

# **Cancer Patient Experience Survey**

2023 Results

# **North Central London Cancer Alliance**

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

### Cancer Patient Experience Survey 2023 North Central London Cancer Alliance

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# **Executive summary**

### **Questions above expected range**

	Case			
	2023 score	Lower expected range	Upper expected range	England score
Q58. Cancer research opportunities were discussed with patient	56%	36%	54%	45%

### **Questions below expected range**

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	2023 score	Lower expected range	Upper expected range	England score
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	79%	81%	86%	83%
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	76%	81%	78%
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	74%	78%	84%	81%
Q16. Patient was told they could go back later for more information about their diagnosis	80%	81%	87%	84%
Q18. Patient found it very or quite easy to contact their main contact person	79%	80%	89%	84%
Q20. Treatment options were explained in a way the patient could completely understand	79%	80%	85%	82%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	71%	72%	80%	76%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	74%	75%	83%	79%
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	72%	72%	77%	74%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	45%	46%	59%	52%
Q51. Patient definitely received the right amount of support from their GP practice during treatment	38%	42%	51%	46%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	26%	26%	38%	32%

### 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.

# Cancer Patient Experience Survey 2023 North Central London Cancer Alliance

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 <a href="www.ncpes.co.uk">www.ncpes.co.uk</a>. For all other outputs at alliance level, please see the Excel tables and dashboards at <a href="www.ncpes.co.uk">www.ncpes.co.uk</a>.

## **Response rate**

### **Overall response rate**

1,396 patients responded out of a total of 3,331 patients, resulting in a response rate of 42%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	3,547	3,331	1,396	42%
National	129,231	121,121	63,438	52%

### Respondents by survey type

	Number of respondents
Paper	1,076
Online	320
Phone	0
Translation service	0
Total	1,396

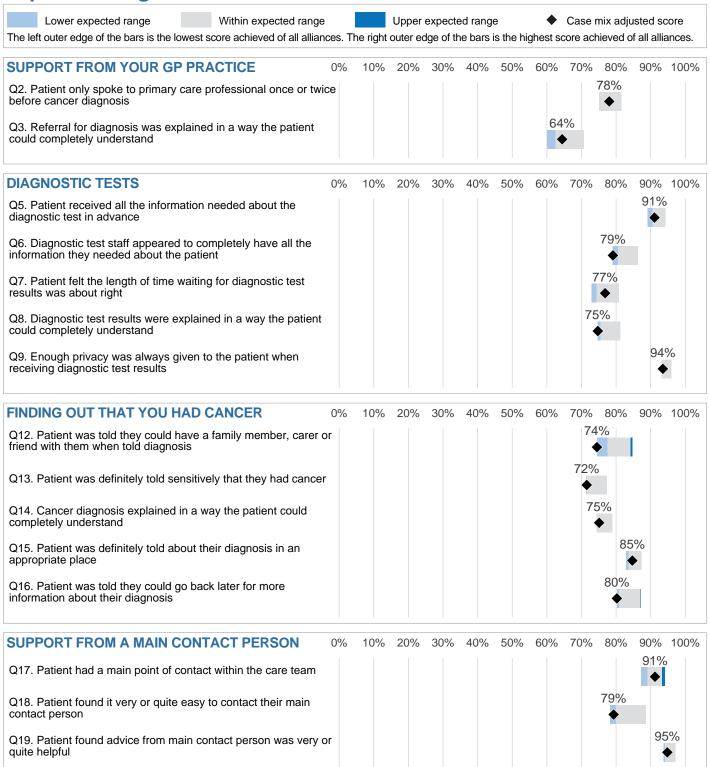
### Respondents by tumour group

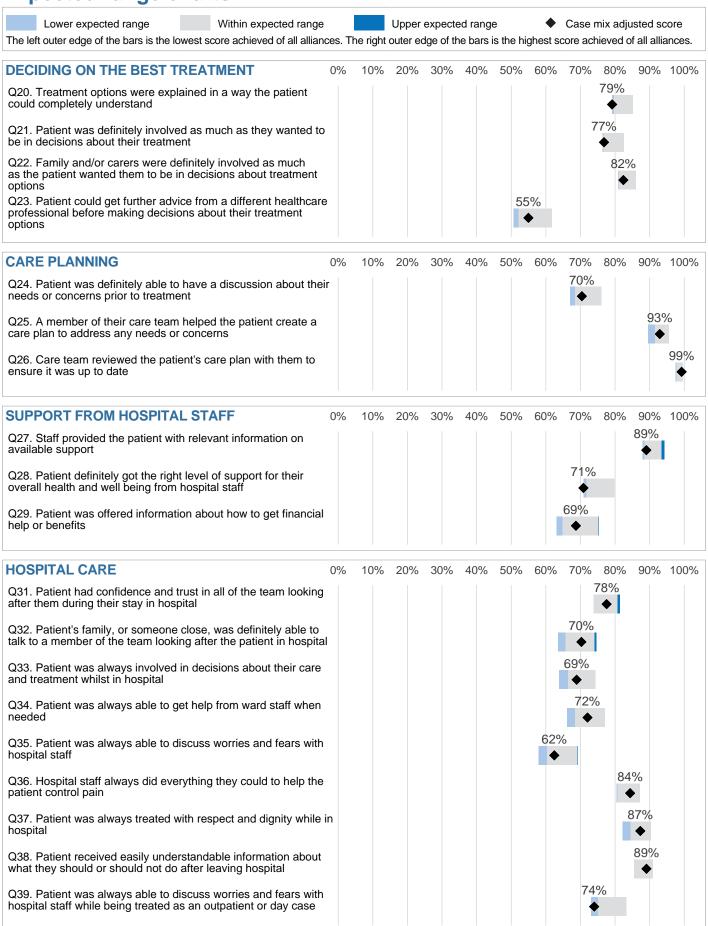
	Number of respondents
Brain / CNS	4
Breast	366
Colorectal / LGT	126
Gynaecological	60
Haematological	173
Head and neck	28
Lung	86
Prostate	158
Sarcoma	12
Skin	32
Upper gastro	58
Urological	115
Other	178
Total	1,396

