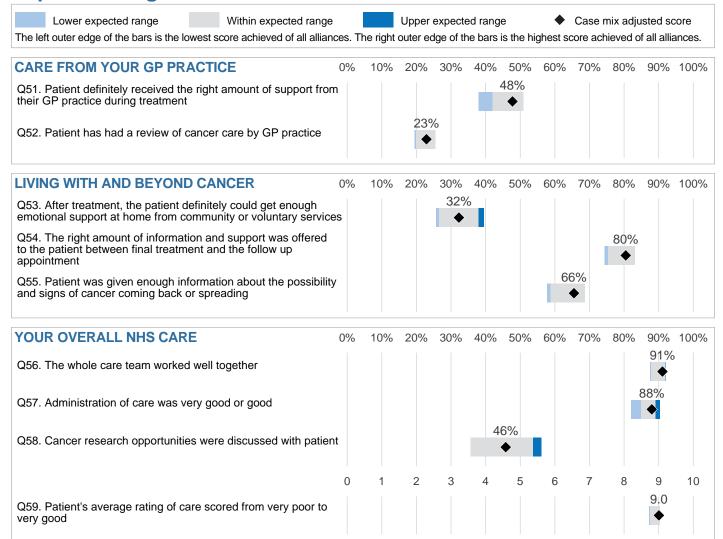
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,620
Irish	12
Gypsy or Irish Traveller	*
Roma	*
Any other White background	22
Mixed / Multiple Ethnic Groups	I
White and Black Caribbean	6
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	l
Indian	6
Pakistani	*
Bangladeshi	*
Chinese	7
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	123
Total	1,818

^{*} 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.

	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	801	79%	842	80%			81%	76%	81%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	1058	67%	1155	64%			66%	63%	70%	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	England score	
Q5. Patient received all the information needed about the diagnostic test in advance	1448	93%	1487	92%			92%	91%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	1525	85%	1559	84%			84%	81%	86%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	1531	80%	1565	78%		•	78%	75%	81%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	1533	83%	1564	80%			80%	76%	81%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	1532	96%	1571	96%			96%	93%	96%	95%	

	Unadjusted scores							Case mix adjusted scores			
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	1649	78%	1659	80%		A	81%	78%	84%	81%	
Q13. Patient was definitely told sensitively that they had cancer	1745	76%	1776	74%			74%	72%	77%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	1748	80%	1784	78%			78%	75%	79%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	1739	87%	1786	85%			85%	84%	87%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	1569	84%	1575	81%			82%	81%	87%	84%	

			Unadjust	ted score	es		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	England score
Q17. Patient had a main point of contact within the care team	1709	93%	1711	92%			92%	89%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	1463	87%	1420	86%		•	85%	80%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	1513	96%	1504	95%			95%	94%	97%	96%

Comparability tables

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

** No score available for 2022.

treatment options

▲ 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

			Unadjus	ted score	es		Case n			
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	England score
Q20. Treatment options were explained in a way the patient could completely understand	1629	85%	1659	85%			84%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1722	82%	1758	80%			80%	77%	82%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	1458	83%	1526	84%		•	83%	81%	86%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their	**	**	988	60%			59%	52%	61%	57%

			Unadjust	ed score	es		Case n			
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	1570	75%	1600	74%			73%	69%	76%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	960	93%	966	94%			94%	92%	95%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	773	99%	768	99%			99%	98%	100%	99%

			Unadjust	ted score		Case n				
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q27. Staff provided the patient with relevant information on available support	1400	89%	1431	89%			89%	89%	93%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1729	79%	1771	78%			77%	72%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	877	61%	925	63%			63%	65%	75%	70%

Comparability tables

Adjusted score below lower

	* Indicates where a score is not		01 0000 0000 1 11 1 0000	expected range
	available due to suppression or a low base size.	¹ ▲ or ▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall	Adjusted score between upper and
ı	low base size.	Oi ·		lower expected ranges
	** No score available for 2022.		(2021, 2022, and 2023).	Adjusted score above upper expected range

			Unadjus	ted score	es		Case n			
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	907	83%	900	80%		•	79%	75%	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	723	73%	741	72%		•	72%	67%	73%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	893	78%	883	72%	•		72%	67%	74%	70%
Q34. Patient was always able to get help from ward staff when needed	892	79%	892	77%			77%	69%	76%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	867	71%	860	68%			67%	61%	68%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	799	87%	793	85%			85%	81%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	904	91%	896	89%			89%	85%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	888	91%	878	90%			90%	86%	90%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	1483	83%	1542	83%			82%	75%	83%	79%

			Unadjus	ted score	es		Case r			
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	1232	92%	1126	90%			90%	88%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	676	87%	681	87%			87%	83%	88%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	499	89%	453	89%			88%	86%	92%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	265	80%	201	86%			85%	74%	85%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	158	82%	217	82%			82%	79%	89%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	1114	88%			88%	84%	88%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	679	82%			82%	78%	84%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	449	82%			82%	82%	88%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	200	81%			80%	70%	82%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	214	78%			77%	75%	86%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1696	84%	1695	84%			84%	72%	85%	78%

Comparability tables

Adjusted score below lower

			Unadjust	ed score	es		Case n			
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	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	1614	78%	1625	76%			75%	72%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1549	72%	1547	72%			71%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	1232	86%	1252	87%			87%	83%	90%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	1536	64%	1543	62%			62%	56%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	1306	59%	1346	56%			56%	50%	59%	55%

			Unadjust	ed 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	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	1150	64%	1168	66%		A	65%	57%	66%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	679	55%	660	53%			52%	46%	58%	52%

			Unadjust	ted score	Case m					
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	England score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	949	46%	981	48%		A	48%	42%	51%	46%
Q52. Patient has had a review of cancer care by GP practice	1662	22%	1691	23%			23%	20%	25%	23%

			Unadjust	ted score	s		Case n			
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	422	40%	404	32%			32%	27%	38%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	920	83%	917	81%			80%	75%	83%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	1402	69%	1424	68%			66%	59%	69%	64%

			Unadjust	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	England score
Q56. The whole care team worked well together	1662	91%	1693	91%			91%	88%	92%	90%
Q57. Administration of care was very good or good	1731	88%	1740	88%			88%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	1016	46%	1002	47%			46%	36%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	1687	9.1	1707	9.0			9.0	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	ur 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	*	97%	77%	75%	61%	77%	76%	80%	*	95%	81%	81%	82%	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	80%	61%	71%	50%	67%	49%	75%	*	74%	47%	69%	61%	64%

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	100%	94%	94%	85%	92%	92%	89%	95%	*	92%	87%	90%	92%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	90%	89%	84%	80%	82%	89%	85%	81%	*	88%	83%	79%	84%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	90%	75%	81%	75%	81%	79%	83%	77%	*	70%	72%	81%	76%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	90%	84%	83%	78%	72%	84%	85%	78%	*	85%	72%	76%	80%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	100%	97%	95%	91%	95%	100%	97%	97%	*	98%	98%	93%	95%	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	100%	90%	88%	71%	70%	88%	84%	86%	80%	67%	80%	75%	76%	80%
Q13. Patient was definitely told sensitively that they had cancer	82%	86%	77%	65%	72%	74%	77%	71%	*	80%	57%	66%	73%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	82%	86%	84%	79%	69%	82%	79%	73%	80%	82%	64%	74%	80%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	91%	93%	87%	71%	78%	91%	89%	89%	90%	90%	73%	82%	84%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	*	93%	86%	76%	74%	86%	77%	89%	*	86%	72%	78%	72%	81%

