

Cancer Patient Experience Survey

2023 Results

Wessex Cancer Alliance

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

Cancer Patient Experience Survey 2023 Wessex Cancer Alliance

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Executive summary

Questions above expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	75%	80%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	75%	78%	77%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	84%	79%	84%	81%

Questions below expected range

	Case	Case mix adjusted scores			
	2023 score	Lower expected range	Upper expected range	England score	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	87%	91%	89%	

Introduction

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

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

Note on question comparability

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

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

How alliance and ICB results are generated

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

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

Case-mix adjustment

Both unadjusted and adjusted scores are presented in this report. Case-mix adjusted scores allow us to account for the impact that differing patient populations might have on results. By using the case-mix adjusted estimates we can obtain a greater understanding of how an alliance is performing given their

patient population. The factors taken into account in this case-mix adjustment are Male/Female/Non-binary/Other, age, ethnicity, deprivation, and cancer type.

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

Scoring methodology

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

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

Statistical significance

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

Suppression

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

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

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

Additional suppression

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

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

Understanding the results

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

Expected range charts

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

Alliances whose score is above the upper limit of the expected range (in the dark blue) are positive outliers, with a score statistically significantly higher than the national mean. This indicates that the alliance performs better than what alliances of the same size and demographics are expected to perform. The opposite is true if the score is below the lower limit of the expected range (in the light

blue); these are negative outliers. For scores within the expected range (in the grey), the score is what we would expect given the alliance's size and demographics.

Comparability tables

The comparability tables show the 2022 and 2023 unadjusted scores for this alliance for each scored question. The Change 2022-2023 and Change overall columns show whether the scores show a statistically significant variation between years. This is shown between 2022-2023 and as an overall between 2021-2023. An upwards arrow indicates a statistically significant decrease and no arrow indicates no statistically significant change.

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

Sub-group breakdowns

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

Tumour group tables

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

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

Trust expected range summary

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

ICB expected range summary

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

National level and England level data

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

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

Further information

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

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

Response rate

Overall response rate

3,686 patients responded out of a total of 6,343 patients, resulting in a response rate of 58%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	6,732	6,343	3,686	58%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	2,912
Online	772
Phone	1
Translation service	1
Total	3,686

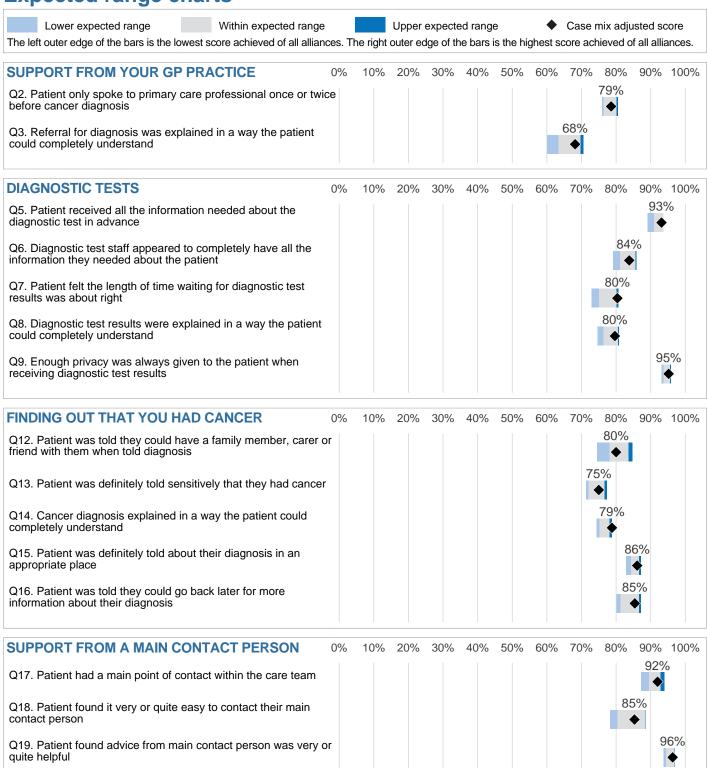
Respondents by tumour group

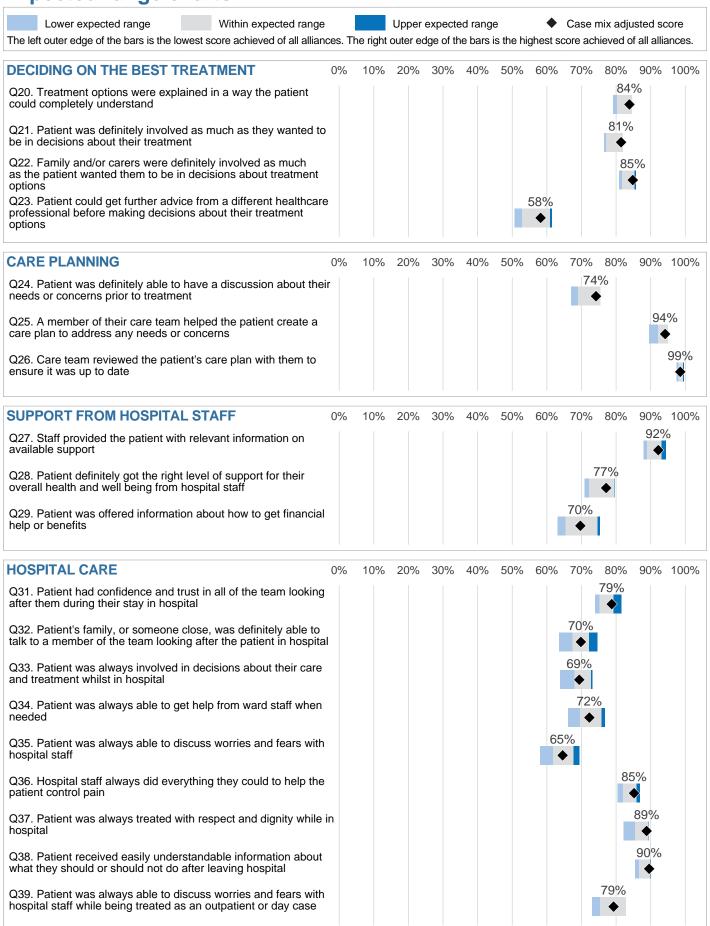
	Number of respondents
Brain / CNS	9
Breast	736
Colorectal / LGT	474
Gynaecological	167
Haematological	501
Head and neck	86
Lung	236
Prostate	552
Sarcoma	31
Skin	158
Upper gastro	177
Urological	301
Other	258
Total	3,686

