

Cancer Patient Experience Survey

2023 Results

West Midlands Cancer Alliance

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

Cancer Patient Experience Survey 2023 West Midlands Cancer Alliance

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Executive summary

Questions above expected range

	Case	Case mix adjusted scores Lower Upper 2023 score expected expected			
	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	84%	78%	83%	81%	

Questions below 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	74%	75%	80%	78%
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	75%	76%	79%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	68%	72%	70%
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	62%	67%	65%

Introduction

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

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

Note on question comparability

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

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

How alliance and ICB results are generated

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

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

Case-mix adjustment

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

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

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

Scoring methodology

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

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

Statistical significance

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

Suppression

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

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

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

Additional suppression

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

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

Understanding the results

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

Expected range charts

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

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

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

Comparability tables

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

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

Sub-group breakdowns

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

Tumour group tables

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

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

Trust expected range summary

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

ICB expected range summary

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

National level and England level data

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

Cancer Patient Experience Survey 2023 West Midlands Cancer Alliance

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

Further information

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

For more information on the methodology, please see the Technical Document. It can be viewed along with the 2023 questionnaire and survey guidance on the website at 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

7,052 patients responded out of a total of 13,816 patients, resulting in a response rate of 51%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	14,752	13,816	7,052	51%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	5,719
Online	1,329
Phone	4
Translation service	0
Total	7,052