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	*	97%	94%	97%	91%	89%	97%	95%	90%	85%	96%	87%	86%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	89%	88%	87%	86%	87%	92%	77%	*	89%	86%	78%	83%	86%
Q19. Patient found advice from main contact person was very or quite helpful	*	95%	96%	96%	95%	90%	94%	95%	*	94%	100%	95%	95%	95%

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	*	87%	86%	83%	83%	92%	88%	82%	*	89%	81%	81%	81%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	80%	84%	74%	77%	78%	88%	80%	60%	84%	80%	74%	81%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	85%	80%	79%	80%	85%	91%	85%	*	81%	82%	83%	86%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	64%	61%	56%	58%	66%	69%	71%	*	57%	58%	47%	55%	60%

CARE PLANNING							Tumo	ur gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	75%	77%	74%	71%	76%	75%	75%	*	81%	73%	67%	69%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	92%	92%	99%	86%	97%	92%	*	96%	98%	92%	90%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	98%	99%	100%	99%	100%	100%	99%	*	100%	100%	98%	96%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	93%	91%	89%	89%	92%	83%	92%	*	91%	96%	81%	84%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	76%	78%	75%	76%	80%	78%	76%	90%	84%	84%	75%	78%	78%
Q29. Patient was offered information about how to get financial help or benefits	*	68%	61%	81%	67%	57%	67%	47%	*	63%	65%	47%	63%	63%

HOSPITAL CARE							Tumo	ur 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	*	79%	77%	77%	83%	67%	82%	85%	*	100%	76%	81%	76%	80%
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%	73%	58%	73%	72%	75%	72%	*	*	75%	73%	74%	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	75%	74%	73%	70%	65%	77%	77%	*	92%	76%	61%	72%	72%
Q34. Patient was always able to get help from ward staff when needed	*	74%	73%	73%	82%	76%	82%	80%	*	86%	74%	79%	79%	77%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	62%	67%	65%	77%	56%	69%	76%	*	85%	66%	63%	68%	68%
Q36. Hospital staff always did everything they could to help the patient control pain	*	84%	82%	82%	87%	88%	85%	88%	*	100%	79%	81%	89%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	88%	89%	88%	93%	88%	85%	90%	*	100%	82%	94%	87%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	92%	87%	89%	92%	88%	88%	89%	*	93%	94%	88%	91%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	83%	86%	80%	84%	76%	78%	83%	*	85%	84%	78%	85%	83%

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%	89%	86%	89%	93%	90%	89%	*	88%	90%	88%	94%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	88%	84%	86%	87%	93%	89%	*	*	*	88%	84%	88%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	90%	85%	88%	85%	96%	85%	89%	*	*	90%	*	89%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	82%	*	*	*	*	*	91%	*	*	*	*	90%	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	71%	*	*	81%	*	84%	*	*	71%	90%	91%	96%	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	92%	84%	87%	81%	88%	88%	82%	*	93%	93%	81%	90%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	80%	77%	88%	82%	79%	80%	*	*	*	83%	84%	91%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	85%	76%	81%	78%	79%	73%	83%	*	*	90%	*	80%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	76%	*	*	*	*	*	86%	*	*	*	*	89%	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	57%	*	*	82%	*	81%	*	*	64%	*	84%	86%	78%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	91%	83%	86%	88%	79%	86%	90%	86%	80%	88%	78%	88%	82%	84%

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	73%	76%	78%	81%	71%	65%	78%	77%	*	78%	79%	76%	76%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	73%	75%	72%	69%	71%	67%	69%	69%	*	76%	74%	71%	72%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	87%	86%	85%	81%	86%	84%	*	89%	96%	78%	89%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	65%	65%	69%	55%	58%	63%	70%	*	61%	65%	59%	60%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	57%	58%	60%	54%	50%	64%	59%	*	64%	49%	51%	54%	56%

SUPPORT WHILE AT HOME							Tumo	ur 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	*	63%	67%	67%	63%	71%	72%	68%	*	69%	76%	58%	65%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	57%	57%	42%	54%	63%	57%	41%	*	53%	60%	42%	54%	53%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarooma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	49%	48%	45%	43%	39%	46%	54%	*	56%	47%	48%	44%	48%
Q52. Patient has had a review of cancer care by GP practice	40%	23%	25%	27%	21%	32%	24%	22%	*	16%	30%	20%	21%	23%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	36%	32%	29%	33%	47%	32%	32%	*	*	22%	36%	30%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	81%	86%	80%	84%	72%	76%	77%	*	85%	85%	75%	84%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	67%	69%	58%	74%	61%	55%	58%	*	86%	60%	66%	67%	68%

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 Otther												All	
Q56. The whole care team worked well together	82%	93%	87%	85%	90%	91%	94%	90%	90%	94%	94%	91%	94%	91%
Q57. Administration of care was very good or good	64%	90%	89%	84%	89%	93%	89%	84%	80%	92%	91%	85%	87%	88%
Q58. Cancer research opportunities were discussed with patient	d * 38% 47% 27% 54% 54% 67% 33% * 45% 55% 37% 50% 47%										47%			
Q59. Patient's average rating of care scored from very poor to very good	ery 9.1 9.1 9.0 8.8 9.1 8.8 9.2 9.0 9.5 9.3 9.0 8.8 8.8 9.0											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	*	67%	81%	74%	77%	81%	82%	95%	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	47%	65%	66%	71%	62%	62%	70%	64%

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	*	89%	92%	89%	94%	91%	92%	97%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	90%	84%	84%	84%	83%	84%	84%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	50%	67%	67%	74%	78%	83%	88%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	75%	75%	67%	81%	80%	84%	75%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	95%	86%	94%	94%	97%	97%	98%	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	*	74%	74%	77%	77%	81%	80%	85%	80%
Q13. Patient was definitely told sensitively that they had cancer	*	62%	83%	72%	72%	75%	75%	83%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	67%	72%	72%	76%	79%	80%	78%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	71%	72%	82%	82%	86%	88%	90%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	*	86%	77%	83%	84%	84%	77%	73%	81%

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%	100%	93%	93%	92%	91%	89%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	94%	81%	83%	83%	86%	89%	81%	86%
Q19. Patient found advice from main contact person was very or quite helpful	*	100%	93%	94%	95%	95%	96%	93%	95%

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	*	65%	86%	82%	85%	86%	85%	82%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	57%	79%	73%	82%	80%	83%	77%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	67%	85%	83%	82%	85%	83%	89%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	53%	75%	58%	66%	59%	58%	50%	60%

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	*	71%	69%	69%	75%	74%	73%	73%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	100%	100%	92%	97%	92%	94%	93%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	90%	100%	95%	99%	100%	99%	100%	99%

SUPPORT FROM HOSPITAL STAFF					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	79%	91%	89%	92%	90%	88%	84%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	71%	68%	73%	77%	77%	78%	91%	78%
Q29. Patient was offered information about how to get financial help or benefits	*	50%	67%	76%	64%	63%	56%	61%	63%