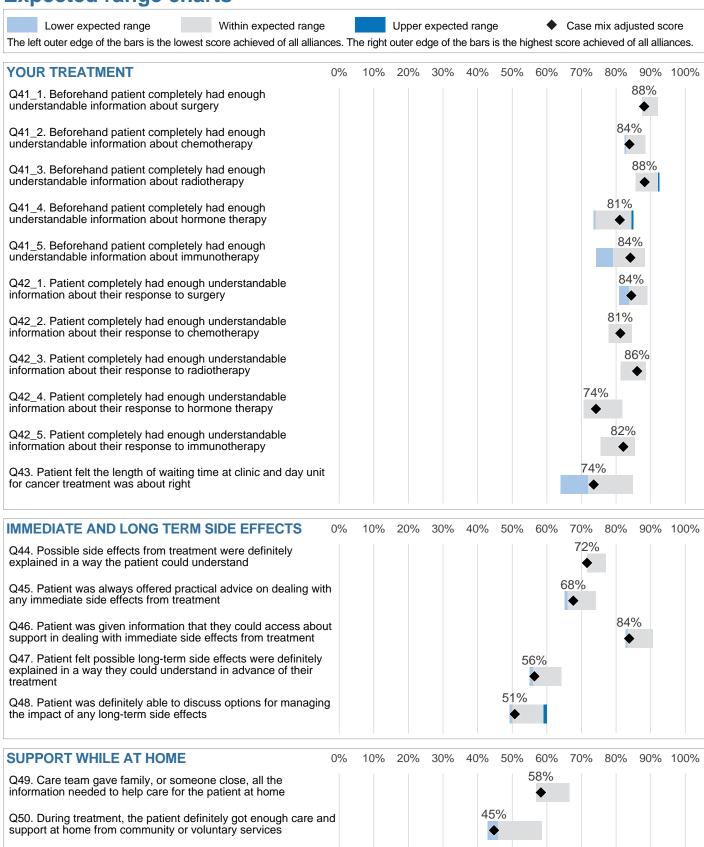
## Respondents by ethnicity

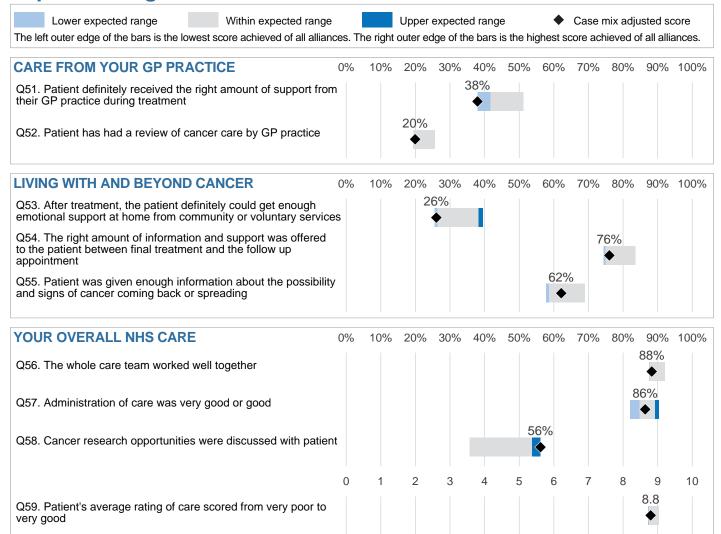
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	703
Irish	43
Gypsy or Irish Traveller	*
Roma	*
Any other White background	168
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	6
White and Black African	10
White and Asian	8
Any other Mixed / multiple ethnic background	7
Asian or Asian British	
Indian	34
Pakistani	13
Bangladeshi	7
Chinese	23
Any other Asian background	30
Black / African / Caribbean / Black British	
African	62
Caribbean	57
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	10
Any other ethnic group	27
Not given	
Not given	181
Total	1,396

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









Adjusted score below lower

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

	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	575	74%	632	77%			78%	75%	82%	78%		
Q3. Referral for diagnosis was explained in a way the patient could completely understand	784	64%	854	64%		<b>A</b>	64%	62%	71%	67%		

DIAGNOSTIC TESTS			Unadjust	ted score		Case n				
	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	942	91%	1048	91%			91%	91%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	1004	79%	1111	77%			79%	81%	86%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	1001	81%	1129	76%		•	77%	74%	81%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	1009	76%	1130	73%			75%	76%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	1015	94%	1125	93%			94%	93%	96%	95%

FINDING OUT THAT YOU HAD CANCER			Unadjus	ted score	Case n					
	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	1145	70%	1240	75%	<b>A</b>	<b>A</b>	74%	78%	84%	81%
Q13. Patient was definitely told sensitively that they had cancer	1232	69%	1347	72%			72%	71%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	1240	75%	1362	74%			75%	74%	79%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	1234	84%	1355	85%			85%	84%	87%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	1078	82%	1161	80%			80%	81%	87%	84%

	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q17. Patient had a main point of contact within the care team	1205	94%	1320	91%			91%	89%	93%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	1061	78%	1144	78%			79%	80%	89%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	1091	95%	1167	95%			95%	94%	97%	96%	

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

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

\*\* No score available for 2022.

			Unadjust	ted score	:S		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	1174	80%	1286	78%			79%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1228	74%	1351	75%			77%	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	982	74%	1081	81%	<b>A</b>	<b>A</b>	82%	81%	86%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	806	55%			55%	52%	62%	57%

	Unadjusted scores							Case mix adjusted scores			
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	1105	69%	1209	70%			70%	68%	76%	72%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	693	93%	710	93%			93%	92%	96%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	561	99%	573	99%			99%	98%	100%	99%	

			Unadjust	ed 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	1020	89%	1128	89%			89%	89%	94%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1232	70%	1345	70%			71%	72%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	694	65%	779	68%			69%	65%	75%	70%

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

\*\* No score available for 2022.

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper
expected range

			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	557	76%	567	77%			78%	74%	81%	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	432	60%	462	71%	<b>A</b>	•	70%	66%	74%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	544	67%	551	68%			69%	66%	74%	70%
Q34. Patient was always able to get help from ward staff when needed	541	68%	554	73%			72%	68%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	522	57%	529	62%			62%	60%	69%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	485	82%	508	84%			84%	81%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	554	83%	565	87%			87%	84%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	540	88%	552	89%			89%	86%	91%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	1089	68%	1214	72%			74%	75%	83%	79%

			Unadjus	ted score	S		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	589	84%	655	87%			88%	88%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	582	82%	626	84%			84%	83%	88%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	333	86%	364	88%			88%	86%	92%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	218	77%	232	81%			81%	74%	85%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	172	86%	247	84%			84%	79%	88%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	644	84%			84%	84%	89%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	614	81%			81%	78%	85%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	366	86%			86%	81%	89%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	223	73%			74%	71%	82%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	244	82%			82%	76%	86%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1206	70%	1295	72%			74%	72%	85%	78%

Adjusted score below lower

|--|

			Unadjust	ted score	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	1186	70%	1276	71%			72%	72%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1122	64%	1201	67%			68%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	872	81%	920	83%			84%	83%	91%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	1106	55%	1215	57%			56%	56%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	947	50%	1064	50%			51%	50%	59%	55%

			Unadjust	ted score	Case n					
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	788	54%	858	58%		<b>A</b>	58%	57%	66%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	533	43%	558	43%			45%	46%	59%	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	717	43%	761	37%			38%	42%	51%	46%
Q52. Patient has had a review of cancer care by GP practice	1163	19%	1257	21%			20%	20%	26%	23%

			Unadjus	ed score	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	320	24%	359	25%			26%	26%	38%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	541	73%	615	74%			76%	75%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	983	59%	1068	61%			62%	59%	69%	64%

			Unadjus	ted score	Case n					
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	1149	87%	1244	89%			88%	88%	92%	90%
Q57. Administration of care was very good or good	1216	85%	1334	87%			86%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	788	52%	860	56%			56%	36%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	1189	8.7	1317	8.7			8.8	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	88%	84%	79%	65%	69%	48%	77%	*	81%	63%	74%	70%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	77%	66%	50%	57%	63%	46%	70%	55%	58%	53%	51%	63%	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	*	88%	94%	91%	93%	73%	93%	91%	*	93%	95%	86%	93%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	76%	85%	73%	78%	54%	74%	83%	60%	78%	76%	79%	75%	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	73%	82%	85%	82%	58%	75%	76%	60%	61%	89%	77%	74%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	70%	80%	69%	76%	75%	73%	69%	60%	83%	81%	76%	72%	73%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	93%	95%	92%	95%	80%	93%	95%	90%	93%	96%	93%	90%	93%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	78%	87%	72%	72%	56%	81%	69%	64%	57%	82%	63%	75%	75%
Q13. Patient was definitely told sensitively that they had cancer	*	76%	77%	78%	70%	79%	77%	68%	50%	63%	66%	69%	65%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	76%	79%	78%	71%	79%	73%	80%	58%	74%	69%	75%	67%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	91%	90%	86%	77%	85%	87%	81%	92%	83%	84%	83%	83%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	*	85%	78%	82%	76%	93%	84%	84%	60%	83%	75%	77%	72%	80%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	94%	93%	95%	93%	83%	95%	87%	83%	81%	95%	85%	89%	91%
Q18. Patient found it very or quite easy to contact their main contact person	*	76%	80%	92%	81%	67%	84%	68%	60%	83%	90%	79%	78%	78%
Q19. Patient found advice from main contact person was very or quite helpful	*	95%	95%	98%	94%	90%	96%	96%	*	88%	98%	93%	92%	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	*	78%	86%	80%	79%	80%	83%	72%	58%	84%	79%	80%	75%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	79%	79%	83%	74%	81%	80%	75%	67%	72%	71%	70%	71%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	79%	81%	83%	79%	88%	88%	84%	*	85%	83%	78%	79%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	62%	60%	69%	51%	41%	63%	58%	*	31%	39%	38%	52%	55%