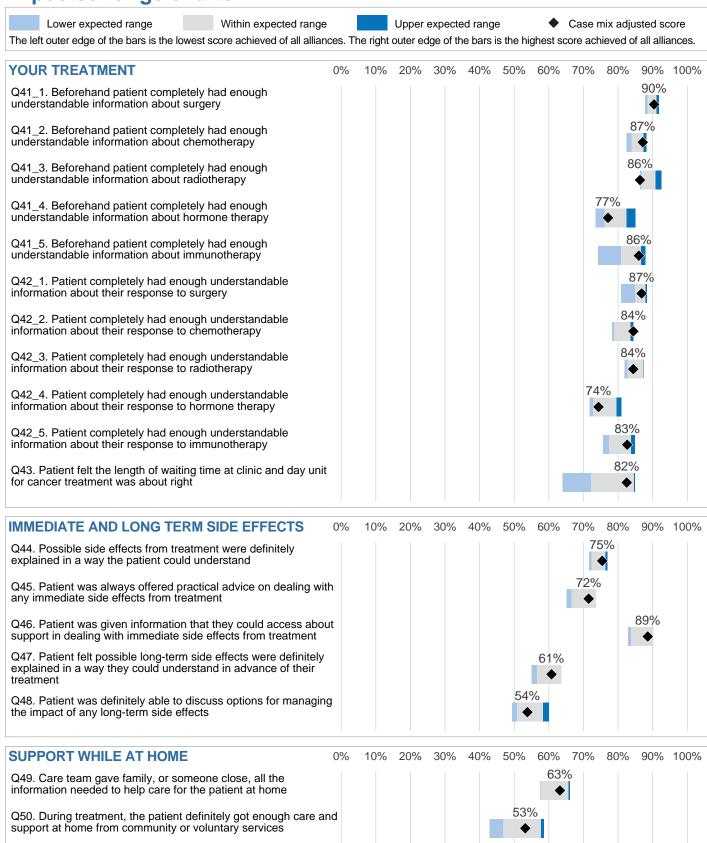
Respondents by ethnicity

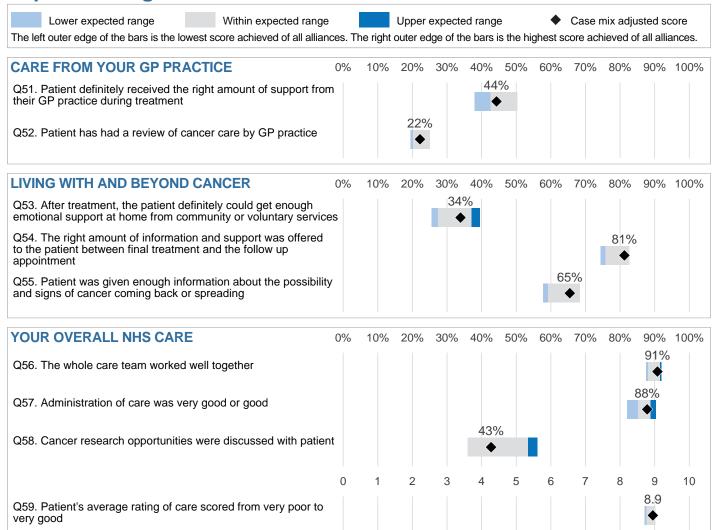
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	3,278
Irish	20
Gypsy or Irish Traveller	*
Roma	*
Any other White background	62
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	10
White and Black African	6
White and Asian	6
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	8
Pakistani	*
Bangladeshi	*
Chinese	6
Any other Asian background	10
Black / African / Caribbean / Black British	I
African	13
Caribbean	12
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	235
Total	3,686

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









* Indicates where a score is not

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

available	due to suppression or a
low base	size.

** No score available for 2022.

	Unadjusted scores						Case n			
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	1598	79%	1749	79%			79%	76%	80%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	2123	68%	2371	69%		A	68%	63%	70%	67%

	Unadjusted scores							Case mix adjusted scores			
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q5. Patient received all the information needed about the diagnostic test in advance	2628	93%	2974	93%			93%	91%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	2763	86%	3137	84%			84%	81%	86%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	2764	81%	3134	80%		•	80%	75%	80%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	2770	82%	3142	80%			80%	76%	81%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	2788	96%	3148	95%			95%	94%	96%	95%	

			Unadjus	ted score	Case n					
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	2974	75%	3393	80%	A	A	80%	78%	84%	81%
Q13. Patient was definitely told sensitively that they had cancer	3193	75%	3617	75%			75%	72%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	3197	78%	3631	79%			79%	75%	78%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	3186	88%	3631	86%			86%	84%	87%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	2824	86%	3231	85%			85%	81%	87%	84%

	Unadjusted scores						Case m			
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q17. Patient had a main point of contact within the care team	3087	92%	3476	92%			92%	89%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	2581	86%	2905	85%			85%	80%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	2717	96%	3031	96%			96%	95%	97%	96%

▲ 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

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

** No score available for 2022.

			Unadjust	ed score	es		Case n			
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	2995	84%	3390	84%			84%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	3164	82%	3564	82%			81%	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	2641	83%	3085	85%		A	85%	82%	85%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	1832	58%			58%	53%	61%	57%

			Unadjust	ted score	Case n					
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	2875	73%	3181	74%			74%	69%	75%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	1655	94%	1871	94%			94%	92%	95%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	1298	99%	1472	99%			99%	98%	99%	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	2629	92%	3046	92%		A	92%	89%	93%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	3169	78%	3583	77%			77%	72%	79%	76%
Q29. Patient was offered information about how to get financial help or benefits	1494	67%	1629	70%			70%	65%	75%	70%

Adjusted score below lower

	* Indicates where a score is not available due to suppression or a low base size. ** No score available for 2022. 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).	expected range Adjusted score between upper and lower expected ranges Adjusted score above upper expected range
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			Unadjus	ted score	s		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	1545	80%	1710	79%			79%	75%	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	1216	66%	1394	70%		•	70%	67%	72%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	1524	70%	1682	69%			69%	68%	73%	70%
Q34. Patient was always able to get help from ward staff when needed	1519	74%	1663	72%		•	72%	70%	76%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	1470	65%	1607	65%			65%	62%	68%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	1317	88%	1447	85%			85%	82%	86%	84%
Q37. Patient was always treated with respect and dignity while in hospital	1542	90%	1705	89%			89%	86%	89%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	1507	88%	1658	90%			90%	87%	90%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	2751	82%	3108	80%	•		79%	75%	83%	79%

			Unadjus	ted score	es		Case r			
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	1840	90%	1985	90%			90%	89%	91%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	1580	86%	1612	87%			87%	84%	87%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	918	89%	959	86%			86%	87%	91%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	548	79%	602	77%			77%	76%	83%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	507	87%	602	86%			86%	81%	87%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	1959	87%			87%	85%	88%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	1614	84%			84%	79%	84%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	957	84%			84%	83%	87%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	603	74%			74%	73%	80%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	596	83%			83%	77%	84%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	3125	82%	3451	83%			82%	72%	85%	78%

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

** No score available for 2022.

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

			Unadjust	ted score	:S		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	3023	76%	3359	75%			75%	72%	76%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	2886	70%	3171	71%			72%	67%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	2338	89%	2529	89%			89%	84%	90%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	2836	60%	3170	61%			61%	57%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	2403	55%	2693	54%			54%	51%	58%	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	2069	62%	2333	63%		A	63%	58%	66%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	1200	57%	1250	54%			53%	47%	58%	52%

			Unadjust	ted score	Case m					
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	1718	45%	1970	45%			44%	43%	50%	46%
Q52. Patient has had a review of cancer care by GP practice	3042	19%	3438	22%		A	22%	20%	25%	23%

Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment			Unadjust	ed score	s		Case n			
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	682	34%	725	34%			34%	27%	37%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	1477	79%	1704	81%			81%	76%	83%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	2553	65%	2873	66%			65%	59%	68%	64%

			Unadjust	ted score	es		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	3025	90%	3456	91%			91%	88%	92%	90%
Q57. Administration of care was very good or good	3149	87%	3553	88%			88%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	1943	39%	2165	42%			43%	36%	53%	45%
Q59. Patient's average rating of care scored from very poor to very good	3074	9.0	3488	9.0			8.9	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	*	94%	77%	79%	66%	78%	62%	82%	56%	89%	81%	77%	70%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	84%	69%	60%	50%	70%	57%	79%	65%	69%	59%	68%	67%	69%

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	*	93%	94%	89%	95%	88%	95%	94%	97%	96%	94%	92%	90%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	85%	86%	82%	83%	81%	83%	89%	86%	85%	86%	82%	78%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	77%	85%	76%	90%	71%	80%	81%	55%	71%	85%	83%	75%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	82%	83%	76%	78%	74%	80%	82%	55%	85%	83%	80%	70%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	96%	97%	95%	94%	94%	94%	96%	86%	98%	94%	95%	94%	95%

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	*	85%	86%	81%	77%	81%	84%	79%	43%	74%	85%	64%	75%	80%
Q13. Patient was definitely told sensitively that they had cancer	*	80%	77%	78%	73%	71%	80%	76%	55%	67%	69%	66%	71%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	82%	82%	74%	74%	76%	81%	82%	52%	83%	76%	78%	76%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	90%	85%	85%	81%	87%	88%	90%	65%	93%	87%	80%	83%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	*	89%	85%	85%	85%	83%	88%	89%	73%	85%	86%	76%	79%	85%