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	*	*	58%	76%	76%	79%	84%	85%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	73%	63%	65%	73%	77%	84%	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	83%	68%	75%	70%	72%	71%	72%
Q34. Patient was always able to get help from ward staff when needed	*	*	77%	72%	77%	75%	82%	81%	77%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	91%	64%	67%	68%	70%	68%	68%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	67%	79%	86%	84%	88%	96%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	92%	81%	89%	89%	92%	98%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	92%	89%	87%	91%	92%	82%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	70%	81%	73%	85%	83%	85%	82%	83%

YOUR TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	75%	94%	86%	91%	89%	92%	89%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	82%	85%	88%	85%	89%	100%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	85%	89%	91%	88%	88%	92%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	74%	90%	86%	86%	*	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	63%	85%	80%	88%	*	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	83%	93%	83%	89%	86%	90%	91%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	82%	76%	87%	79%	86%	95%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	75%	75%	87%	83%	83%	79%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	65%	76%	84%	86%	*	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	63%	81%	75%	82%	*	78%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	68%	75%	79%	85%	85%	85%	88%	84%

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	*	94%	90%	72%	79%	74%	76%	68%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	75%	71%	65%	72%	72%	73%	70%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	100%	85%	86%	87%	89%	83%	84%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	80%	61%	60%	64%	63%	60%	64%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	68%	63%	49%	56%	55%	59%	62%	56%

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	*	73%	57%	56%	65%	67%	68%	71%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	36%	50%	52%	58%	49%	56%	52%	53%

CARE FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	42%	55%	54%	49%	46%	44%	57%	48%
Q52. Patient has had a review of cancer care by GP practice	*	21%	31%	28%	23%	22%	21%	23%	23%

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	*	20%	18%	22%	33%	33%	40%	*	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	80%	71%	77%	77%	84%	82%	87%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	61%	55%	65%	64%	67%	71%	80%	68%

YOUR OVERALL NHS CARE			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	90%	90%	85%	91%	91%	93%	96%	91%
Q57. Administration of care was very good or good	*	85%	86%	84%	85%	88%	91%	93%	88%
Q58. Cancer research opportunities were discussed with patient	*	20%	45%	32%	44%	52%	48%	47%	47%
Q59. Patient's average rating of care scored from very poor to very good	*	8.9	8.7	8.8	9.0	9.0	9.1	9.1	9.0

SUPPORT FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	82%	79%	*	*	*	78%	80%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	62%	*	*	*	67%	64%	

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	92%	92%	*	*	*	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	83%	*	*	*	85%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	80%	*	*	*	76%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	80%	*	*	*	77%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	96%	*	*	*	98%	96%

FINDING OUT THAT YOU HAD CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	81%	79%	*	*	*	77%	80%
Q13. Patient was definitely told sensitively that they had cancer	77%	72%	*	*	*	74%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	76%	*	*	*	81%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	85%	*	*	*	88%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	81%	*	*	*	81%	81%

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	94%	91%	*	*	*	91%	92%	
Q18. Patient found it very or quite easy to contact their main contact person	87%	85%	*	*	*	81%	86%	
Q19. Patient found advice from main contact person was very or quite helpful	95%	96%	*	*	*	96%	95%	

DECIDING ON THE BEST TREATMENT	Male/Female/Non-binary/Other								
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	85%	85%	*	*	*	81%	85%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	81%	*	*	*	80%	80%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	84%	*	*	*	83%	84%		
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	58%	62%	*	*	*	59%	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	72%	75%	*	*	*	72%	74%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	94%	*	*	*	89%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	*	*	*	97%	99%	

SUPPORT FROM HOSPITAL STAFF		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q27. Staff provided the patient with relevant information on available support	88%	90%	*	*	*	92%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	81%	*	*	*	84%	78%	
Q29. Patient was offered information about how to get financial help or benefits	65%	61%	*	*	*	59%	63%	

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	74%	84%	*	*	*	85%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	70%	74%	*	*	*	71%	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	73%	*	*	*	84%	72%
Q34. Patient was always able to get help from ward staff when needed	73%	80%	*	*	*	84%	77%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	72%	*	*	*	67%	68%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	86%	*	*	*	89%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	91%	*	*	*	89%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	90%	*	*	*	86%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	85%	*	*	*	84%	83%

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	90%	90%	*	*	*	96%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	88%	*	*	*	87%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	88%	*	*	*	88%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	89%	*	*	*	*	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	81%	*	*	*	*	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	88%	87%	*	*	*	86%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	83%	*	*	*	90%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	81%	*	*	*	77%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	86%	*	*	*	*	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	76%	78%	*	*	*	*	78%
Q43. Patient felt the length of waiting time at clinic and lay unit for cancer treatment was about right	83%	85%	*	*	*	84%	84%

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	75%	78%	*	*	*	66%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	73%	*	*	*	57%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	87%	*	*	*	81%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	64%	*	*	*	53%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	58%	*	*	*	48%	56%

SUPPORT WHILE AT HOME		Male/Female/Non-binary/Other							
	Female	Female Male Non-binary Prefer to self-describe Prefer not to say Not given							
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	69%	*	*	*	72%	66%		
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	55%	*	*	*	52%	53%		

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	47%	49%	*	*	*	44%	48%
Q52. Patient has had a review of cancer care by GP practice	22%	23%	*	*	*	21%	23%

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	31%	34%	*	*	*	30%	32%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	81%	82%	*	*	*	84%	81%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	69%	*	*	*	74%	68%	

YOUR OVERALL NHS CARE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q56. The whole care team worked well together	91%	91%	*	*	*	98%	91%	
Q57. Administration of care was very good or good	88%	87%	*	*	*	93%	88%	
Q58. Cancer research opportunities were discussed with patient	44%	49%	*	*	*	48%	47%	
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.1	*	*	*	9.1	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	80%	*	*	*	*	78%	80%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	64%	*	56%	*	*	67%	64%

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%	*	93%	*	*	91%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	94%	*	*	85%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	*	63%	*	*	81%	78%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	*	81%	*	*	81%	80%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	100%	*	*	97%	96%		

FINDING OUT THAT YOU HAD CANCER							
	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	80%	86%	85%	*	*	77%	80%
Q13. Patient was definitely told sensitively that they had cancer	74%	71%	60%	*	*	76%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	54%	80%	*	*	82%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	86%	95%	*	*	86%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	77%	95%	*	*	81%	81%

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	92%	100%	95%	*	*	92%	92%
Q18. Patient found it very or quite easy to contact their main contact person	86%	77%	94%	*	*	83%	86%
Q19. Patient found advice from main contact person was very or quite helpful	95%	93%	100%	*	*	97%	95%

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%	80%	95%	*	*	82%	85%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	85%	85%	*	*	82%	80%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	87%	84%	*	*	83%	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	60%	50%	76%	*	*	57%	60%	

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	73%	80%	82%	*	*	74%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	100%	100%	*	*	89%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	93%	*	*	96%	99%

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	89%	83%	100%	*	*	91%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	71%	70%	*	*	84%	78%
Q29. Patient was offered information about how to get financial help or benefits	63%	*	75%	*	*	62%	63%