CARE PLANNING							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	70%	76%	75%	70%	56%	74%	66%	55%	58%	75%	67%	69%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	93%	100%	95%	69%	92%	90%	*	*	97%	96%	92%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	97%	100%	100%	100%	*	100%	100%	*	*	100%	100%	100%	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%	83%	94%	89%	78%	92%	88%	*	72%	88%	84%	86%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	69%	67%	80%	74%	50%	72%	73%	58%	60%	71%	73%	68%	70%
Q29. Patient was offered information about how to get financial help or benefits	*	76%	64%	68%	79%	53%	78%	49%	*	*	69%	48%	63%	68%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	73%	71%	86%	81%	53%	75%	87%	*	*	80%	85%	78%	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	*	59%	71%	74%	79%	50%	72%	77%	*	*	81%	77%	67%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	59%	62%	66%	77%	82%	71%	66%	*	*	84%	73%	70%	68%
Q34. Patient was always able to get help from ward staff when needed	*	62%	72%	71%	87%	47%	71%	76%	*	*	74%	84%	72%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	48%	59%	69%	66%	41%	79%	76%	*	*	57%	75%	53%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	*	82%	81%	88%	84%	67%	81%	85%	*	*	95%	89%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	*	78%	87%	81%	93%	83%	86%	91%	*	*	100%	90%	87%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	83%	89%	90%	90%	82%	91%	93%	*	*	92%	95%	83%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	69%	74%	74%	76%	55%	76%	75%	73%	57%	67%	76%	71%	72%

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	*	90%	86%	91%	89%	72%	93%	88%	*	70%	83%	94%	85%	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	82%	86%	88%	83%	*	88%	85%	*	*	81%	92%	86%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	88%	93%	88%	88%	73%	86%	80%	*	*	*	*	100%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	79%	*	*	*	*	*	82%	*	*	*	*	78%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	82%	75%	*	85%	*	94%	*	*	90%	60%	78%	88%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	88%	86%	81%	67%	79%	90%	82%	*	58%	79%	93%	80%	84%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	77%	85%	78%	80%	*	84%	81%	*	*	86%	88%	86%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	84%	100%	88%	88%	91%	86%	78%	*	*	*	*	91%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	71%	*	*	*	*	*	80%	*	*	*	*	71%	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	76%	82%	*	85%	*	85%	*	*	*	82%	78%	90%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	65%	78%	64%	72%	75%	72%	79%	75%	77%	78%	81%	70%	72%

IMMEDIATE AND LONG TERM SIDE EFFECT	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	*	69%	71%	78%	74%	60%	74%	71%	45%	69%	75%	75%	71%	71%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	63%	67%	82%	69%	54%	68%	65%	55%	75%	68%	70%	72%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	85%	85%	89%	78%	71%	88%	76%	*	88%	81%	83%	83%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	57%	61%	52%	54%	64%	52%	62%	45%	52%	64%	65%	51%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	48%	52%	51%	49%	57%	46%	50%	30%	56%	57%	63%	50%	50%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Sar Sar Pro Urol ga ga											All		
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	48%	60%	63%	59%	62%	65%	56%	*	67%	68%	72%	56%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	35%	51%	32%	40%	*	54%	36%	*	*	56%	56%	43%	43%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	34%	39%	36%	34%	31%	30%	51%	*	56%	45%	38%	34%	37%
Q52. Patient has had a review of cancer care by GP practice	*	23%	27%	22%	19%	23%	15%	24%	36%	33%	19%	20%	15%	21%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS  Breast  Colorectal / LGT  Gynaecological  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	*	25%	24%	20%	30%	*	32%	22%	*	*	18%	32%	23%	25%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	71%	75%	79%	81%	50%	65%	72%	*	84%	81%	79%	79%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	61%	55%	64%	70%	54%	69%	49%	55%	76%	56%	63%	58%	61%

YOUR OVERALL NHS CARE							Tumo	our gro	oup					
	Brain / CNS Breast Colorectal / LGT Gynaecological Haematological Head and neck Lung Prostate Sarcoma Skin Upper gastro Urological Other											All		
Q56. The whole care team worked well together	*	91%	87%	94%	90%	77%	90%	89%	80%	83%	90%	85%	84%	89%
Q57. Administration of care was very good or good	*	88%	88%	93%	90%	68%	87%	83%	82%	75%	93%	87%	84%	87%
Q58. Cancer research opportunities were discussed with patient	*	52%	64%	39%	70%	44%	65%	62%	*	35%	43%	44%	59%	56%
Q59. Patient's average rating of care scored from very poor to very good	*	8.7	8.5	9.1	9.0	8.0	8.8	8.6	8.8	8.3	8.9	8.8	8.6	8.7

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	*	80%	82%	78%	71%	75%	82%	76%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	72%	66%	66%	60%	67%	57%	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	*	91%	88%	85%	91%	92%	91%	90%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	58%	70%	74%	80%	76%	81%	78%	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	75%	57%	65%	72%	78%	84%	86%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	83%	67%	66%	72%	72%	79%	75%	73%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	75%	98%	86%	94%	94%	93%	95%	93%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	58%	75%	63%	72%	77%	79%	82%	75%
Q13. Patient was definitely told sensitively that they had cancer	*	77%	70%	69%	67%	72%	77%	74%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	69%	76%	67%	74%	74%	79%	74%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	85%	82%	81%	84%	85%	87%	92%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	*	92%	78%	80%	80%	83%	79%	71%	80%

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	*	92%	84%	91%	92%	93%	91%	85%	91%
Q18. Patient found it very or quite easy to contact their main contact person	*	67%	57%	81%	76%	80%	79%	85%	78%
Q19. Patient found advice from main contact person was very or quite helpful	*	83%	93%	96%	93%	96%	93%	97%	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	*	85%	77%	72%	80%	77%	81%	79%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	77%	79%	74%	76%	76%	75%	73%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	83%	68%	76%	82%	81%	84%	82%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	60%	61%	48%	51%	59%	57%	55%	55%

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	*	67%	61%	65%	70%	69%	74%	74%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	88%	92%	93%	93%	92%	100%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	96%	99%	99%	99%	100%	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	*	100%	92%	88%	88%	92%	87%	79%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	62%	56%	63%	69%	71%	74%	77%	70%
Q29. Patient was offered information about how to get financial help or benefits	*	90%	76%	74%	68%	69%	58%	61%	68%

HOSPITAL CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	66%	70%	77%	77%	83%	81%	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	*	*	68%	67%	68%	70%	79%	74%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	62%	64%	66%	71%	70%	77%	68%
Q34. Patient was always able to get help from ward staff when needed	*	70%	70%	61%	74%	73%	77%	70%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	62%	54%	61%	59%	70%	61%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	*	70%	75%	78%	86%	85%	89%	68%	84%
Q37. Patient was always treated with respect and dignity while in hospital	*	80%	90%	82%	86%	86%	89%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	70%	90%	89%	95%	83%	89%	90%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	55%	75%	65%	75%	69%	76%	72%	72%

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	*	*	82%	80%	88%	89%	89%	89%	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	77%	85%	86%	82%	85%	81%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	76%	86%	92%	88%	90%	85%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	72%	88%	73%	81%	86%	67%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	64%	74%	92%	83%	85%	80%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	85%	75%	83%	87%	86%	76%	84%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	77%	85%	83%	79%	81%	77%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	80%	84%	87%	82%	94%	84%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	71%	85%	61%	70%	78%	73%	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	60%	73%	85%	83%	86%	64%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	55%	67%	66%	71%	69%	79%	79%	72%

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	*	73%	76%	74%	72%	71%	70%	64%	71%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	50%	69%	65%	71%	66%	68%	64%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	73%	84%	86%	83%	83%	82%	77%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	62%	61%	57%	60%	55%	57%	53%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	67%	61%	45%	50%	48%	53%	55%	50%

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	*	50%	49%	51%	53%	61%	60%	65%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	37%	32%	40%	43%	49%	51%	43%

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	*	*	36%	42%	34%	34%	43%	43%	37%
Q52. Patient has had a review of cancer care by GP practice	*	33%	27%	28%	18%	23%	22%	13%	21%

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	*	*	10%	23%	23%	22%	31%	33%	25%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	70%	59%	75%	74%	80%	87%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	56%	52%	63%	63%	64%	49%	61%