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	*	90%	94%	98%	94%	93%	96%	87%	94%	90%	96%	87%	92%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	87%	89%	90%	85%	81%	92%	81%	82%	83%	86%	79%	88%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	97%	98%	97%	99%	99%	95%	100%	96%	96%	92%	98%	96%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	82%	88%	84%	84%	87%	88%	82%	79%	84%	88%	82%	81%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	79%	83%	80%	83%	79%	85%	85%	79%	84%	85%	75%	82%	82%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	85%	88%	82%	84%	86%	89%	88%	71%	89%	85%	77%	87%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	58%	61%	51%	59%	61%	59%	64%	47%	51%	67%	47%	49%	58%

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	*	74%	78%	78%	73%	68%	77%	75%	70%	67%	75%	68%	75%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	94%	97%	97%	92%	95%	93%	95%	96%	96%	89%	94%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	98%	100%	99%	100%	95%	100%	97%	94%	100%	99%	99%	99%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	93%	93%	92%	93%	92%	93%	93%	91%	92%	90%	87%	90%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	74%	80%	77%	81%	78%	83%	76%	71%	76%	80%	75%	74%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	76%	71%	74%	73%	70%	80%	48%	47%	67%	74%	56%	69%	70%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	70%	80%	76%	83%	79%	80%	88%	72%	79%	82%	80%	73%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	60%	75%	66%	80%	60%	72%	68%	67%	66%	71%	61%	75%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	63%	74%	66%	75%	67%	75%	76%	63%	56%	69%	58%	70%	69%
Q34. Patient was always able to get help from ward staff when needed	*	63%	69%	67%	80%	71%	73%	83%	72%	75%	76%	70%	73%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	57%	68%	53%	73%	58%	69%	73%	50%	59%	63%	58%	65%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	81%	87%	83%	91%	80%	81%	90%	86%	80%	91%	88%	79%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	80%	91%	90%	94%	88%	89%	92%	84%	92%	88%	91%	85%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	85%	92%	89%	90%	92%	92%	93%	83%	86%	88%	89%	87%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	78%	80%	79%	86%	76%	86%	82%	76%	73%	80%	72%	79%	80%

YOUR TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	91%	94%	88%	96%	86%	91%	90%	89%	92%	89%	84%	88%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	84%	86%	91%	89%	82%	90%	88%	91%	*	86%	85%	86%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	83%	86%	88%	92%	88%	90%	88%	*	*	95%	82%	83%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	73%	*	*	*	*	*	82%	*	*	*	*	79%	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	73%	96%	87%	86%	77%	92%	*	*	91%	83%	87%	92%	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	87%	93%	87%	94%	85%	88%	86%	72%	84%	86%	81%	82%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	79%	82%	91%	88%	85%	88%	90%	90%	*	85%	76%	84%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	83%	83%	88%	88%	84%	85%	87%	*	*	86%	71%	83%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	71%	*	*	*	*	*	79%	*	*	*	*	71%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	67%	89%	80%	85%	77%	88%	*	*	87%	88%	86%	88%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	78%	83%	83%	85%	78%	86%	87%	93%	77%	89%	84%	83%	83%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	73%	78%	79%	75%	76%	75%	75%	83%	80%	75%	75%	75%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	68%	77%	77%	73%	73%	75%	68%	65%	73%	75%	63%	71%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	88%	90%	92%	92%	91%	92%	87%	75%	84%	91%	83%	87%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	58%	67%	62%	59%	68%	62%	66%	58%	61%	62%	53%	54%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	49%	59%	55%	56%	61%	56%	55%	48%	62%	55%	48%	49%	54%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	60%	68%	59%	69%	66%	70%	61%	53%	64%	67%	54%	60%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	52%	61%	61%	58%	55%	56%	47%	17%	46%	63%	46%	46%	54%

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	*	48%	44%	42%	42%	42%	36%	49%	50%	52%	45%	34%	49%	45%
Q52. Patient has had a review of cancer care by GP practice	*	22%	26%	26%	18%	26%	21%	19%	32%	17%	29%	19%	23%	22%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	34%	38%	46%	32%	40%	37%	30%	17%	24%	43%	26%	33%	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	78%	83%	79%	89%	82%	83%	78%	85%	80%	88%	82%	82%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	60%	62%	65%	79%	59%	58%	66%	73%	81%	69%	61%	63%	66%

YOUR OVERALL NHS CARE							Tumo	our gro	up					
	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%	92%	90%	92%	88%	91%	91%	75%	88%	91%	90%	90%	91%
Q57. Administration of care was very good or good	*	87%	92%	89%	90%	87%	90%	84%	93%	88%	87%	85%	85%	88%
Q58. Cancer research opportunities were discussed with patient	*	30%	52%	33%	59%	33%	56%	37%	22%	32%	55%	28%	39%	42%
Q59. Patient's average rating of care scored from very poor to very good	*	8.9	9.1	8.9	9.2	8.8	9.1	8.8	8.9	8.9	9.0	8.7	8.8	9.0

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	71%	81%	83%	78%	78%	80%	85%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	71%	75%	74%	73%	68%	67%	67%	69%

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	*	79%	86%	92%	94%	95%	92%	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	70%	78%	83%	85%	86%	84%	82%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	65%	67%	71%	75%	82%	84%	87%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	70%	74%	78%	77%	83%	80%	79%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	90%	91%	93%	95%	95%	97%	97%	95%

	Age			
4 45 - 54 55	5 - 64 65 - 74	75 - 84	85+	All
74% 7	78% 80%	81%	81%	80%
69% 7	70% 76%	77%	80%	75%
77% 7	77% 80%	81%	77%	79%
82% 8	85% 85%	89%	88%	86%
85% 8	060/ 070/	020/	010/	85%
	82% 8	82% 85% 85%	82% 85% 85% 89%	82% 85% 85% 89% 88%

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	*	87%	90%	88%	92%	92%	92%	89%	92%
Q18. Patient found it very or quite easy to contact their main contact person	*	80%	89%	88%	85%	86%	85%	81%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	100%	92%	95%	96%	96%	97%	97%	96%

DECIDING ON THE BEST TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	74%	70%	83%	84%	85%	84%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	70%	64%	77%	80%	84%	84%	77%	82%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	78%	69%	77%	86%	86%	87%	87%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	31%	56%	57%	56%	59%	60%	53%	58%

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	*	55%	75%	74%	73%	75%	74%	74%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	90%	88%	92%	94%	94%	95%	97%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	100%	95%	97%	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	*	86%	95%	93%	91%	93%	93%	86%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	82%	64%	73%	71%	79%	81%	79%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	71%	71%	76%	70%	71%	68%	46%	70%

HOSPITAL CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	67%	59%	71%	72%	82%	84%	87%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	50%	54%	68%	64%	69%	74%	85%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	33%	60%	61%	69%	72%	70%	73%	69%
Q34. Patient was always able to get help from ward staff when needed	*	67%	63%	69%	66%	74%	75%	82%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	58%	59%	60%	62%	67%	66%	65%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	*	55%	78%	79%	81%	86%	92%	88%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	75%	78%	86%	86%	91%	92%	86%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	92%	86%	85%	88%	91%	91%	88%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	84%	68%	74%	78%	81%	82%	81%	80%

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	*	81%	84%	90%	89%	90%	93%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	100%	82%	91%	85%	88%	86%	86%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	89%	81%	83%	90%	87%	81%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	50%	69%	78%	79%	81%	64%	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	59%	85%	86%	89%	85%	93%	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	81%	84%	89%	85%	86%	87%	89%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	77%	78%	82%	83%	86%	85%	83%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	77%	80%	85%	87%	84%	81%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	57%	63%	74%	75%	81%	68%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	53%	81%	81%	86%	83%	88%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	74%	87%	76%	83%	83%	85%	81%	83%

IMMEDIATE AND LONG TERM SIDE EFFECT	13				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	*	86%	79%	75%	77%	78%	71%	70%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	77%	69%	65%	71%	73%	71%	68%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	76%	91%	86%	89%	89%	90%	82%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	64%	55%	55%	63%	65%	57%	50%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	43%	46%	47%	55%	58%	51%	50%	54%

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	*	65%	60%	58%	58%	67%	64%	63%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	70%	51%	49%	51%	56%	57%	47%	54%