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	80%	50%	82%	*	*	85%	80%
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%	60%	64%	*	*	79%	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	72%	70%	82%	*	*	81%	72%
Q34. Patient was always able to get help from ward staff when needed	77%	*	82%	*	*	84%	77%
Q35. Patient was always able to discuss worries and fears with hospital staff	69%	60%	64%	*	*	69%	68%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	82%	*	*	90%	85%
Q37. Patient was always treated with respect and dignity while in hospital	89%	*	91%	*	*	89%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	80%	100%	*	*	89%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	83%	75%	67%	*	*	84%	83%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	73%	100%	*	*	91%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	*	*	*	90%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	*	*	*	*	85%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	86%	*	*	*	*	90%	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	*	*	*	*	100%	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	88%	80%	92%	*	*	82%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	*	*	*	*	90%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	82%	*	*	*	*	81%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	81%	*	*	*	*	82%	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	76%	*	*	*	*	100%	78%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	84%	79%	71%	*	*	87%	84%

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	76%	67%	76%	*	*	71%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	62%	72%	*	*	64%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	73%	94%	*	*	81%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	63%	47%	72%	*	*	57%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	54%	61%	*	*	56%	56%

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	65%	80%	67%	*	*	73%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	50%	55%	*	*	55%	53%

CARE FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	47%	*	43%	*	*	49%	48%
Q52. Patient has had a review of cancer care by GP practice	22%	7%	37%	*	*	22%	23%

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	33%	*	30%	*	*	32%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	*	90%	*	*	80%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	43%	76%	*	*	69%	68%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	91%	92%	100%	*	*	97%	91%
Q57. Administration of care was very good or good	88%	93%	100%	*	*	92%	88%
Q58. Cancer research opportunities were discussed with patient	46%	30%	67%	*	*	55%	47%
Q59. Patient's average rating of care scored from very poor to very good	9.0	8.8	9.1	*	*	9.2	9.0

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77%	81%	81%	82%	79%	80%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	57%	61%	64%	69%	67%	64%	

DIAGNOSTIC TESTS		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q5. Patient received all the information needed about the diagnostic test in advance	92%	91%	90%	94%	92%	92%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	82%	83%	87%	84%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	81%	80%	76%	77%	76%	78%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	81%	80%	80%	79%	80%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	96%	97%	95%	96%	96%		

FINDING OUT THAT YOU HAD CANCER		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	83%	85%	79%	77%	77%	80%	
Q13. Patient was definitely told sensitively that they had cancer	77%	75%	76%	72%	73%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	79%	81%	76%	77%	78%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	86%	85%	82%	85%	85%	
Q16. Patient was told they could go back later for more information about their diagnosis	80%	81%	79%	85%	81%	81%	

SUPPORT FROM A MAIN CONTACT PERSON			IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	AII
Q17. Patient had a main point of contact within the care team	95%	94%	91%	91%	91%	92%
Q18. Patient found it very or quite easy to contact their main contact person	88%	86%	85%	87%	83%	86%
Q19. Patient found advice from main contact person was very or quite helpful	94%	96%	95%	96%	95%	95%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q20. Treatment options were explained in a way the patient could completely understand	86%	88%	85%	84%	82%	85%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	86%	75%	80%	78%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	86%	82%	86%	83%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	68%	66%	55%	61%	51%	60%

CARE PLANNING		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	76%	80%	73%	74%	68%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	96%	94%	94%	93%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	100%	98%	98%	99%

SUPPORT FROM HOSPITAL STAFF			IMD q	uintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All			
Q27. Staff provided the patient with relevant information on available support	89%	89%	89%	90%	89%	89%			
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	80%	79%	77%	75%	78%			
Q29. Patient was offered information about how to get financial help or benefits	63%	62%	60%	68%	62%	63%			

HOSPITAL CARE		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	84%	80%	82%	80%	72%	80%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	77%	73%	71%	71%	69%	72%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	76%	78%	67%	73%	68%	72%		
Q34. Patient was always able to get help from ward staff when needed	78%	82%	79%	73%	78%	77%		
Q35. Patient was always able to discuss worries and fears with hospital staff	72%	74%	68%	69%	60%	68%		
Q36. Hospital staff always did everything they could to help the patient control pain	87%	84%	84%	86%	83%	85%		
Q37. Patient was always treated with respect and dignity while in hospital	89%	90%	89%	88%	90%	89%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	91%	88%	89%	89%	90%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	88%	83%	85%	81%	83%		

IMD quintile tables

YOUR TREATMENT			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	87%	91%	91%	91%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	89%	90%	89%	87%	83%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	91%	91%	86%	88%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	93%	100%	81%	90%	77%	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	92%	75%	84%	82%	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	89%	88%	87%	90%	85%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	88%	84%	83%	78%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	88%	88%	80%	76%	83%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	90%	84%	72%	78%	80%	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	73%	92%	71%	75%	82%	78%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	86%	91%	81%	83%	82%	84%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	79%	76%	70%	77%	75%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	73%	75%	70%	77%	65%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	89%	88%	89%	86%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	64%	65%	63%	62%	59%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	60%	61%	55%	60%	49%	56%

SUPPORT WHILE AT HOME		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	71%	69%	63%	69%	58%	66%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54%	62%	49%	56%	45%	53%

CARE FROM YOUR GP PRACTICE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	49%	49%	39%	49%	49%	48%
Q52. Patient has had a review of cancer care by GP practice	30%	21%	20%	21%	21%	23%

IMD quintile tables

LIVING WITH AND BEYOND CANCER		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	36%	34%	28%	29%	32%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	81%	74%	85%	86%	79%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	65%	69%	70%	66%	68%

YOUR OVERALL NHS CARE			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	94%	90%	92%	92%	88%	91%
Q57. Administration of care was very good or good	89%	89%	91%	88%	85%	88%
Q58. Cancer research opportunities were discussed with patient	50%	53%	48%	46%	41%	47%
Q59. Patient's average rating of care scored from very poor to very good	9.2	9.0	9.0	9.0	8.9	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	78%	85%	74%	80%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	62% 68% 68%						

DIAGNOSTIC TESTS		Long-term con	dition status		
	Yes	No	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	91%	94%	92%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	88%	85%	84%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	77%	79%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	83%	83%	80%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	96%	98%	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	79%	81%	80%	80%
Q13. Patient was definitely told sensitively that they had cancer	73%	76%	75%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	81%	81%	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	85%	88%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	79%	85%	85%	81%

SUPPORT FROM A MAIN CONTACT PERSOI	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	91%	93%	95%	92%
Q18. Patient found it very or quite easy to contact their main contact person	84%	89%	82%	86%
Q19. Patient found advice from main contact person was very or quite helpful	95%	95%	96%	95%

DECIDING ON THE BEST TREATMENT	Long-term condition status				
	Yes	No	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	83%	87%	83%	85%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	82%	78%	80%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	86%	84%	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	56%	67%	64%	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	71%	79%	73%	74%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	97%	88%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	98%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	87%	93%	91%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	80%	82%	78%	
Q29. Patient was offered information about how to get financial help or benefits	61%	68%	65%	63%	

HOSPITAL CARE		Long-term cor	dition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	76%	86%	85%	80%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	69%	80%	68%	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	80%	75%	72%
Q34. Patient was always able to get help from ward staff when needed	75%	82%	83%	77%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	76%	69%	68%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	90%	85%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	94%	89%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	93%	89%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	86%	85%	83%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	88%	93%	96%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	87%	90%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	91%	87%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	83%	89%	93%	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	80%	100%	82%
Q42_1. Patient completely had enough understandable information about their response to surgery	86%	91%	91%	88%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	86%	90%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	80%	88%	81%	82%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	79%	83%	80%	81%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	74%	82%	100%	78%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	84%	84%	84%	84%