YOUR OVERALL NHS CARE			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	92%	79%	87%	87%	89%	90%	92%	89%
Q57. Administration of care was very good or good	*	92%	85%	84%	86%	86%	88%	90%	87%
Q58. Cancer research opportunities were discussed with patient	*	*	49%	51%	57%	62%	56%	44%	56%
Q59. Patient's average rating of care scored from very poor to very good	*	8.5	8.1	8.5	8.7	8.8	8.8	9.0	8.7

SUPPORT FROM YOUR GP PRACTICE	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	77%	75%	*	*	*	80%	77%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	66%	64%	*	*	*	48%	64%				

DIAGNOSTIC TESTS			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	90%	91%	*	*	*	91%	91%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	76%	79%	*	*	*	80%	77%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	74%	79%	*	*	*	80%	76%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	71%	77%	*	*	*	71%	73%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	91%	95%	*	*	*	95%	93%	

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	75%	75%	*	*	*	73%	75%
Q13. Patient was definitely told sensitively that they had cancer	71%	73%	*	*	*	66%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	72%	78%	*	*	*	76%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	84%	*	*	*	89%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	79%	82%	*	*	*	75%	80%

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%	87%	*	*	*	92%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	77%	80%	*	*	*	75%	78%	
Q19. Patient found advice from main contact person was very or quite helpful	94%	96%	*	*	*	95%	95%	

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	78%	79%	*	*	*	76%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	77%	*	*	*	77%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	84%	*	*	*	80%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	55%	55%	*	*	*	62%	55%

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	69%	72%	*	*	*	60%	70%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	93%	*	*	*	97%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	*	*	*	100%	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	90%	88%	*	*	*	79%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	68%	75%	*	*	*	67%	70%	
Q29. Patient was offered information about how to get financial help or benefits	72%	61%	*	*	*	63%	68%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	75%	81%	*	*	*	77%	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	66%	78%	*	*	*	65%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	67%	72%	*	*	*	50%	68%
Q34. Patient was always able to get help from ward staff when needed	69%	79%	*	*	*	50%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	56%	71%	*	*	*	42%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	85%	*	*	*	89%	84%
Q37. Patient was always treated with respect and dignity while in hospital	84%	92%	*	*	*	71%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	92%	*	*	*	78%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	69%	76%	*	*	*	71%	72%

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	87%	88%	*	*	*	88%	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	82%	86%	*	*	*	89%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	87%	*	*	*	88%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	80%	82%	*	*	*	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	79%	89%	*	*	*	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	82%	87%	*	*	*	82%	84%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	85%	*	*	*	75%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	88%	83%	*	*	*	76%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	73%	75%	*	*	*	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	77%	87%	*	*	*	*	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	67%	79%	*	*	*	73%	72%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	70%	74%	*	*	*	67%	71%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	65%	71%	*	*	*	63%	67%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	81%	*	*	*	79%	83%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	53%	63%	*	*	*	56%	57%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	46%	56%	*	*	*	57%	50%	

SUPPORT WHILE AT HOME			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	52%	67%	*	*	*	53%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	37%	51%	*	*	*	45%	43%

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	34%	43%	*	*	*	31%	37%
Q52. Patient has had a review of cancer care by GP practice	21%	23%	*	*	*	17%	21%

LIVING WITH AND BEYOND CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	23%	32%	*	*	*	6%	25%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	72%	79%	*	*	*	62%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	59%	63%	*	*	*	61%	61%

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	89%	89%	*	*	*	87%	89%
Q57. Administration of care was very good or good	86%	87%	*	*	*	88%	87%
Q58. Cancer research opportunities were discussed with patient	55%	56%	*	*	*	74%	56%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.8	*	*	*	8.7	8.7

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	82%	50%	62%	65%	67%	73%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	79%	54%	66%	57%	54%	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	90%	87%	93%	85%	96%	93%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	78%	67%	71%	77%	79%	78%	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	77%	69%	69%	79%	63%	78%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	70%	66%	70%	64%	72%	73%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	77%	94%	96%	100%	92%	93%

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	75%	63%	69%	75%	81%	78%	75%	
Q13. Patient was definitely told sensitively that they had cancer	71%	77%	72%	74%	74%	71%	72%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	70%	76%	74%	78%	75%	74%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	84%	87%	91%	87%	89%	88%	85%	
Q16. Patient was told they could go back later for more information about their diagnosis	81%	64%	83%	82%	88%	76%	80%	

<b>SUPPORT FROM A MAIN CONTACT PERSO</b>	SON Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	91%	83%	96%	94%	85%	91%	91%
Q18. Patient found it very or quite easy to contact their main contact person	78%	78%	80%	76%	72%	80%	78%
Q19. Patient found advice from main contact person was very or quite helpful	94%	92%	95%	99%	89%	96%	95%

<b>DECIDING ON THE BEST TREATMENT</b>				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	78%	68%	76%	79%	88%	79%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	68%	74%	72%	86%	72%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	70%	82%	72%	88%	80%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	54%	55%	59%	55%	50%	60%	55%

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	70%	61%	71%	73%	72%	66%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	100%	96%	94%	84%	95%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	100%	100%	100%	100%	100%	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	88%	89%	88%	97%	90%	82%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	60%	69%	74%	76%	71%	70%
Q29. Patient was offered information about how to get financial help or benefits	70%	52%	67%	68%	65%	61%	68%

HOSPITAL CARE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	78%	61%	79%	79%	92%	74%	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	71%	57%	68%	83%	77%	64%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	69%	77%	60%	79%	61%	68%
Q34. Patient was always able to get help from ward staff when needed	74%	75%	79%	70%	86%	63%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	47%	60%	63%	69%	51%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	84%	71%	88%	82%	86%	81%	84%
Q37. Patient was always treated with respect and dignity while in hospital	87%	67%	89%	88%	100%	84%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	72%	84%	93%	93%	77%	89%
Q39. Patient was always able to discuss worries and ears with hospital staff while being treated as an outpatient or day case	74%	66%	60%	80%	67%	63%	72%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	87%	81%	90%	93%	92%	87%	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	81%	95%	87%	93%	94%	84%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	75%	93%	93%	*	90%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	80%	*	*	88%	*	87%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	81%	*	82%	87%	*	100%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	83%	73%	84%	89%	92%	85%	84%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	95%	83%	89%	76%	74%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	83%	86%	91%	*	83%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	74%	*	*	75%	*	77%	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	82%	*	67%	80%	*	90%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	73%	71%	62%	74%	68%	72%	72%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	71%	70%	70%	78%	65%	71%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	56%	61%	71%	69%	62%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	91%	80%	76%	90%	81%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	52%	54%	59%	72%	55%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	38%	43%	46%	50%	50%	50%

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	59%	56%	56%	57%	60%	54%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	47%	31%	40%	32%	61%	34%	43%

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	39%	14%	33%	41%	32%	39%	37%
Q52. Patient has had a review of cancer care by GP practice	19%	21%	27%	28%	27%	27%	21%

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	27%	*	20%	21%	*	25%	25%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	54%	82%	61%	77%	69%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	57%	61%	57%	66%	49%	61%

YOUR OVERALL NHS CARE							
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	88%	83%	89%	92%	94%	88%	89%
Q57. Administration of care was very good or good	86%	80%	85%	89%	83%	90%	87%
Q58. Cancer research opportunities were discussed with patient	54%	60%	60%	49%	69%	68%	56%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.1	8.5	8.7	8.3	8.7	8.7

# **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	69%	74%	81%	78%	81%	77%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	63%	63%	68%	68%	64%

DIAGNOSTIC TESTS			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	88%	89%	92%	95%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	75%	74%	76%	83%	83%	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	78%	71%	79%	76%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	73%	72%	72%	74%	80%	73%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	93%	92%	93%	93%	93%

FINDING OUT THAT YOU HAD CANCER			IMD q	uintile		
	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	78%	76%	71%	73%	76%	75%
Q13. Patient was definitely told sensitively that they had cancer	79%	69%	71%	70%	73%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	72%	74%	76%	74%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	81%	86%	89%	85%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	78%	80%	81%	75%	80%