CARE FROM YOUR GP PRACTICE	CARE FROM YOUR GP PRACTICE								
	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	*	57%	48%	45%	45%	45%	45%	35%	45%
Q52. Patient has had a review of cancer care by GP practice	*	9%	36%	26%	25%	21%	20%	21%	22%

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%	46%	27%	32%	34%	40%	37%	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	71%	79%	73%	78%	83%	86%	83%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	58%	65%	54%	64%	68%	67%	69%	66%

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	*	95%	96%	91%	90%	90%	92%	91%	91%
Q57. Administration of care was very good or good	*	87%	82%	88%	85%	88%	90%	87%	88%
Q58. Cancer research opportunities were discussed with patient	*	45%	39%	38%	41%	45%	42%	35%	42%
Q59. Patient's average rating of care scored from very poor to very good	*	8.4	8.6	8.9	8.9	9.1	9.0	8.8	9.0

SUPPORT FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	79%	*	*	*	83%	79%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	69%	*	*	*	66%	69%	

DIAGNOSTIC TESTS			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	91%	95%	*	*	*	94%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	86%	*	*	*	86%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	83%	*	*	*	85%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	81%	*	*	*	80%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	96%	*	*	*	96%	95%

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	80%	79%	*	*	*	82%	80%
Q13. Patient was definitely told sensitively that they had cancer	76%	74%	*	*	*	77%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	79%	*	*	*	80%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	87%	*	*	*	86%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	86%	*	*	*	86%	85%

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	92%	91%	*	*	*	94%	92%	
Q18. Patient found it very or quite easy to contact their main contact person	87%	84%	*	*	*	86%	85%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	97%	*	*	*	96%	96%	

DECIDING ON THE BEST TREATMENT			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	83%	85%	*	*	*	85%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	84%	*	*	*	83%	82%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	86%	*	*	*	81%	85%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	54%	61%	*	*	*	66%	58%	

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	73%	75%	*	*	*	75%	74%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	95%	*	*	*	91%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	*	*	*	99%	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	91%	94%	*	*	*	92%	92%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	80%	*	*	*	83%	77%	
Q29. Patient was offered information about how to get financial help or benefits	72%	67%	*	*	*	61%	70%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	73%	84%	*	*	*	84%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	67%	72%	*	*	*	76%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	67%	71%	*	*	*	78%	69%
Q34. Patient was always able to get help from ward staff when needed	66%	78%	*	*	*	81%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	59%	71%	*	*	*	59%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	88%	*	*	*	88%	85%
Q37. Patient was always treated with respect and dignity while in hospital	86%	93%	*	*	*	90%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	92%	*	*	*	93%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	82%	*	*	*	79%	80%

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	91%	90%	*	*	*	90%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	88%	*	*	*	92%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	85%	87%	*	*	*	89%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	73%	82%	*	*	*	86%	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	81%	91%	*	*	*	88%	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	87%	*	*	*	88%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	86%	*	*	*	85%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	84%	*	*	*	85%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	71%	79%	*	*	*	82%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	80%	85%	*	*	*	83%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	87%	*	*	*	79%	83%

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	74%	76%	*	*	*	78%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	72%	*	*	*	72%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	89%	*	*	*	89%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	63%	*	*	*	63%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	57%	*	*	*	54%	54%

SUPPORT WHILE AT HOME	ORT WHILE AT HOME					Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	60%	67%	*	*	*	63%	63%				
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	56%	*	*	*	54%	54%				

CARE FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other				
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	43%	46%	*	*	*	45%	45%
Q52. Patient has had a review of cancer care by GP practice	23%	21%	*	*	*	20%	22%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	34%	*	*	*	44%	34%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	84%	*	*	*	75%	81%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	68%	*	*	*	70%	66%	

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	90%	91%	*	*	*	93%	91%	
Q57. Administration of care was very good or good	87%	88%	*	*	*	90%	88%	
Q58. Cancer research opportunities were discussed with patient	38%	47%	*	*	*	37%	42%	
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	*	*	*	9.1	9.0	

SUPPORT FROM YOUR GP PRACTICE	E Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	69%	92%	57%	*	80%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	69%	57%	80%	73%	*	64%	69%

DIAGNOSTIC TESTS		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	93%	91%	100%	96%	*	94%	93%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	84%	74%	83%	*	87%	84%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	79%	77%	76%	*	85%	80%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	76%	83%	84%	*	79%	80%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	88%	100%	88%	*	96%	95%	

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	79%	85%	92%	77%	*	83%	80%	
Q13. Patient was definitely told sensitively that they had cancer	75%	85%	78%	84%	*	76%	75%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	78%	82%	78%	*	79%	79%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	85%	82%	96%	*	86%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	85%	100%	96%	96%	*	86%	85%	

SUPPORT FROM A MAIN CONTACT PERSO	ON			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	92%	96%	96%	96%	*	92%	92%
Q18. Patient found it very or quite easy to contact their main contact person	85%	84%	85%	82%	*	86%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	92%	100%	95%	*	96%	96%

DECIDING ON THE BEST TREATMENT				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	84%	77%	85%	88%	*	87%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	82%	81%	88%	83%	*	84%	82%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	91%	95%	77%	*	82%	85%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	57%	65%	71%	70%	*	65%	58%	

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	74%	77%	75%	91%	*	75%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	89%	88%	100%	*	90%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	100%	100%	*	99%	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	92%	92%	95%	95%	*	93%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	73%	81%	96%	*	82%	77%
Q29. Patient was offered information about how to get financial help or benefits	70%	59%	75%	67%	*	66%	70%

HOSPITAL CARE	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	79%	80%	100%	93%	*	79%	79%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	69%	64%	75%	83%	*	74%	70%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	71%	87%	71%	*	76%	69%		
Q34. Patient was always able to get help from ward staff when needed	72%	80%	67%	79%	*	79%	72%		
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	73%	63%	58%	*	59%	65%		
Q36. Hospital staff always did everything they could to help the patient control pain	85%	86%	87%	91%	*	86%	85%		
Q37. Patient was always treated with respect and dignity while in hospital	89%	80%	88%	93%	*	88%	89%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	80%	100%	100%	*	91%	90%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	74%	73%	79%	*	80%	80%		

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

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	75%	85%	85%	62%	*	76%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	72%	76%	81%	*	71%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	89%	79%	90%	84%	*	89%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	72%	78%	70%	*	65%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	57%	55%	73%	*	54%	54%

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	63%	61%	67%	71%	*	64%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	67%	67%	75%	*	55%	54%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not given						
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	53%	43%	59%	*	48%	45%
Q52. Patient has had a review of cancer care by GP practice	21%	20%	36%	44%	*	25%	22%

LIVING WITH AND BEYOND CANCER		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	*	50%	*	*	42%	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	79%	67%	93%	*	78%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	71%	65%	88%	*	72%	66%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	91%	88%	93%	96%	*	94%	91%
Q57. Administration of care was very good or good	88%	85%	89%	85%	*	89%	88%
Q58. Cancer research opportunities were discussed with patient	42%	59%	47%	60%	*	40%	42%
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.8	8.9	9.0	*	9.1	9.0

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	77%	79%	77%	82%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	63%	65%	70%	72%	69%	69%

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	93%	94%	93%	94%	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	87%	85%	85%	83%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	84%	80%	79%	82%	79%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	79%	80%	83%	79%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	98%	97%	95%	95%	95%

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	81%	80%	79%	81%	79%	80%
Q13. Patient was definitely told sensitively that they had cancer	72%	76%	75%	77%	74%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	78%	78%	81%	80%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	87%	87%	87%	85%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	88%	85%	86%	85%	85%

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	92%	94%	92%	92%	91%	92%
Q18. Patient found it very or quite easy to contact their main contact person	83%	86%	85%	86%	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	98%	95%	96%	97%	96%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	AII
Q20. Treatment options were explained in a way the patient could completely understand	84%	82%	84%	86%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	80%	83%	81%	83%	82%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	84%	85%	86%	86%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	66%	58%	58%	56%	58%	58%