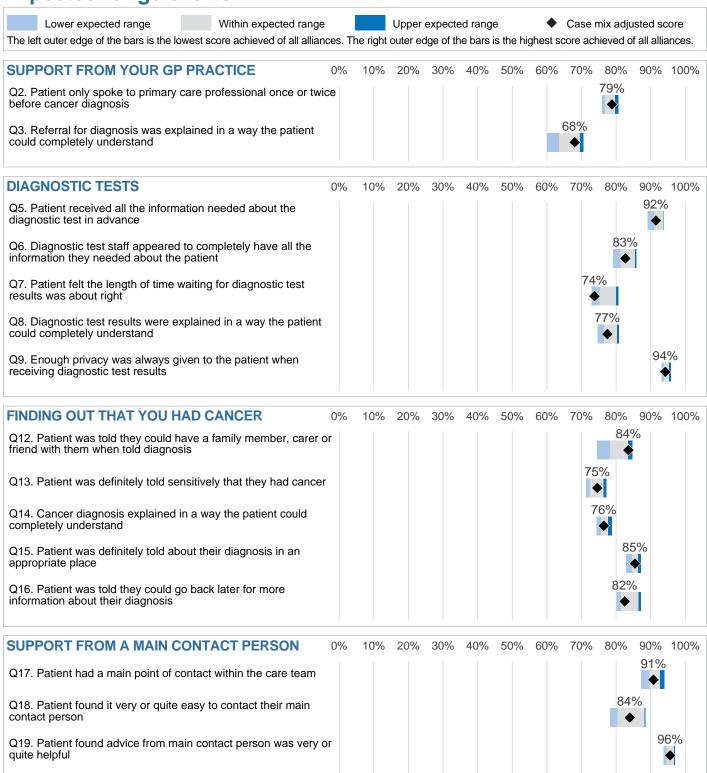
Respondents by tumour group

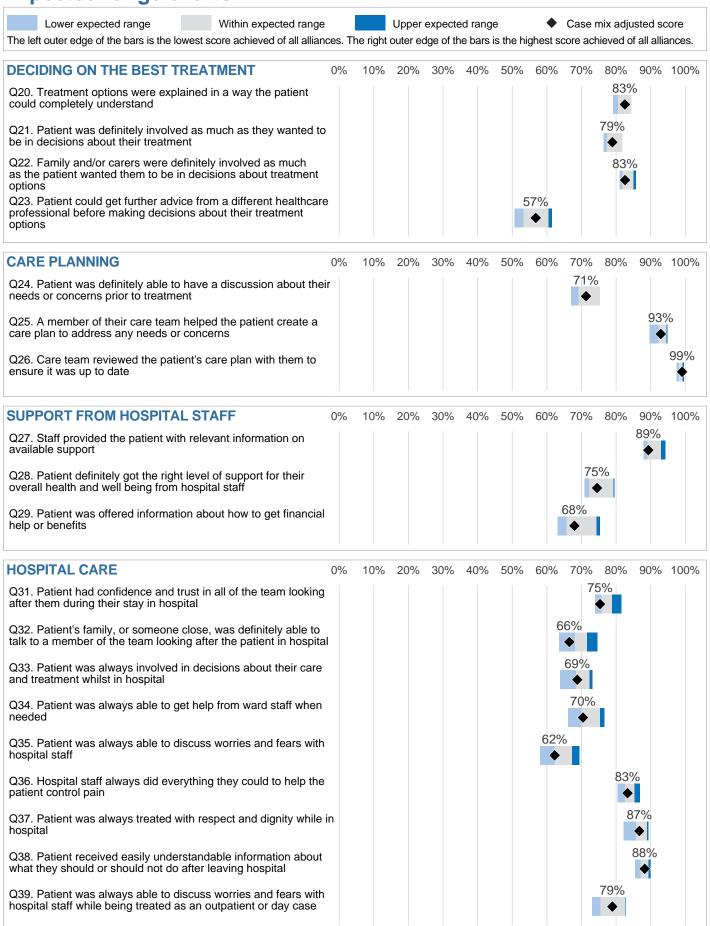
	Number of respondents
Brain / CNS	22
Breast	1,627
Colorectal / LGT	929
Gynaecological	362
Haematological	875
Head and neck	180
Lung	404
Prostate	736
Sarcoma	51
Skin	250
Upper gastro	337
Urological	504
Other	775
Total	7,052

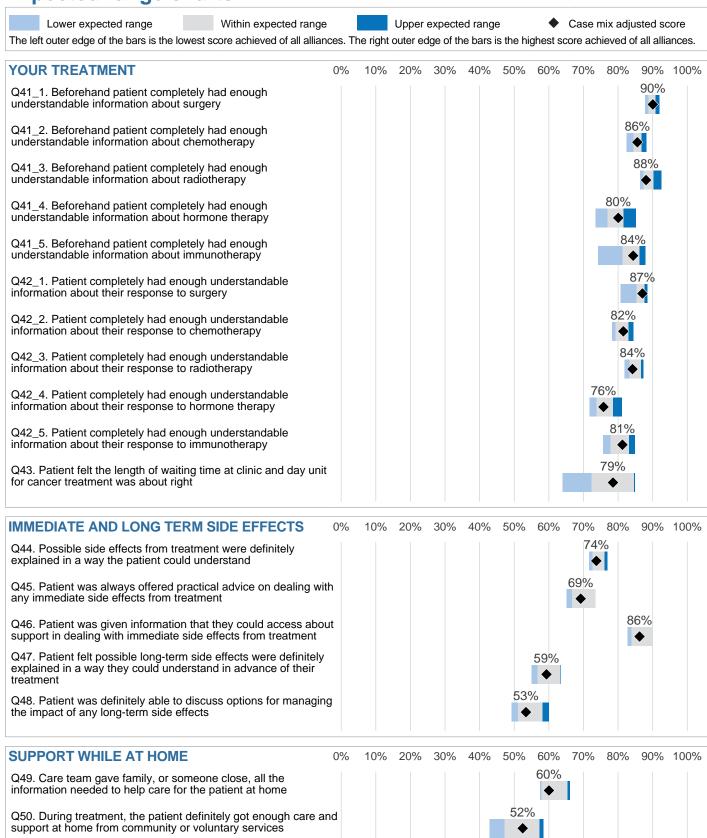
Respondents by ethnicity

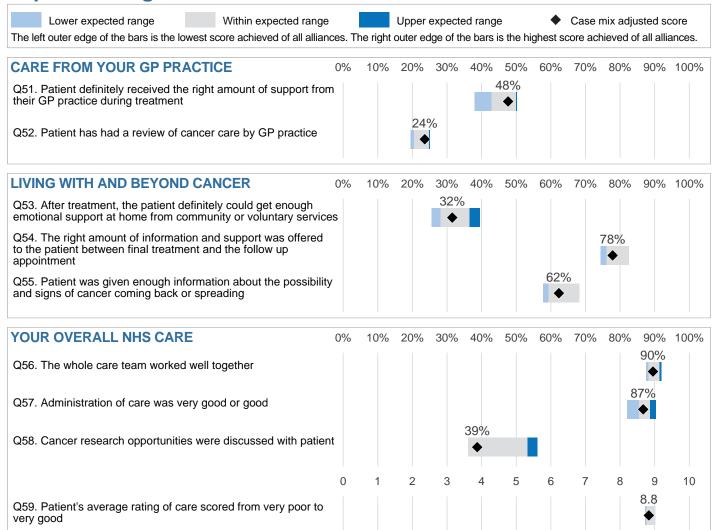
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	6,046
Irish	47
Gypsy or Irish Traveller	*
Roma	*
Any other White background	92
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	34
White and Black African	7
White and Asian	13
Any other Mixed / multiple ethnic background	7
Asian or Asian British	I
Indian	104
Pakistani	47
Bangladeshi	7
Chinese	16
Any other Asian background	26
Black / African / Caribbean / Black British	
African	38
Caribbean	59
Any other Black / African / Caribbean background	8
Other Ethnicity	(
Arab	6
Any other ethnic group	7
Not given	·
Not given	481
Total	7,052