SUPPORT FROM A MAIN CONTACT PERSON			IMD q			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q17. Patient had a main point of contact within the care team	90%	91%	93%	92%	88%	91%
Q18. Patient found it very or quite easy to contact their main contact person	79%	80%	76%	77%	80%	78%
Q19. Patient found advice from main contact person was very or quite helpful	94%	96%	94%	94%	94%	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	82%	77%	80%	76%	77%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	75%	72%	77%	78%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	80%	78%	82%	84%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	58%	51%	56%	55%	60%	55%

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	70%	68%	71%	68%	74%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	91%	92%	95%	93%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	98%	99%	99%	100%	99%

SUPPORT FROM HOSPITAL STAFF	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q27. Staff provided the patient with relevant information on available support	92% 86% 90% 88%		90%	89%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	69%	70%	67%	72%	70%
Q29. Patient was offered information about how to get financial help or benefits	69%	66%	69%	67%	68%	68%

HOSPITAL CARE			IMD qu	uintile	5.0					
	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	78%	73%	78%	83%	79%	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	66%	72%	72%	74%	68%	71%				
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	68%	66%	72%	67%	68%				
Q34. Patient was always able to get help from ward staff when needed	71%	73%	73%	75%	71%	73%				
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	63%	58%	63%	64%	62%				
Q36. Hospital staff always did everything they could to help the patient control pain	81%	83%	85%	85%	83%	84%				
Q37. Patient was always treated with respect and dignity while in hospital	88%	85%	85%	91%	88%	87%				
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	88%	91%	90%	87%	89%				
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	72%	71%	71%	71%	76%	72%				

# **IMD** quintile tables

YOUR TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	84%	87%	90%	89%	87%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	83%	80%	86%	83%	84%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	94%	89%	83%	86%	90%	88%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	87%	81%	81%	78%	76%	81%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	91%	76%	85%	86%	83%	84%	
Q42_1. Patient completely had enough understandable information about their response to surgery	86%	85%	84%	84%	79%	84%	
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	91%	78%	78%	83%	79%	81%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	89%	84%	87%	83%	85%	86%	
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	82%	77%	76%	69%	56%	73%	
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	86%	79%	81%	88%	72%	82%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	68%	74%	68%	75%	76%	72%	

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	ΓS	IMD quintile				
	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	75%	69%	73%	69%	73%	71%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	73%	67%	65%	67%	62%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	75%	82%	84%	87%	86%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	63%	57%	56%	55%	54%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	48%	51%	50%	48%	50%

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	60%	57%	53%	59%	62%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	40%	41%	35%	50%	55%	43%

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	35%	39%	39%	32%	43%	37%
Q52. Patient has had a review of cancer care by GP practice	25%	21%	20%	23%	16%	21%

# **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	23%	21%	22%	36%	26%	25%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	71%	71%	74%	82%	74%	74%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	61%	61%	62%	57%	61%

YOUR OVERALL NHS CARE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	89%	88%	87%	89%	91%	89%
Q57. Administration of care was very good or good	85%	87%	85%	88%	88%	87%
Q58. Cancer research opportunities were discussed with patient	60%	58%	58%	53%	48%	56%
Q59. Patient's average rating of care scored from very poor to very good	8.6	8.6	8.7	8.8	8.9	8.7

SUPPORT FROM YOUR GP PRACTICE		Long-term cor	ndition status				
	Yes No Not given All						
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	76%	77%					
Q3. Referral for diagnosis was explained in a way the patient could completely understand	64% 67% 54%						

DIAGNOSTIC TESTS		Long-term cond	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	91%	92%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	77%	78%	77%	77%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	75%	74%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	73%	74%	72%	73%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	92%	96%	93%

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	76%	72%	75%	75%
Q13. Patient was definitely told sensitively that they had cancer	72%	72%	66%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	76%	69%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	84%	84%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	79%	74%	80%

SUPPORT FROM A MAIN CONTACT PERSO	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	90%	93%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	79%	77%	75%	78%
Q19. Patient found advice from main contact person was very or quite helpful	94%	95%	94%	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	78%	79%	78%	78%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	76%	74%	75%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	83%	78%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	55%	54%	60%	55%

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%	69%	62%	70%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	92%	96%	93%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	100%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given A				
Q27. Staff provided the patient with relevant information on available support	88%	90%	85%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	71%	68%	70%	
Q29. Patient was offered information about how to get financial help or benefits	67%	71%	62%	68%	

HOSPITAL CARE		Long-term co	ondition 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	78%	77%	74%	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	68%	76%	69%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	68%	59%	68%
Q34. Patient was always able to get help from ward staff when needed	72%	76%	64%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	64%	55%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	84%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	86%	89%	79%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	92%	78%	89%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	70%	75%	72%	72%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	85%	84%	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	83%	86%	87%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	86%	88%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	79%	84%	82%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	85%	93%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	84%	79%	84%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	81%	79%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	89%	79%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	71%	79%	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	82%	81%	79%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	70%	76%	70%	72%

IMMEDIATE AND LONG TERM SIDE EFFECTS	3	Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	69%	76%	66%	71%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	66%	69%	64%	67%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	83%	83%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	55%	61%	57%	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	49%	51%	54%	50%

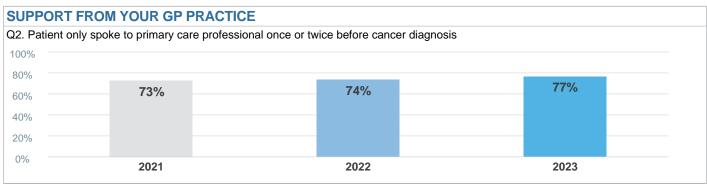
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	56%	59%	60%	58%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	41%	46%	40%	43%	

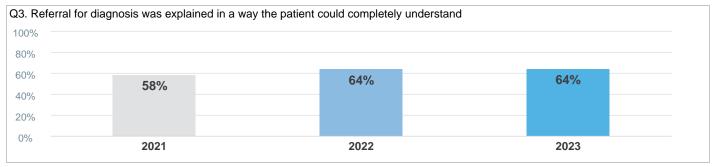
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	36%	41%	37%	37%	
Q52. Patient has had a review of cancer care by GP practice	20%	23%	20%	21%	

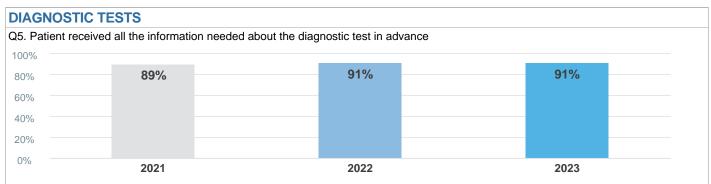
LIVING WITH AND BEYOND CANCER		Long-term con	Long-term condition status		
	Yes	No	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	24%	27%	28%	25%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	76%	70%	74%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	60%	64%	61%	

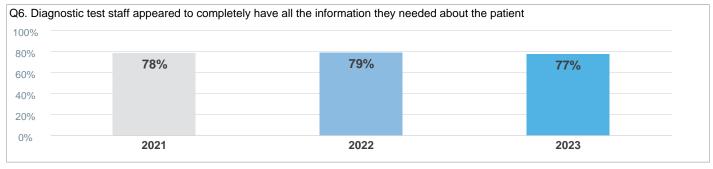
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	88%	89%	84%	89%
Q57. Administration of care was very good or good	86%	88%	86%	87%
Q58. Cancer research opportunities were discussed with patient	54%	60%	55%	56%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.8	8.7	8.7