IMMEDIATE AND LONG TERM SIDE EFFECTS	Long-term condition status			
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	82%	72%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	77%	65%	72%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	91%	79%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	70%	55%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	66%	53%	56%

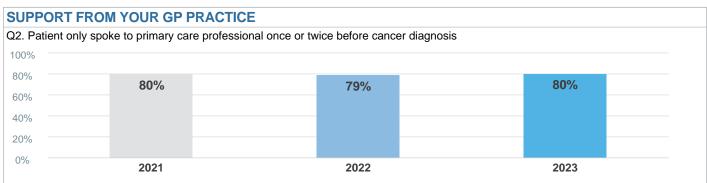
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	64%	70%	71%	66%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	49%	60%	64%	53%	

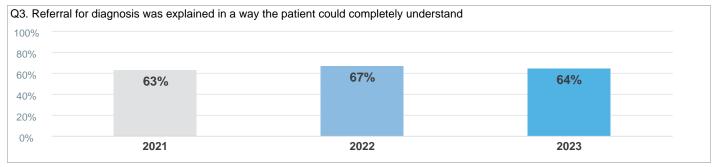
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	43%	57%	47%	48%	
Q52. Patient has had a review of cancer care by GP practice	22%	24%	24%	23%	

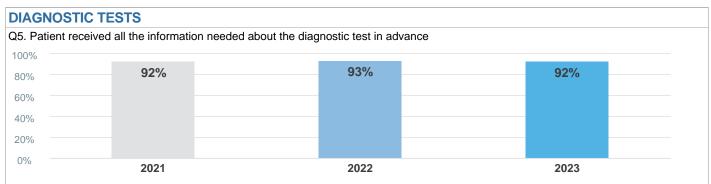
LIVING WITH AND BEYOND CANCER		Long-term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	36%	36%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	90%	80%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	72%	74%	68%

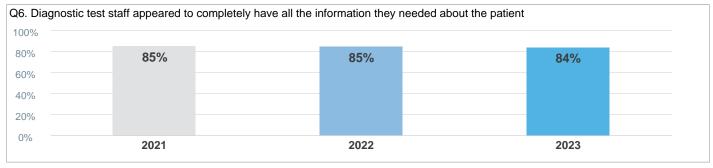
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given A				
Q56. The whole care team worked well together	90%	92%	97%	91%	
Q57. Administration of care was very good or good	87%	89%	92%	88%	
Q58. Cancer research opportunities were discussed with patient	48%	42%	56%	47%	
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.2	9.3	9.0	