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	72%	74%	75%	75%	73%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	90%	94%	96%	93%	94%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	98%	99%	99%	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	91%	93%	92%	93%	92%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	76%	77%	79%	76%	77%
Q29. Patient was offered information about how to get financial help or benefits	67%	67%	72%	73%	67%	70%

HOSPITAL CARE	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	83%	81%	80%	77%	79%	79%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	74%	70%	73%	69%	67%	70%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	71%	67%	71%	69%	69%	
Q34. Patient was always able to get help from ward staff when needed	75%	75%	73%	70%	72%	72%	
Q35. Patient was always able to discuss worries and fears with hospital staff	68%	68%	66%	63%	63%	65%	
Q36. Hospital staff always did everything they could to help the patient control pain	81%	89%	86%	84%	86%	85%	
Q37. Patient was always treated with respect and dignity while in hospital	89%	92%	92%	88%	87%	89%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	93%	89%	87%	91%	90%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	80%	80%	80%	80%	80%	

IMD quintile tables

YOUR TREATMENT			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	92%	90%	90%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	91%	86%	89%	87%	85%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	86%	85%	86%	87%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	77%	80%	84%	77%	73%	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	90%	88%	88%	84%	84%	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	92%	87%	88%	87%	85%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	91%	81%	84%	85%	84%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	88%	80%	82%	85%	85%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	70%	80%	77%	73%	72%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	86%	88%	83%	80%	82%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	81%	81%	84%	84%	83%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	AII
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	76%	76%	76%	74%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	77%	74%	71%	71%	70%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	89%	89%	89%	88%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	67%	62%	61%	61%	58%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	63%	52%	55%	54%	51%	54%

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	69%	66%	62%	63%	62%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	57%	52%	50%	57%	53%	54%

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	50%	37%	48%	48%	42%	45%
Q52. Patient has had a review of cancer care by GP practice	28%	20%	24%	22%	20%	22%

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	38%	29%	34%	35%	35%	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	84%	82%	82%	80%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	70%	66%	65%	66%	65%	66%

YOUR OVERALL NHS CARE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	92%	91%	90%	92%	90%	91%
Q57. Administration of care was very good or good	86%	89%	88%	88%	86%	88%
Q58. Cancer research opportunities were discussed with patient	47%	37%	41%	42%	44%	42%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	9.0	9.0	8.9	9.0

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status					
	Yes No Not given All					
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	79%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67% 73% 65%					

DIAGNOSTIC TESTS		Long-term con	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	94%	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	88%	84%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	80%	85%	80%
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	81%	78%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	96%	94%	95%

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	79%	80%	83%	80%
Q13. Patient was definitely told sensitively that they had cancer	73%	76%	78%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	82%	79%	79%
Q15. Patient was definitely told about their diagnosis in appropriate place	86%	87%	84%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	88%	87%	85%

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	92%	91%	95%	92%
Q18. Patient found it very or quite easy to contact their main contact person	84%	88%	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	97%	96%	97%	96%

DECIDING ON THE BEST TREATMENT		Long-term cond	dition status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	86%	85%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	83%	83%	82%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	87%	80%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	56%	59%	65%	58%

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	72%	77%	76%	74%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	95%	92%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	98%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	91%	94%	92%	92%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	78%	81%	77%	
Q29. Patient was offered information about how to get financial help or benefits	67%	75%	67%	70%	

HOSPITAL CARE		Long-term co	ndition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	79%	80%	78%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	69%	69%	79%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	67%	73%	72%	69%
Q34. Patient was always able to get help from ward staff when needed	72%	73%	73%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	67%	59%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	86%	86%	81%	85%
Q37. Patient was always treated with respect and dignity while in hospital	89%	91%	83%	89%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	92%	87%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	82%	79%	80%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	91%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	88%	88%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	87%	87%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	74%	82%	85%	77%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	85%	88%	86%	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	88%	90%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	86%	81%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	83%	87%	81%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	72%	78%	81%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	81%	86%	86%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	83%	84%	76%	83%

IMMEDIATE AND LONG TERM SIDE EFFECTS	}	Long-term con		
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	79%	75%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	74%	71%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	92%	89%	89%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	66%	64%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	59%	54%	54%

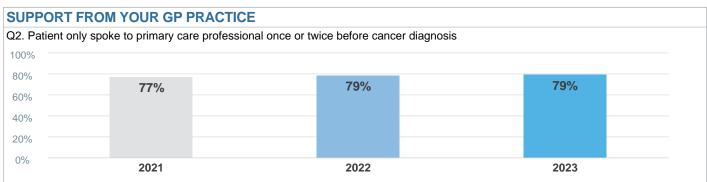
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given A				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	65%	64%	63%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	50%	59%	60%	54%	

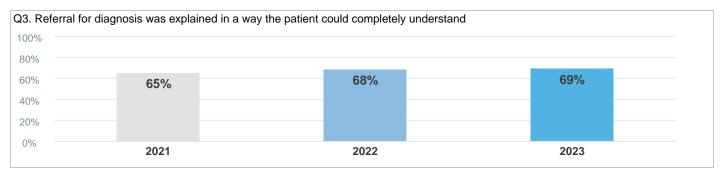
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	43%	48%	43%	45%	
Q52. Patient has had a review of cancer care by GP practice	21%	23%	23%	22%	

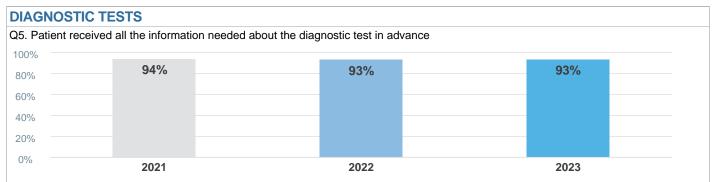
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	39%	39%	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	81%	82%	80%	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	62%	70%	69%	66%

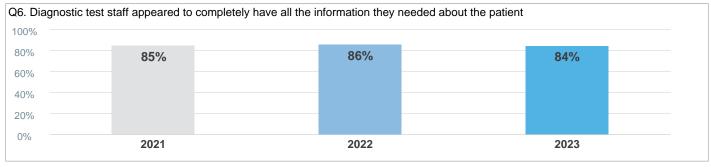
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given				
Q56. The whole care team worked well together	90%	91%	93%	91%	
Q57. Administration of care was very good or good	88%	88%	87%	88%	
Q58. Cancer research opportunities were discussed with patient	41%	44%	44%	42%	
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	9.0	9.0	