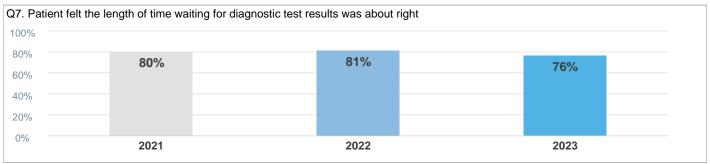




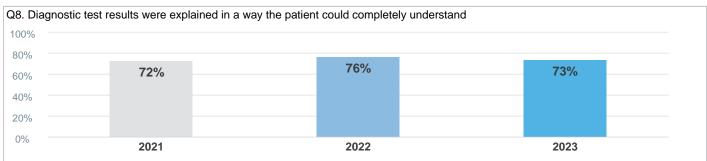


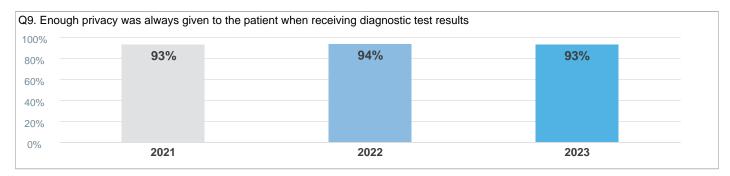


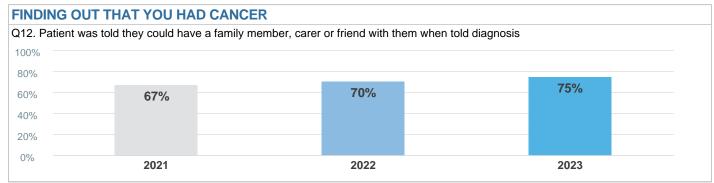


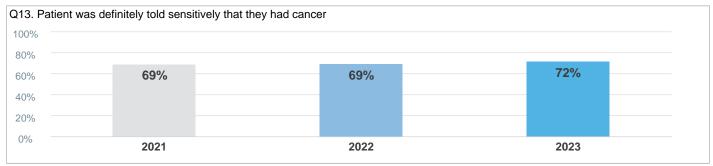


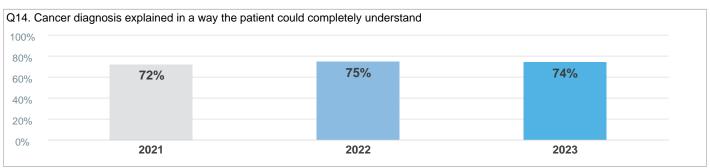


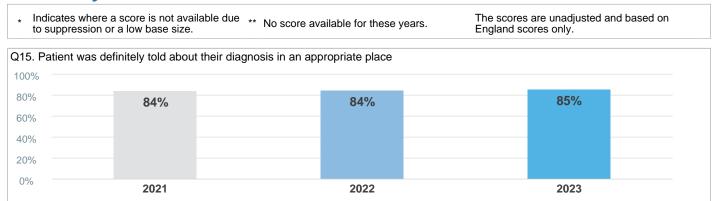


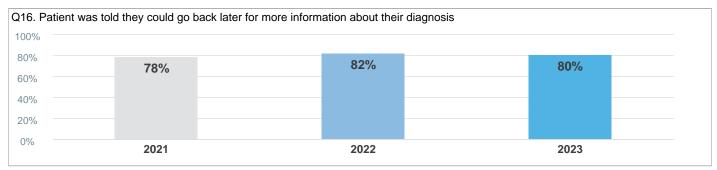


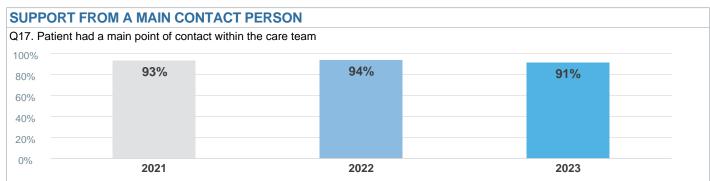


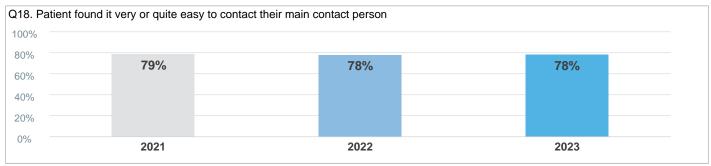


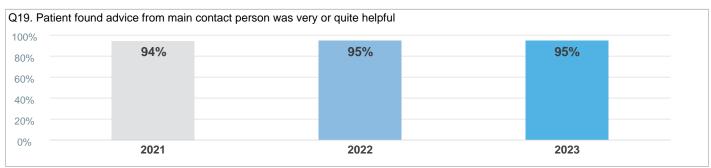




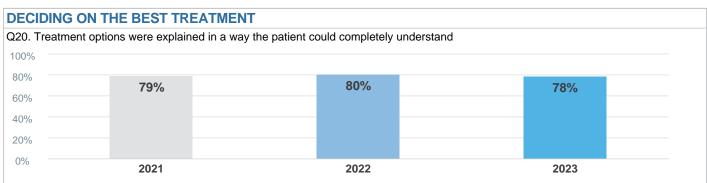


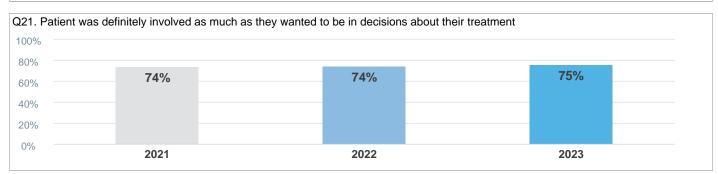


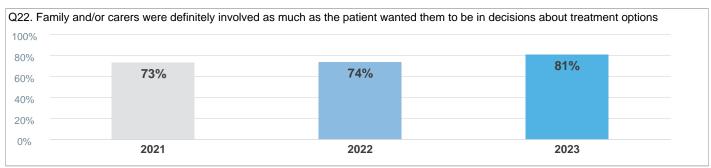


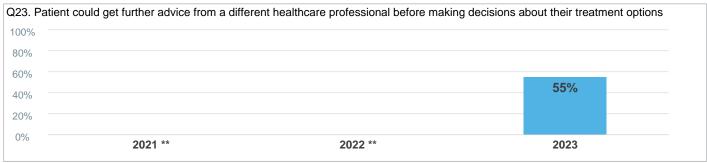


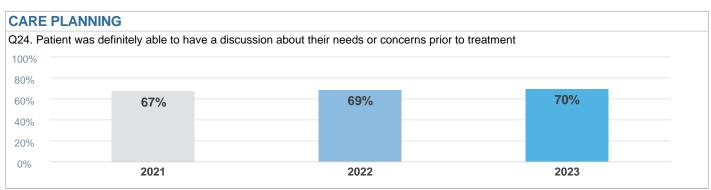






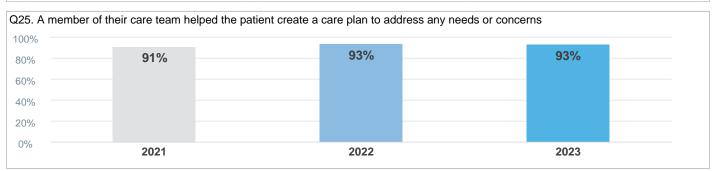


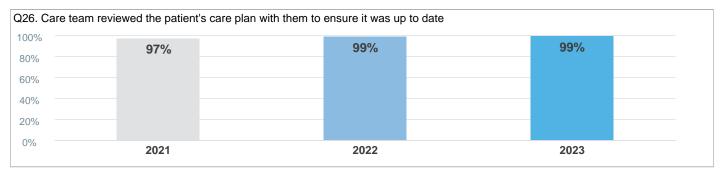


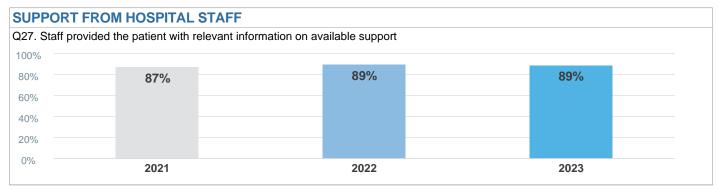


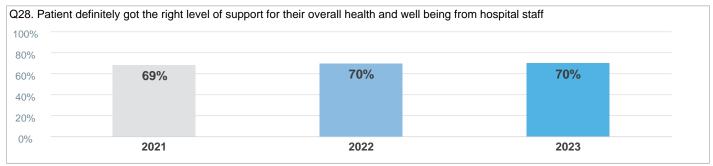


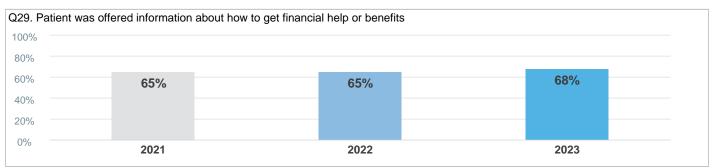
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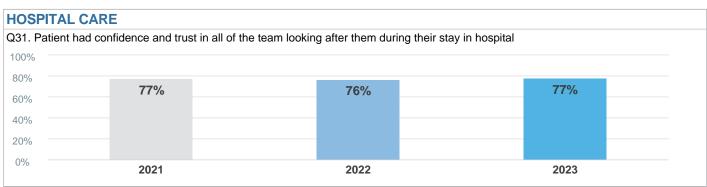