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









Adjusted score below lower

ore between upper and ed ranges ore above upper

expected range

* Indicates where a score is not available due to suppression or a low base size.	or ▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall	expected rang Adjusted score lower expected
** No score available for 2022.		(2021, 2022, and 2023).	Adjusted score

	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	3152	77%	3343	79%			79%	77%	80%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	4259	64%	4577	68%	•	A	68%	64%	70%	67%	

DIAGNOSTIC TESTS	Unadjusted scores							Case mix adjusted scores			
	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	5203	92%	5512	92%			92%	91%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	5453	82%	5783	83%			83%	81%	85%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	5481	74%	5800	74%		•	74%	75%	80%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	5477	77%	5810	78%			77%	77%	80%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	5483	95%	5823	94%			94%	94%	95%	95%	

FINDING OUT THAT YOU HAD CANCER		Unadjusted scores						Case mix adjusted scores			
	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	6111	80%	6535	84%	•	A	84%	78%	83%	81%	
Q13. Patient was definitely told sensitively that they had cancer	6429	74%	6920	75%			75%	72%	76%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	6446	76%	6930	77%			76%	76%	78%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	6442	85%	6929	86%			85%	85%	86%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	5732	83%	6110	82%			82%	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	6205	91%	6654	91%			91%	90%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	5156	84%	5487	84%			84%	81%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	5384	95%	5745	96%			96%	95%	97%	96%

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



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

lower expected ranges
Adjusted score above upper expected range

**	No score	available	for 2022.
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			Unadjust	ed score		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	6013	82%	6523	83%			83%	81%	84%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	6369	79%	6859	79%			79%	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	5508	80%	5997	83%	•	A	83%	82%	85%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	3814	57%			57%	53%	61%	57%

	Unadjusted scores							Case mix adjusted scores			
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	5765	71%	6172	71%			71%	69%	75%	72%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	3375	92%	3623	93%			93%	92%	95%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	2637	99%	2886	99%			99%	98%	99%	99%	

	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q27. Staff provided the patient with relevant information on available support	5320	88%	5727	89%			89%	89%	93%	91%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	6389	74%	6858	74%			75%	72%	79%	76%	
Q29. Patient was offered information about how to get financial help or benefits	3561	67%	3844	68%			68%	66%	74%	70%	

Indicates where a score is not

Change 2022-2023: Indicates where 2023 score is

Adjusted score below lower expected range between upper and

ranges above upper

**	available due to suppression or a low base size. No score available for 2022.	or ▼	significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	Adjusted score be lower expected r Adjusted score a expected range

			Unadjust	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	2818	77%	3035	75%		•	75%	76%	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	2253	61%	2566	67%	A	A	66%	68%	72%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	2780	68%	2980	69%			69%	69%	72%	70%
Q34. Patient was always able to get help from ward staff when needed	2774	71%	2977	70%		•	70%	70%	75%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	2699	62%	2908	62%		•	62%	62%	67%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	2442	83%	2623	83%			83%	83%	85%	84%
Q37. Patient was always treated with respect and dignity while in hospital	2812	86%	3031	87%			87%	86%	89%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	2757	89%	2947	88%			88%	87%	89%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	5601	77%	6028	79%			79%	76%	83%	79%

	Unadjusted scores						Case n			
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	3459	90%	3546	90%			90%	89%	91%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	3415	85%	3519	86%			86%	84%	87%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	1841	88%	1860	88%			88%	87%	90%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	1194	78%	1251	80%			80%	77%	82%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	737	83%	879	85%			84%	81%	86%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	3496	87%			87%	85%	88%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	3522	82%			82%	79%	83%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	1854	84%			84%	83%	87%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	1236	76%			76%	74%	79%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	882	82%			81%	78%	83%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	6274	79%	6636	79%		•	79%	72%	85%	78%