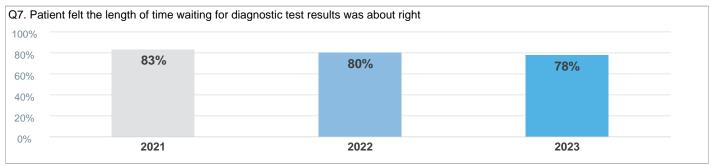


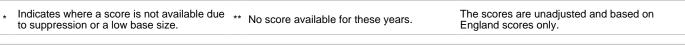


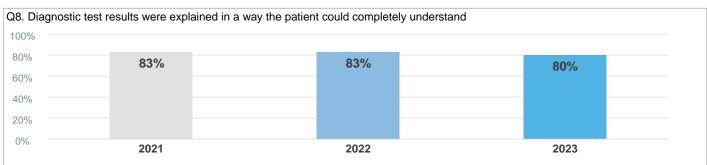


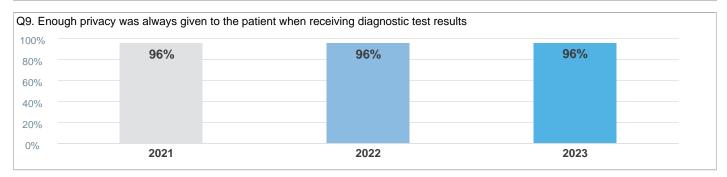


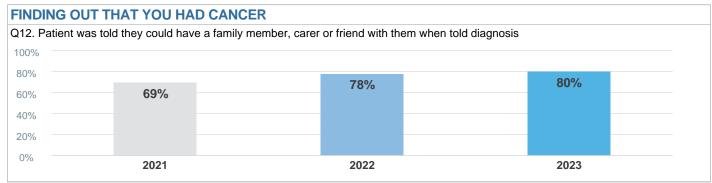


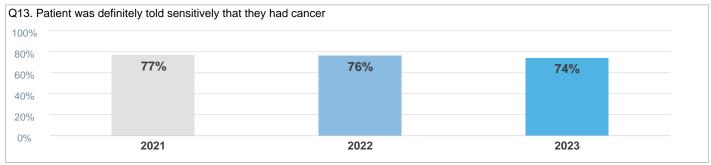


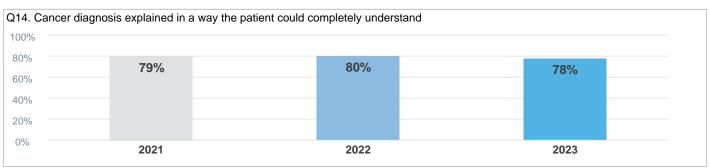


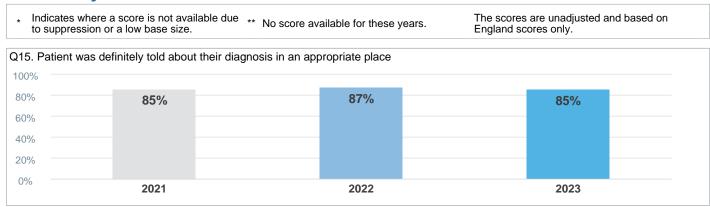


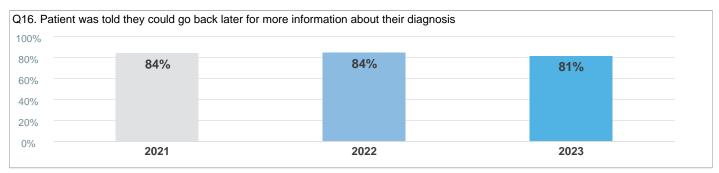


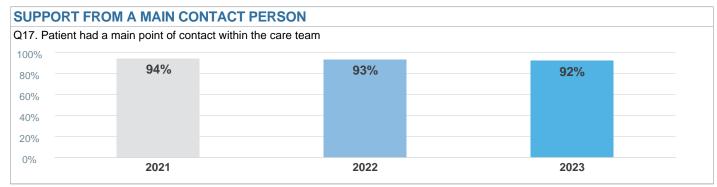


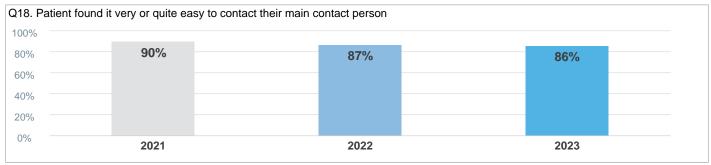


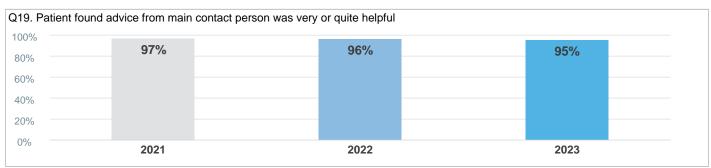




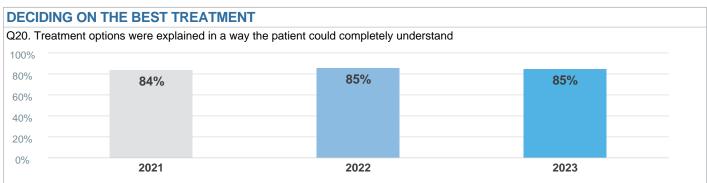


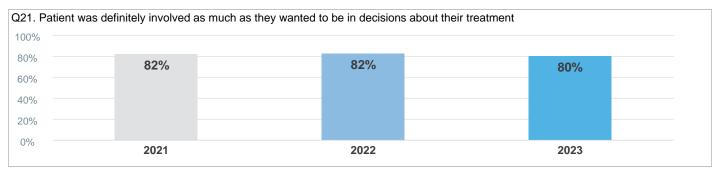


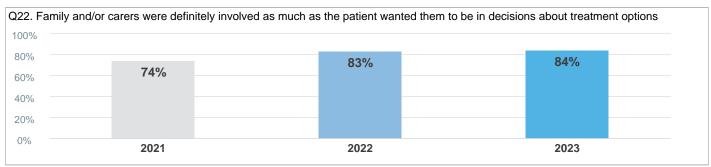


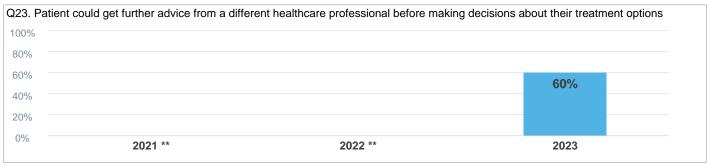


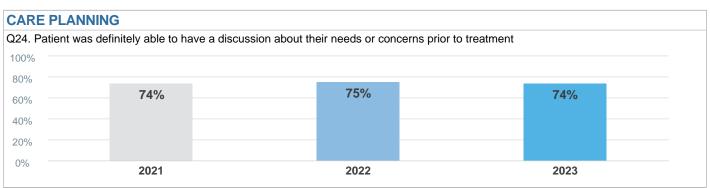




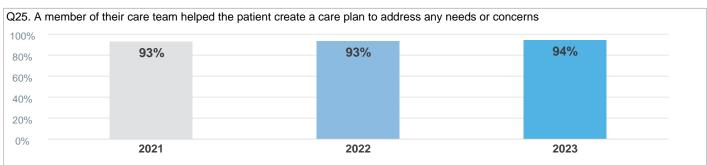


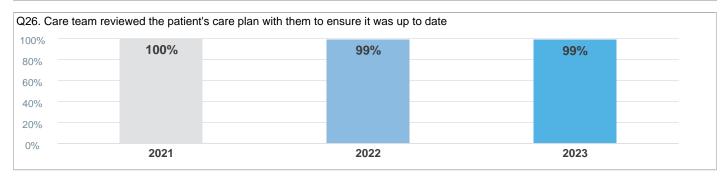


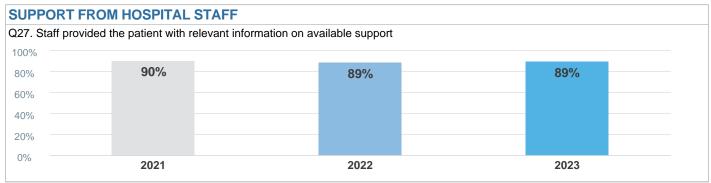


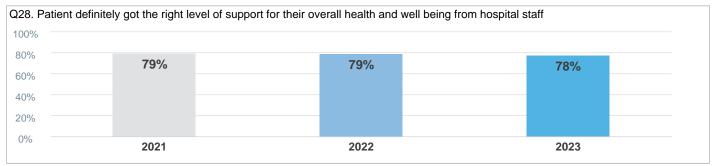


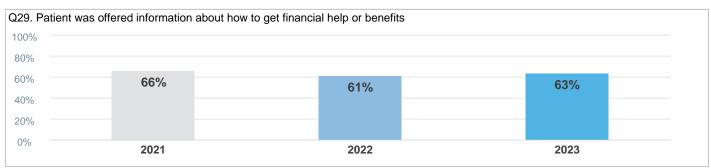


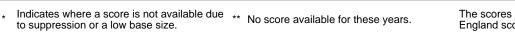




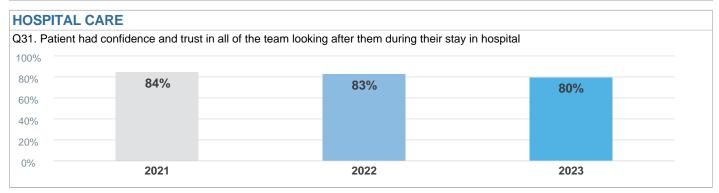


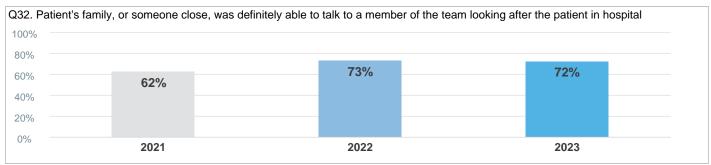


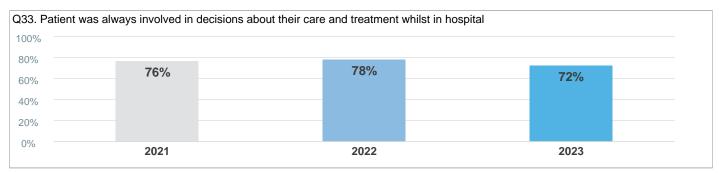


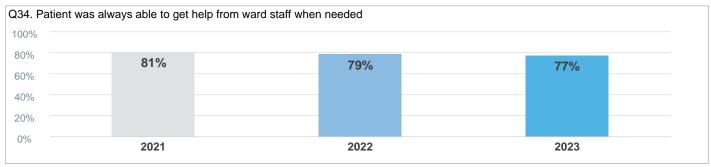


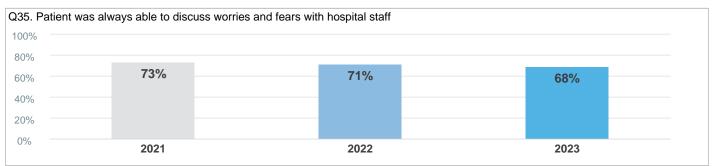
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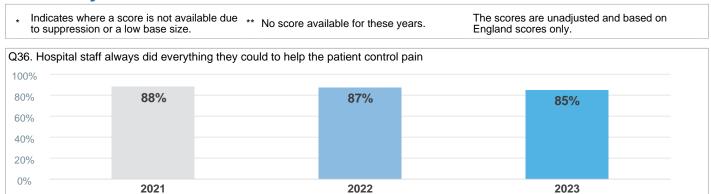