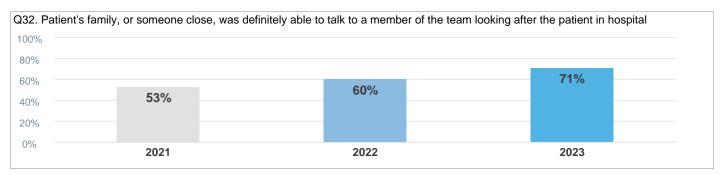


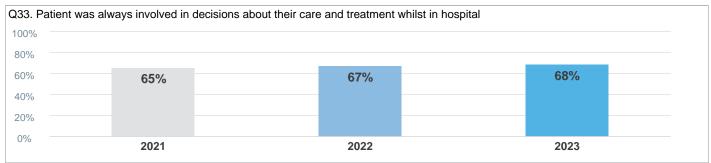


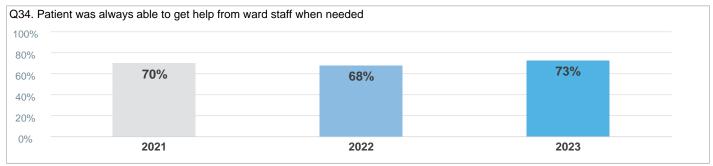


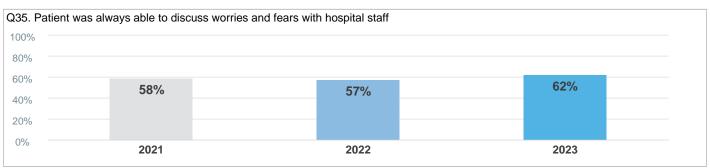










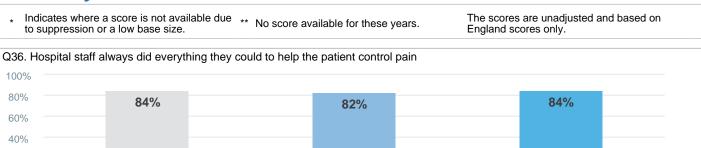


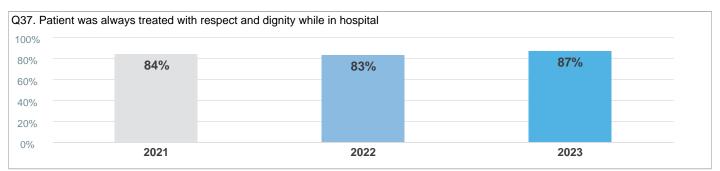
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#### Year on year charts

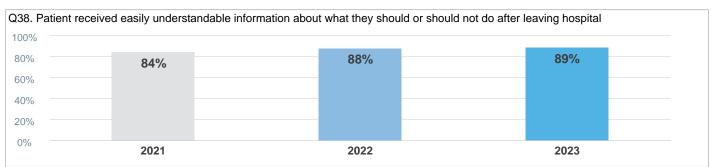
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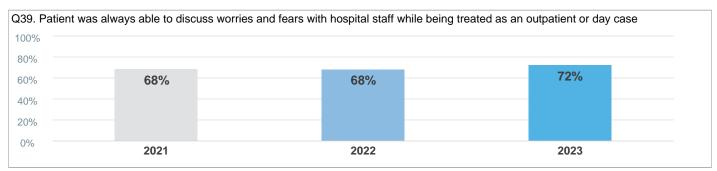
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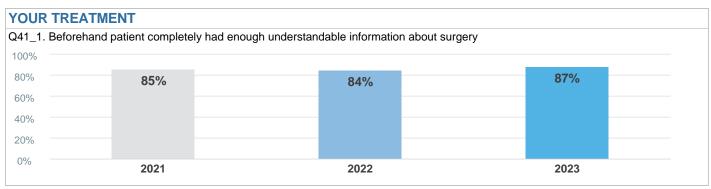




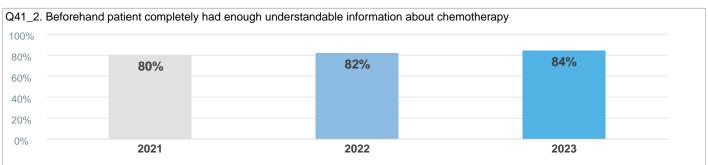
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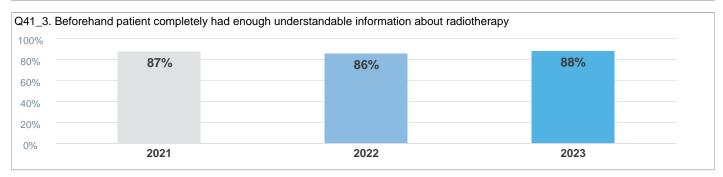