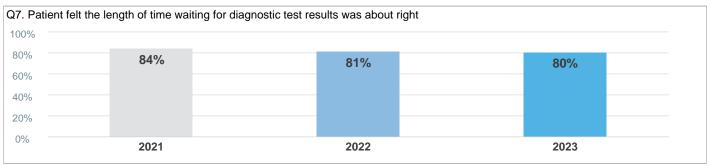




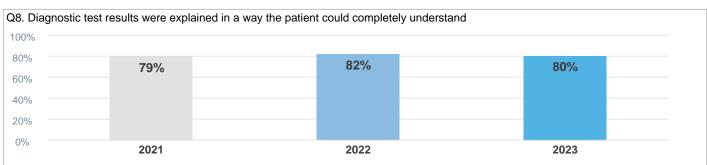


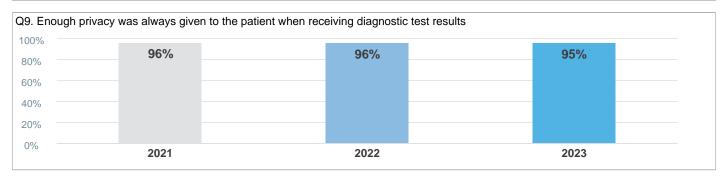


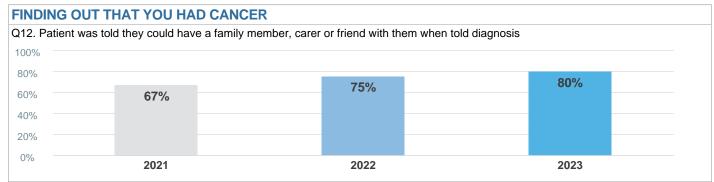


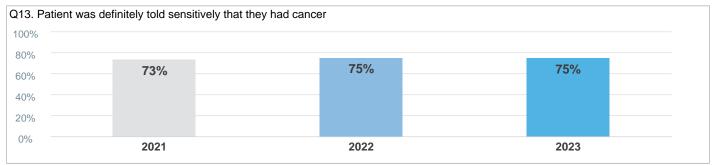


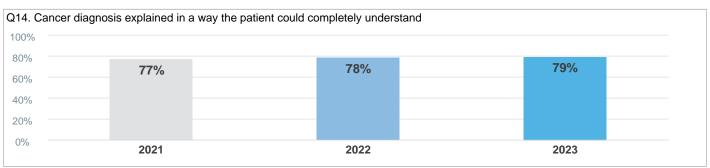


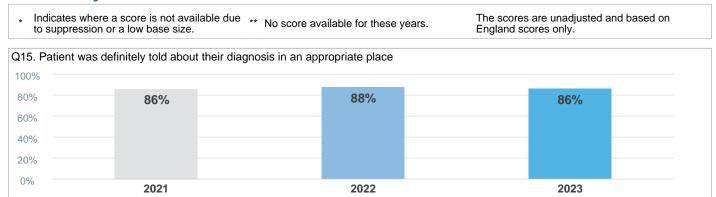


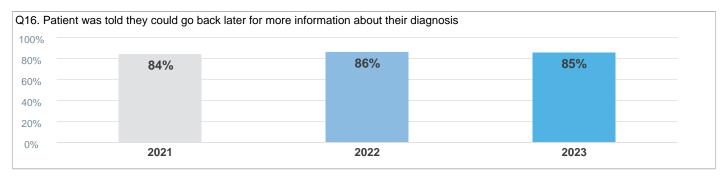


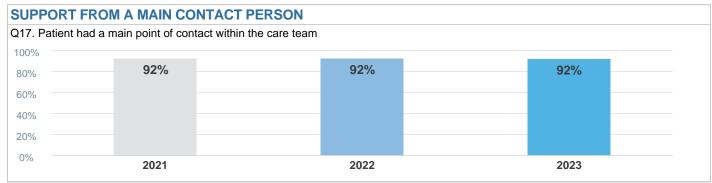


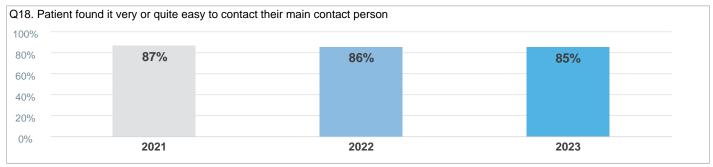


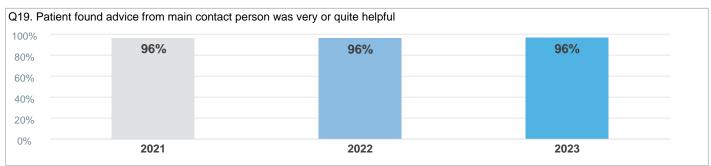




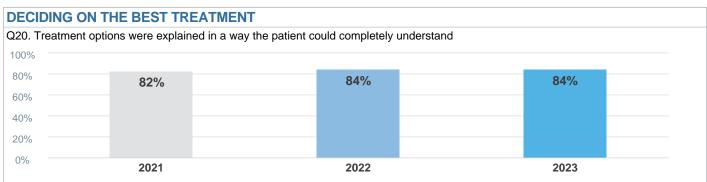


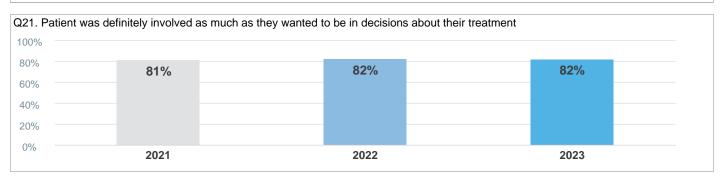


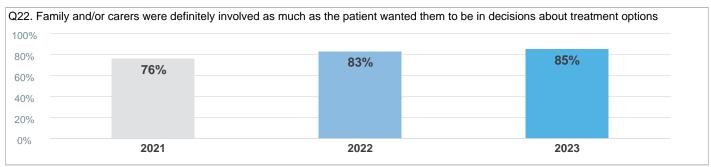


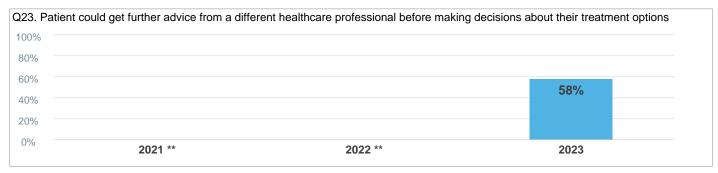


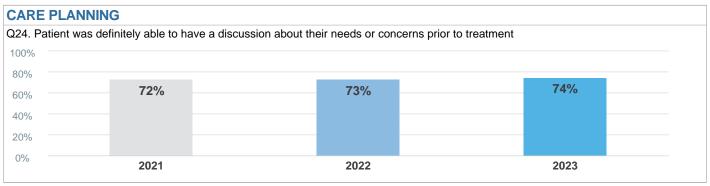


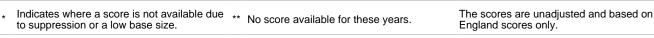


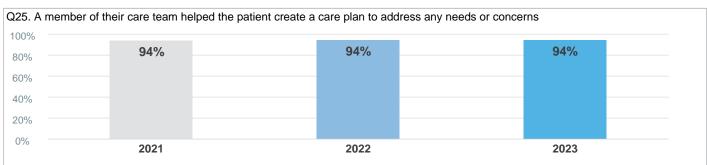


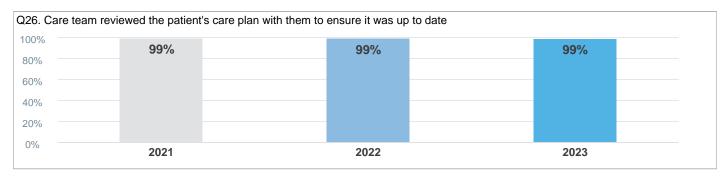


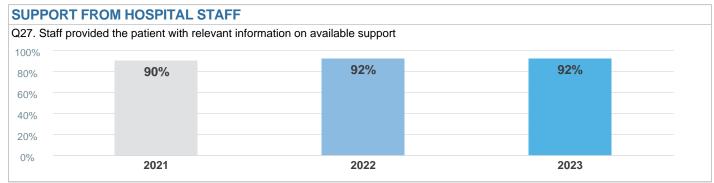


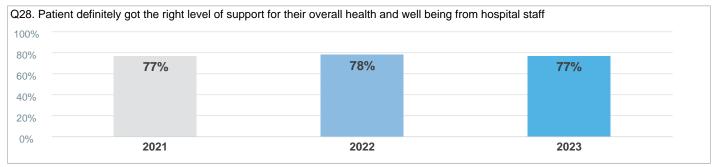


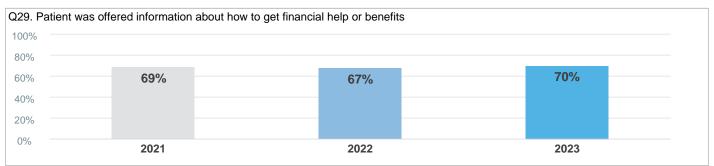


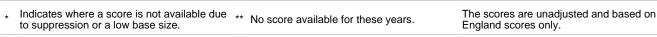


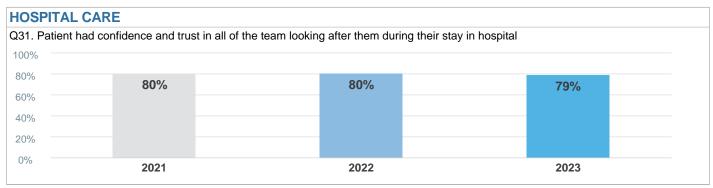


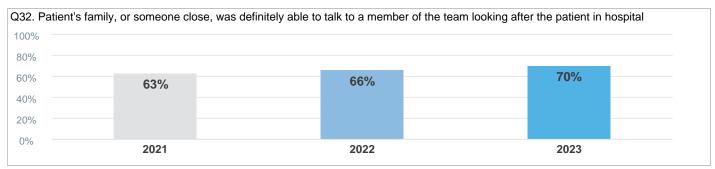


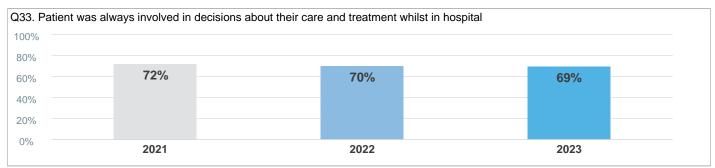


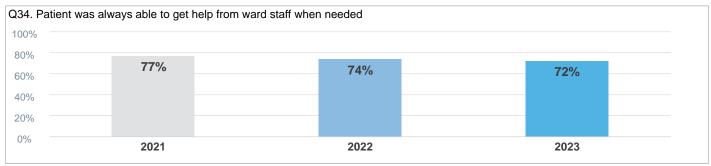


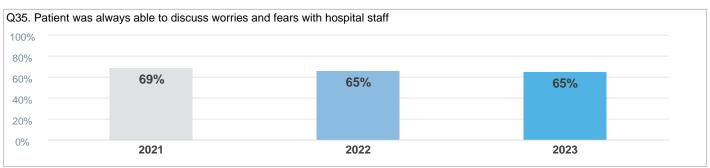


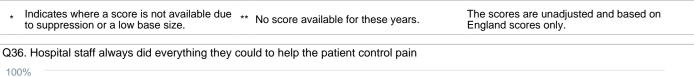