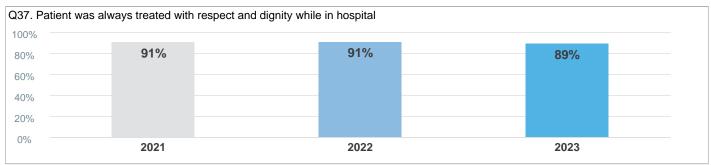


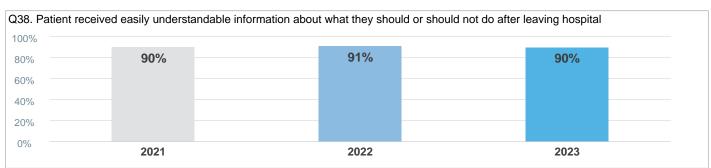


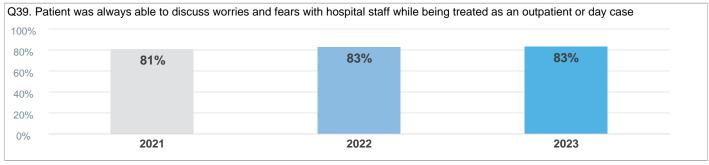


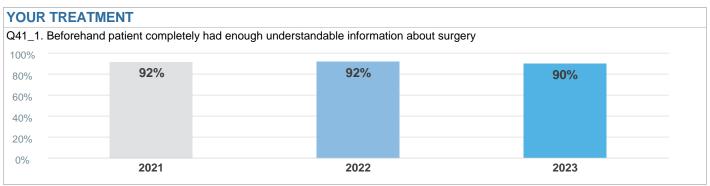




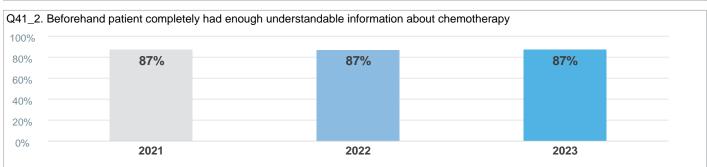


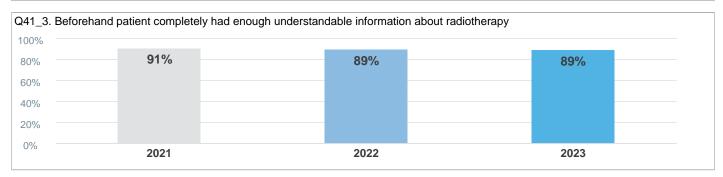


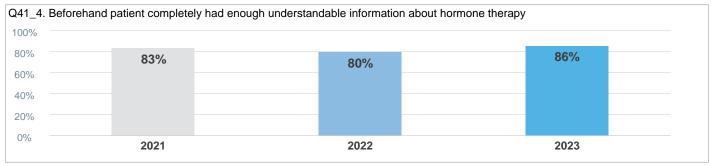


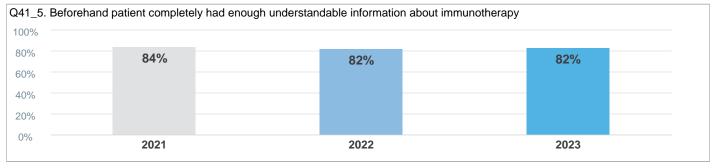


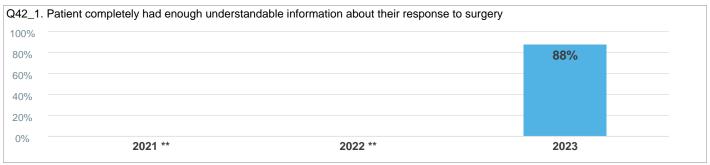


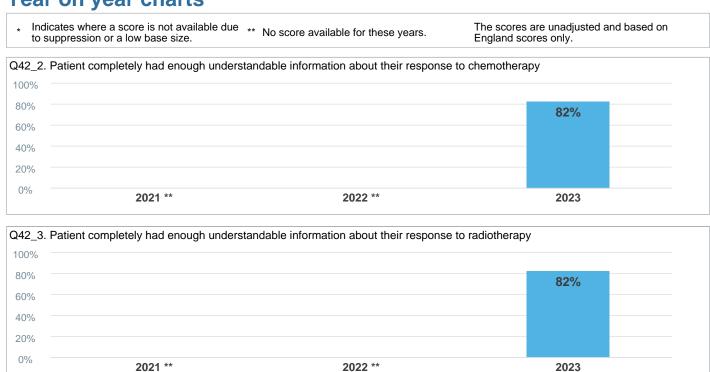


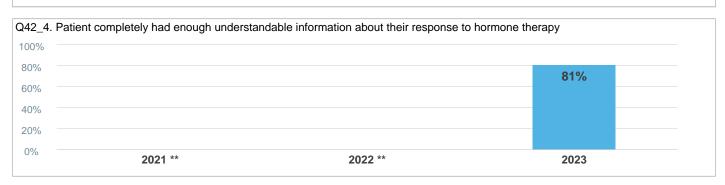


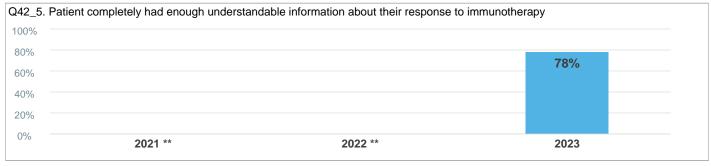


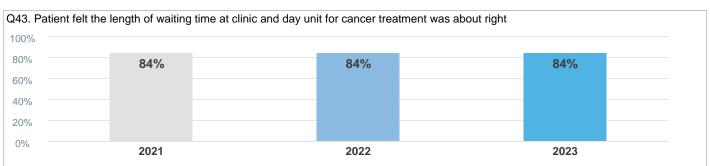


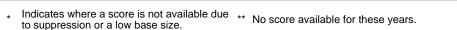




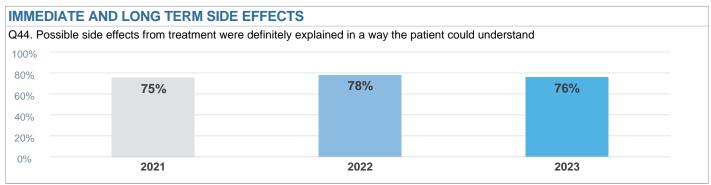


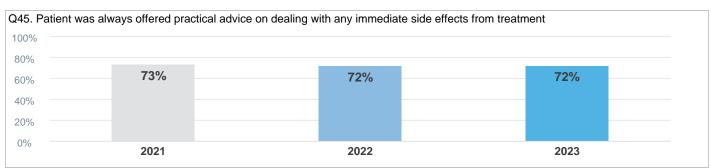


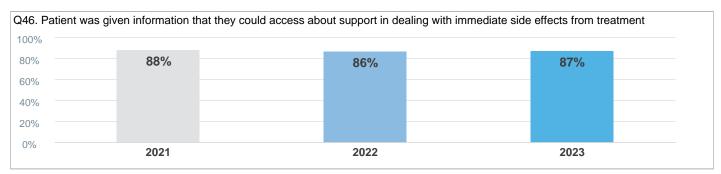


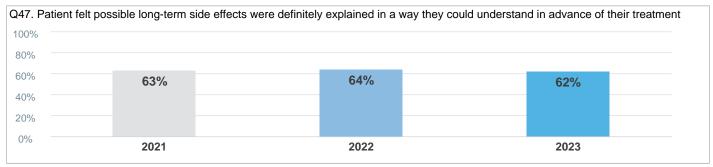


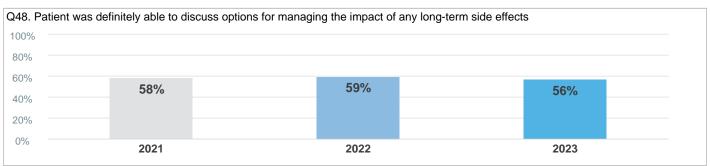
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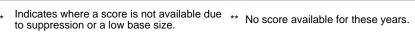