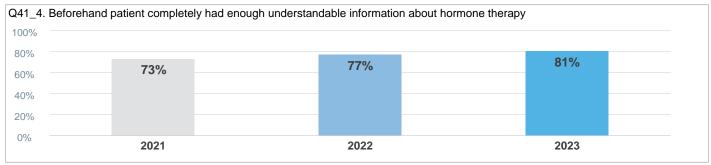


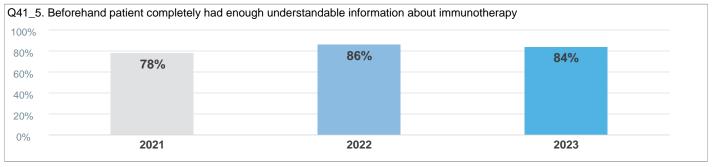


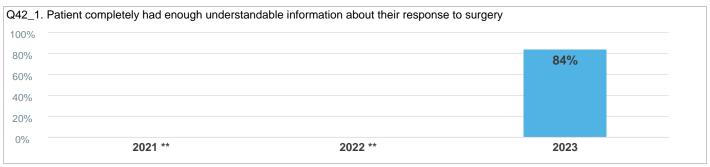




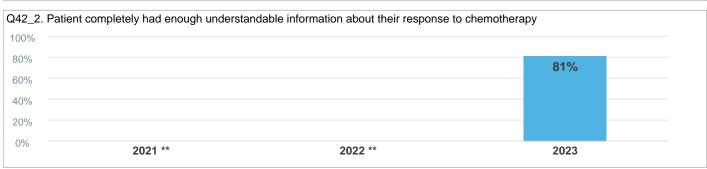


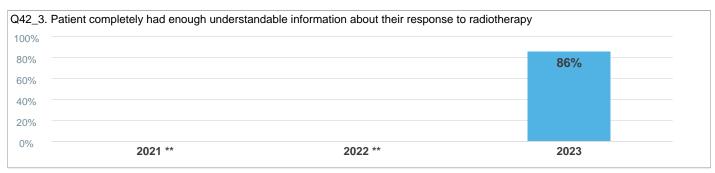


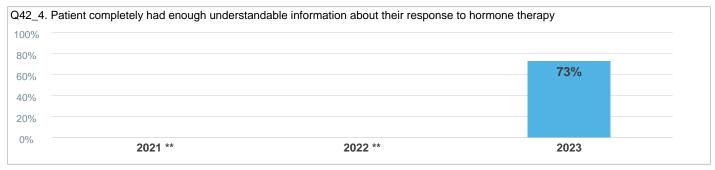


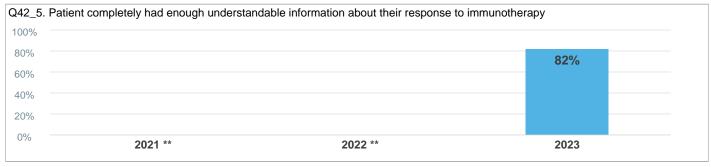


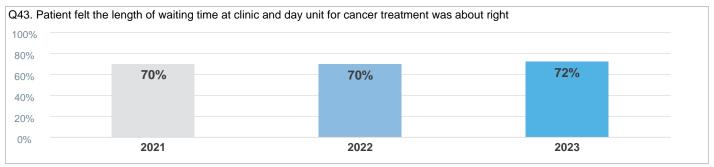




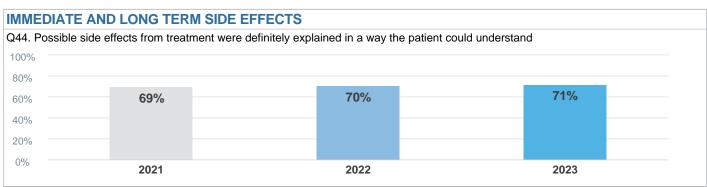


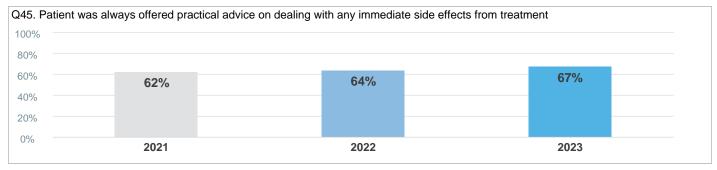


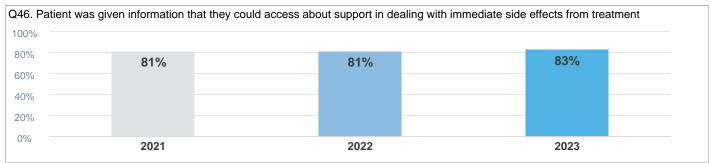


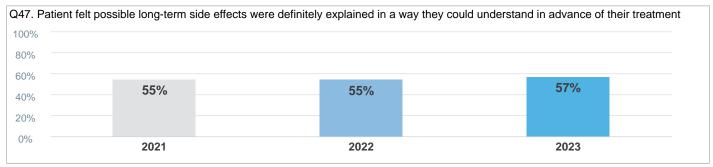


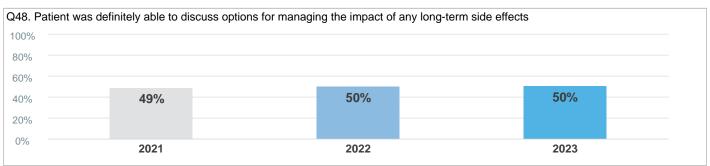


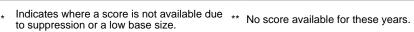




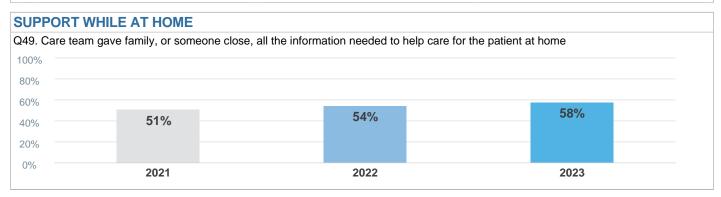


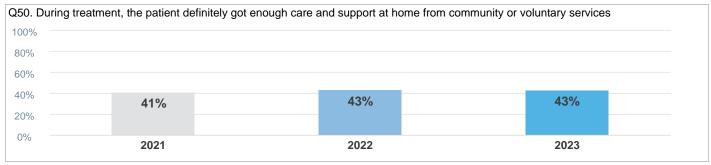


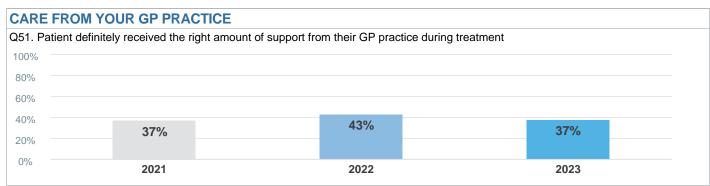


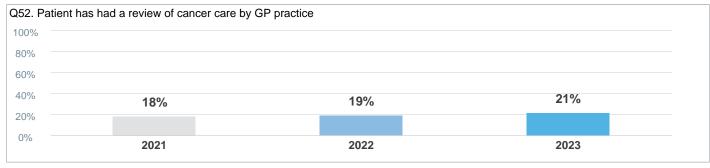


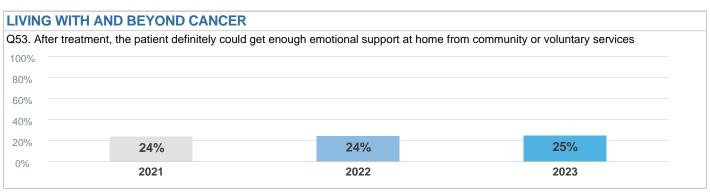
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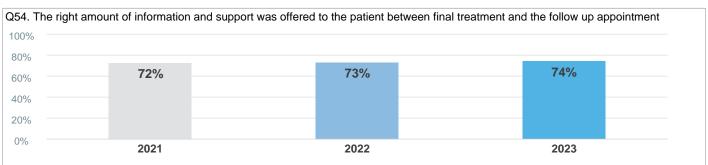


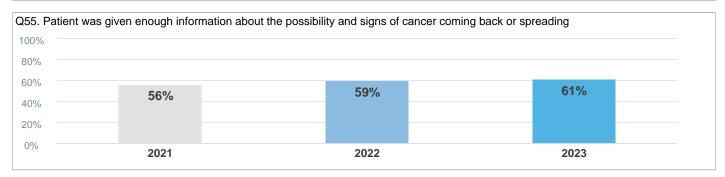


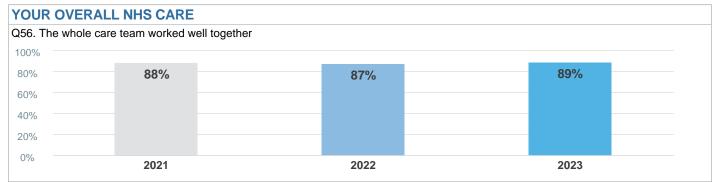


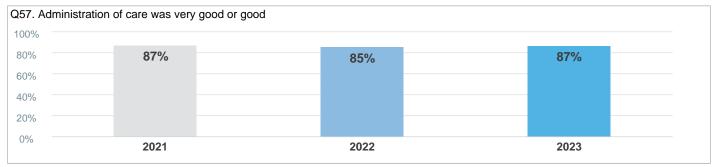


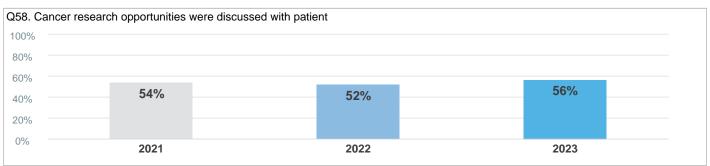


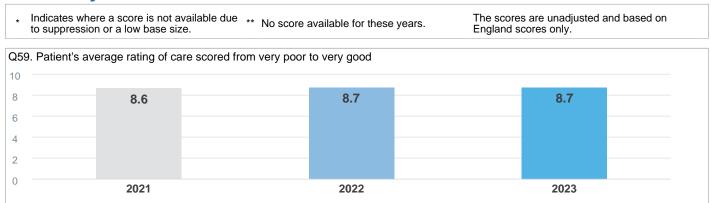












## **Trust expected range summary**

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		
RKE	Whittington Health NHS Trust	1	57	3
RAN	Royal National Orthopaedic Hospital NHS Trust	5	49	1
RAL	Royal Free London NHS Foundation Trust	6	54	1
RP6	Moorfields Eye Hospital NHS Foundation Trust	9	41	3
RRV	University College London Hospitals NHS Foundation Trust	15	42	4
RAP	North Middlesex University Hospital NHS Trust	13	48	

48

12

### **ICB** expected range summary

NHS North Central London Integrated Care Board

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