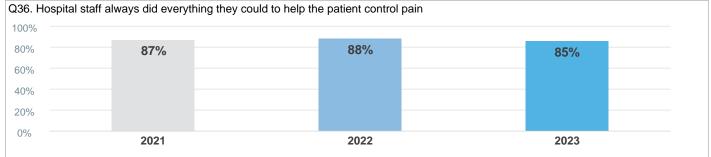


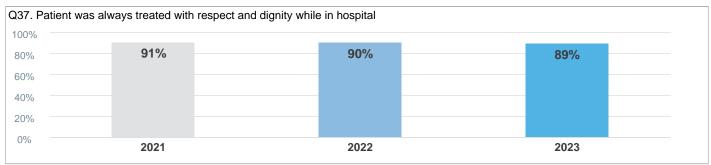


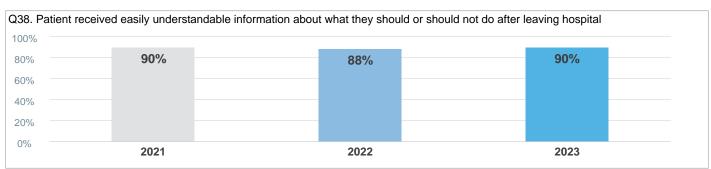


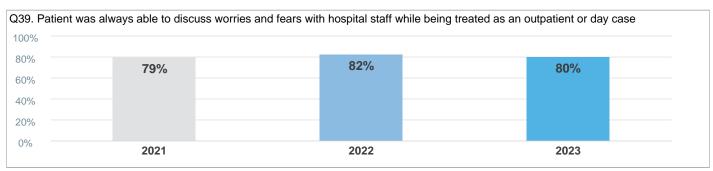


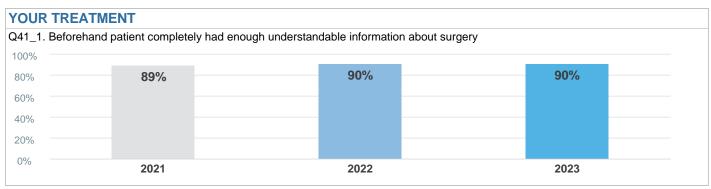




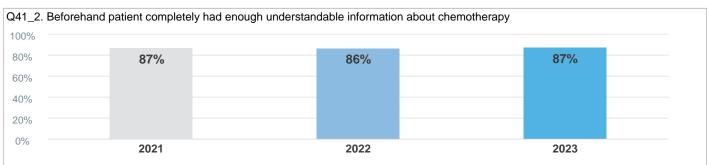


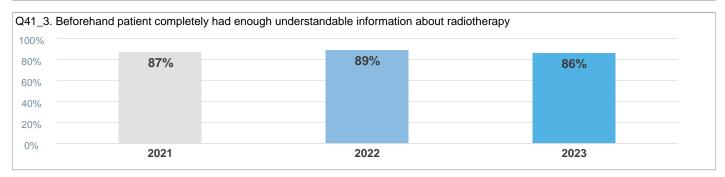


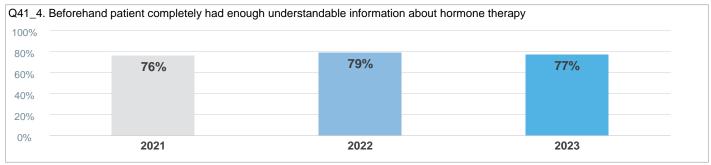


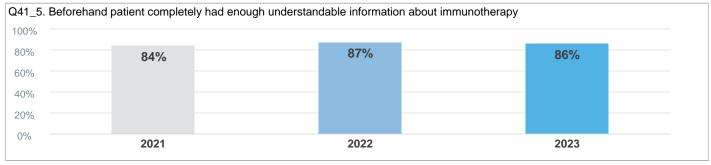


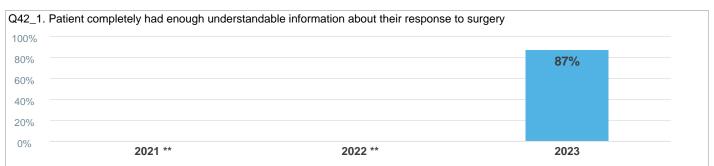


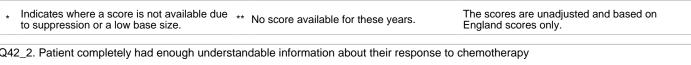


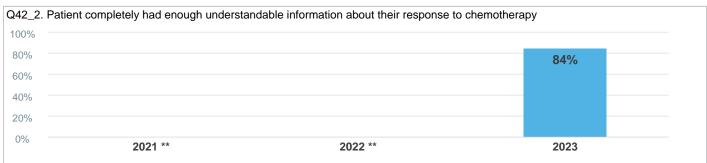


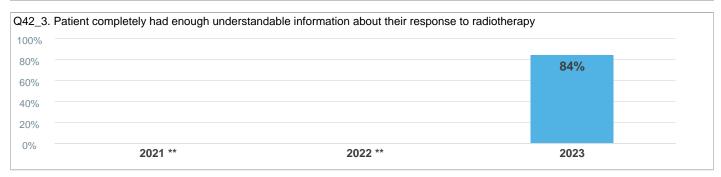


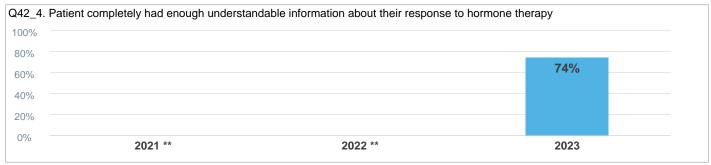


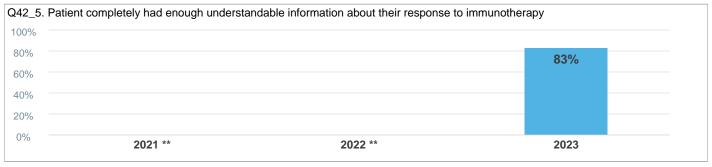


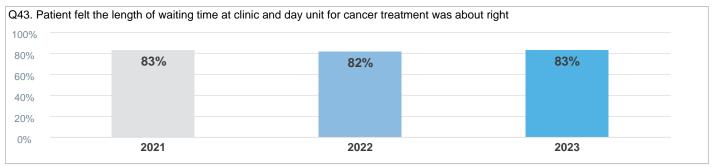


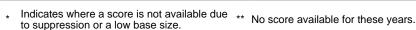




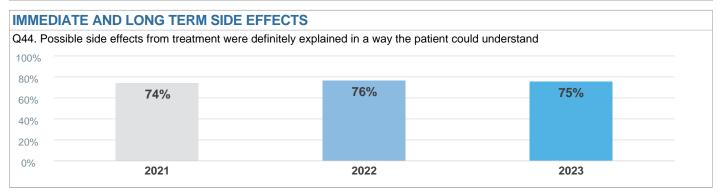


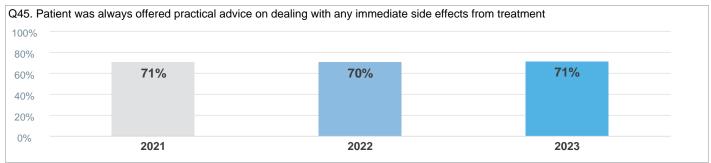


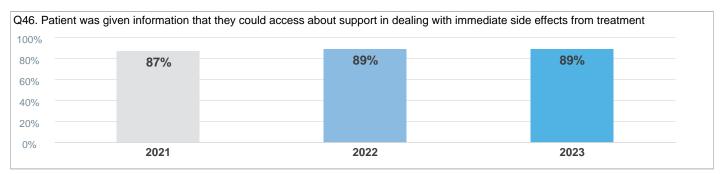


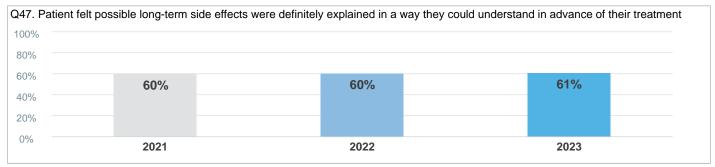


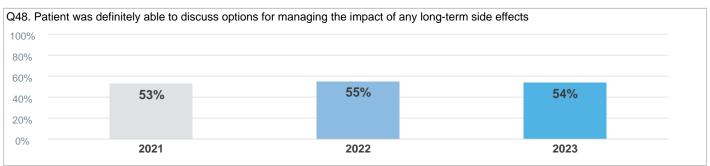
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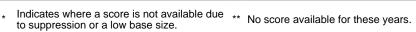




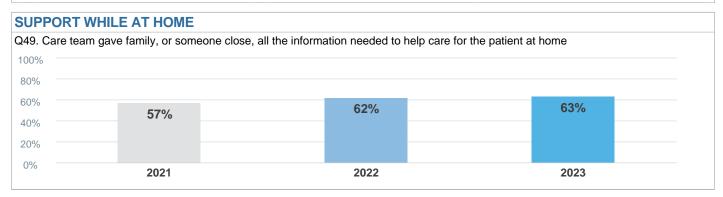


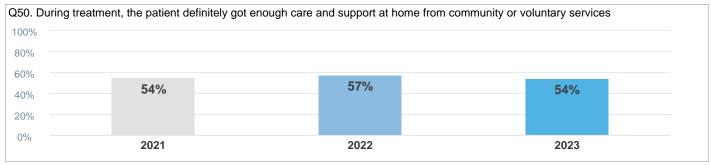


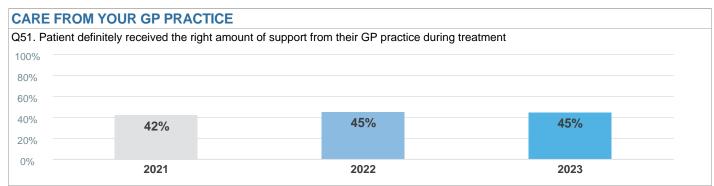


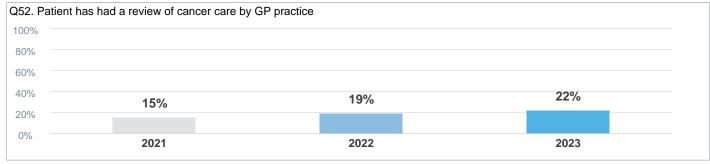


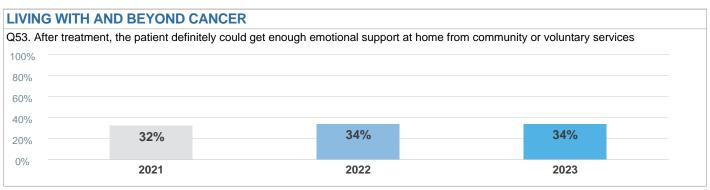