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		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	6117	74%	6483	74%			74%	73%	76%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	5842	68%	6203	69%			69%	67%	73%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	4715	86%	4964	86%			86%	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	5761	58%	6213	59%			59%	57%	63%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	5015	51%	5331	53%	A		53%	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	4383	57%	4659	60%	•	A	60%	58%	65%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	2488	49%	2682	53%			52%	47%	57%	52%

	Unadjusted scores					Case m	Case mix adjusted scores				
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	3733	43%	4086	48%	A	A	48%	43%	50%	46%	
Q52. Patient has had a review of cancer care by GP practice	6143	21%	6556	24%	A	A	24%	20%	25%	23%	

	Unadjusted scores							Case mix adjusted scores			
LIVING WITH AND BEYOND CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	1400	28%	1445	32%			32%	28%	36%	32%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	2828	76%	2871	78%			78%	76%	83%	79%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	5039	61%	5423	62%			62%	59%	68%	64%	

			Unadjust	ted score	S		Case n	nix adjuste	d scores	
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q56. The whole care team worked well together	6102	89%	6515	89%			90%	88%	91%	90%
Q57. Administration of care was very good or good	6350	86%	6795	87%			87%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	3719	37%	3985	39%			39%	36%	53%	45%
Q59. Patient's average rating of care scored from very poor to very good	6155	8.8	6659	8.8			8.8	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	93%	75%	73%	63%	70%	68%	84%	81%	90%	75%	81%	73%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	80%	69%	65%	55%	64%	57%	77%	60%	74%	59%	63%	62%	68%

DIAGNOSTIC TESTS							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	88%	91%	95%	87%	90%	94%	91%	92%	84%	93%	90%	91%	93%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	67%	86%	85%	76%	79%	79%	85%	87%	84%	91%	77%	76%	80%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	67%	72%	82%	66%	84%	71%	73%	72%	73%	71%	79%	72%	66%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	59%	80%	81%	75%	75%	83%	77%	78%	70%	84%	77%	73%	73%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	83%	96%	96%	93%	93%	93%	94%	94%	93%	97%	91%	91%	94%	94%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	90%	89%	82%	80%	81%	85%	82%	76%	76%	86%	71%	83%	84%
Q13. Patient was definitely told sensitively that they had cancer	73%	81%	79%	71%	73%	82%	72%	69%	64%	80%	73%	67%	73%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	91%	81%	82%	77%	70%	81%	73%	77%	68%	86%	76%	74%	70%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	77%	90%	87%	83%	84%	91%	82%	87%	72%	93%	84%	78%	82%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	80%	88%	85%	80%	80%	88%	82%	81%	80%	87%	81%	72%	75%	82%

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	100%	91%	94%	93%	95%	92%	91%	87%	98%	92%	94%	81%	89%	91%
Q18. Patient found it very or quite easy to contact their main contact person	90%	83%	88%	88%	87%	91%	83%	80%	80%	86%	88%	78%	80%	84%
Q19. Patient found advice from main contact person was very or quite helpful	100%	95%	98%	95%	97%	96%	94%	95%	91%	96%	98%	95%	94%	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	95%	83%	87%	84%	81%	87%	83%	81%	86%	89%	81%	79%	78%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	79%	82%	80%	79%	79%	79%	80%	75%	88%	82%	73%	74%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	91%	80%	86%	83%	81%	86%	84%	86%	80%	89%	87%	78%	80%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	77%	58%	61%	62%	56%	65%	55%	55%	47%	63%	63%	47%	51%	57%

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	59%	72%	76%	73%	73%	84%	68%	67%	78%	76%	76%	62%	67%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	100%	91%	95%	92%	95%	95%	95%	91%	88%	96%	97%	92%	92%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	99%	100%	99%	99%	97%	99%	99%	96%	99%	100%	99%	100%	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	95%	91%	91%	85%	88%	92%	88%	91%	87%	93%	92%	81%	85%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	91%	73%	77%	70%	80%	80%	75%	75%	72%	81%	77%	69%	70%	74%
Q29. Patient was offered information about how to get financial help or benefits	83%	71%	72%	71%	69%	75%	70%	55%	74%	62%	78%	53%	60%	68%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	77%	72%	79%	74%	72%	81%	79%	82%	79%	88%	73%	73%	72%	75%
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%	61%	72%	70%	67%	70%	73%	65%	71%	74%	68%	61%	59%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	83%	69%	71%	73%	62%	75%	75%	70%	74%	79%	70%	63%	64%	69%
Q34. Patient was always able to get help from ward staff when needed	85%	71%	72%	69%	64%	74%	75%	79%	75%	78%	69%	72%	63%	70%
Q35. Patient was always able to discuss worries and fears with hospital staff	67%	60%	67%	62%	57%	68%	69%	69%	71%	66%	62%	58%	54%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	100%	83%	88%	84%	81%	86%	84%	89%	74%	90%	81%	77%	78%	83%
Q37. Patient was always treated with respect and dignity while in hospital	92%	85%	88%	85%	84%	89%	89%	93%	86%	95%	84%	88%	82%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	89%	91%	90%	85%	90%	87%	86%	81%	95%	89%	87%	86%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	75%	76%	82%	80%	81%	80%	76%	82%	79%	81%	82%	77%	75%	79%