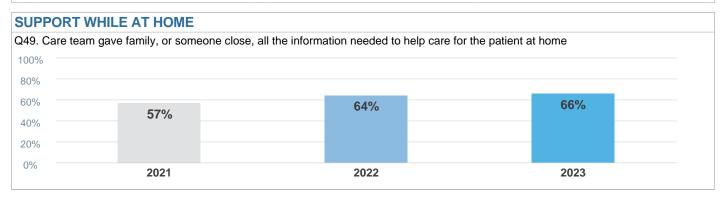


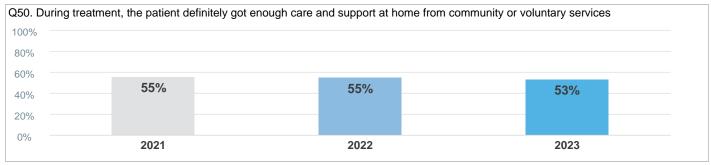


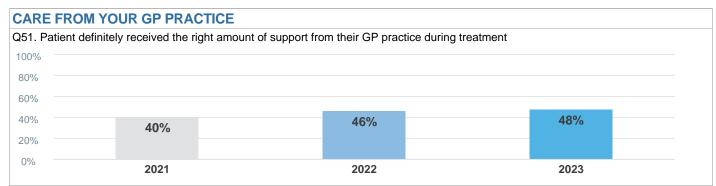


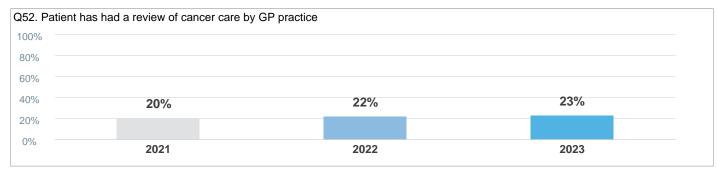


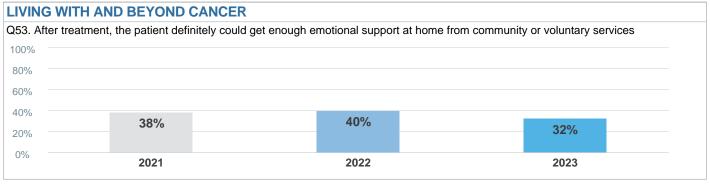
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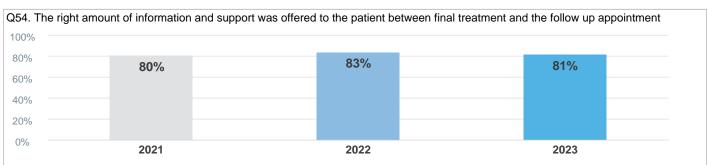


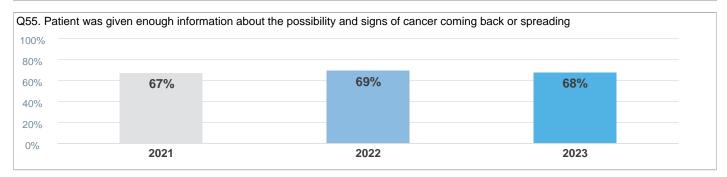


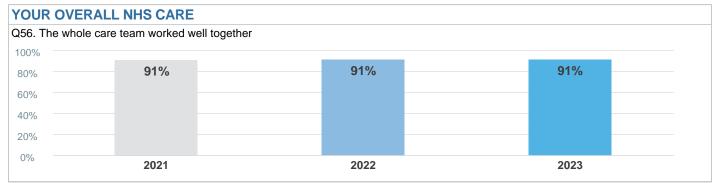


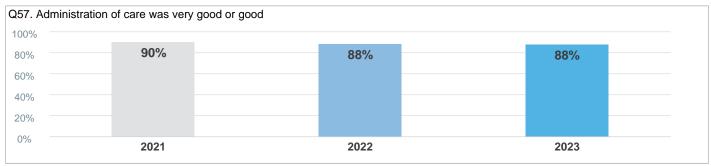


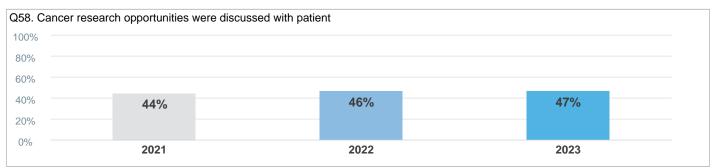


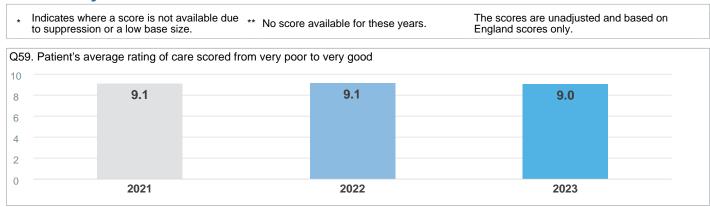












Trust expected range summary

Data labels relate to the number of scores that fell below, within and above the expected range

Number of scores below the lower expected range

Number of scores between the upper and lower expected ranges

Number of scores above the upper expected range

Trust		Expected range classification		
REM	Liverpool University Hospitals NHS Foundation Trust		34	27
RJN	East Cheshire NHS Trust		54	5
RVY	Southport and Ormskirk Hospital NHS Trust	1	55	5
RBL	Wirral University Teaching Hospital NHS Foundation Trust		58	3
RBN	St Helens and Knowsley Teaching Hospitals NHS Trust	2	57	2
RET	The Walton Centre NHS Foundation Trust	14		
REP	Liverpool Women's NHS Foundation Trust	1	56	
RBT	Mid Cheshire Hospitals NHS Foundation Trust	2	59	
RBQ	Liverpool Heart and Chest Hospital NHS Foundation Trust	5	53	1
REN	The Clatterbridge Cancer Centre NHS Foundation Trust	5	53	1
RJR	Countess of Chester Hospital NHS Foundation Trust	5	55	1
RWW	Warrington and Halton Teaching Hospitals NHS Foundation Trust	4	57	

Cancer Patient Experience Survey 2023 Cheshire and Merseyside Cancer Alliance

ICB expected range summary

Data labels relate to the number of scores that fell below, within and above the expected range

Number of scores below the lower expected range

Number of scores between the upper and lower expected ranges

Number of scores above the upper expected range

ICB

Expected range classification

QYG NHS Cheshire and Merseyside Integrated Care Board