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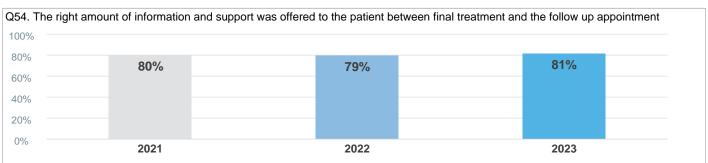


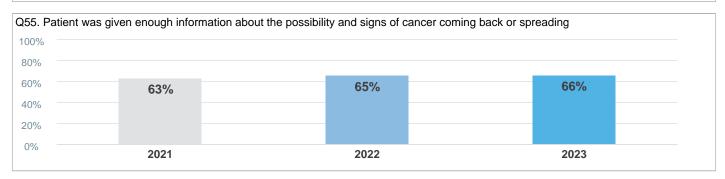


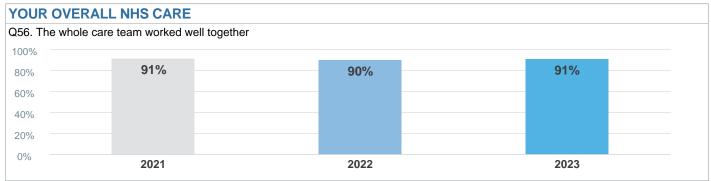


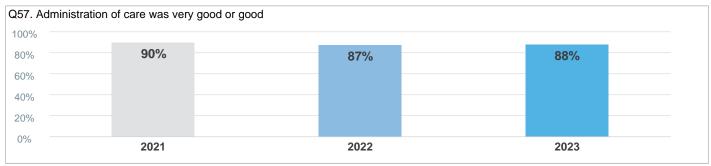


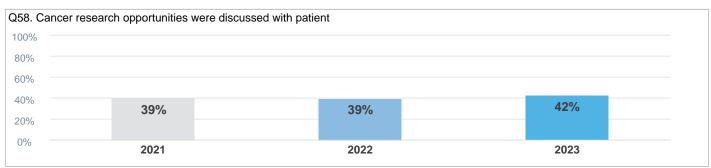


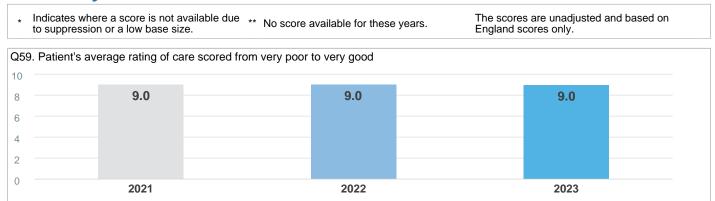












Trust expected range summary

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			
RBD	Dorset County Hospital NHS Foundation Trust	1	43	17	
RHM	University Hospital Southampton NHS Foundation Trust		46	15	
R0D	University Hospitals Dorset NHS Foundation Trust	1	53	7	
RN5	Hampshire Hospitals NHS Foundation Trust		57	4	
R1F	Isle of Wight NHS Trust	9	51	1	
RHU	Portsmouth Hospitals University National Health Service Trust	17	44		

ICB expected range summary

ICB	Number of scores above the upper expected range Expected range classification				
Data labels relate to the number of scores that fell below, within and above the expected range	Number of scores between the upper and lower expected ranges				
	Number of scores below the lower expected range				

ICB		Expected range classification		
QVV	VV NHS Dorset Integrated Care Board		46	15
QRL	NHS Hampshire and Isle of Wight Integrated Care Board	1	58	2