YOUR TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	100%	91%	92%	92%	85%	93%	92%	85%	94%	93%	86%	87%	87%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	95%	84%	88%	86%	86%	85%	84%	90%	75%	*	87%	92%	83%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	100%	88%	90%	83%	86%	90%	93%	90%	91%	*	89%	85%	86%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	78%	85%	67%	68%	*	*	85%	*	*	*	82%	80%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	77%	90%	100%	86%	85%	82%	94%	*	94%	88%	88%	80%	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	100%	89%	90%	86%	80%	90%	89%	78%	91%	92%	83%	81%	85%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	89%	80%	84%	80%	82%	83%	81%	88%	75%	*	84%	88%	77%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	84%	87%	73%	85%	90%	87%	88%	100%	*	86%	80%	80%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	75%	75%	50%	71%	*	*	80%	*	*	*	87%	74%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	82%	92%	92%	81%	85%	76%	83%	*	86%	83%	82%	78%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	67%	75%	84%	79%	75%	76%	78%	84%	82%	79%	81%	82%	77%	79%

IMMEDIATE AND LONG TERM SIDE EFFEC	TS						Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	74%	77%	73%	72%	77%	73%	73%	79%	77%	74%	73%	71%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	68%	74%	68%	71%	80%	71%	64%	74%	74%	75%	66%	65%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	94%	87%	89%	88%	87%	85%	85%	81%	79%	86%	91%	80%	84%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	50%	59%	65%	56%	57%	71%	61%	62%	53%	67%	63%	52%	54%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	62%	50%	58%	53%	52%	62%	57%	54%	59%	59%	62%	48%	49%	53%

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	74%	56%	67%	56%	65%	71%	62%	56%	63%	65%	65%	53%	56%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	69%	50%	59%	47%	52%	55%	54%	48%	62%	73%	62%	45%	48%	53%

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	36%	46%	49%	52%	43%	47%	45%	54%	69%	50%	49%	44%	44%	48%
Q52. Patient has had a review of cancer care by GP practice	47%	23%	24%	27%	18%	22%	24%	26%	33%	23%	30%	23%	23%	24%

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	*	25%	39%	37%	26%	43%	30%	32%	63%	37%	37%	33%	30%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	75%	84%	81%	78%	84%	75%	76%	84%	85%	80%	73%	77%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	74%	55%	62%	62%	74%	56%	61%	59%	76%	86%	63%	63%	61%	62%

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	86%	89%	92%	89%	89%	91%	92%	89%	86%	91%	90%	87%	87%	89%
Q57. Administration of care was very good or good	86%	87%	90%	86%	89%	90%	88%	84%	92%	84%	91%	80%	85%	87%
Q58. Cancer research opportunities were discussed with patient	d 63% 32% 42% 32% 54% 36% 41% 30% 68% 38% 48% 27% 38% 39%													
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	9.0	8.7	9.0	8.9	8.8	8.7	8.6	9.0	8.9	8.5	8.6	8.8

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	36%	74%	79%	78%	76%	79%	82%	81%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	50%	71%	66%	75%	69%	69%	64%	67%	68%

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	82%	83%	88%	90%	91%	93%	92%	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	55%	66%	78%	81%	81%	84%	84%	83%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	55%	64%	57%	63%	68%	75%	80%	85%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	30%	69%	69%	75%	75%	79%	80%	80%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	82%	85%	91%	94%	93%	95%	95%	96%	94%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	100%	83%	80%	83%	81%	84%	86%	87%	84%
Q13. Patient was definitely told sensitively that they had cancer	62%	78%	73%	76%	72%	73%	78%	78%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	36%	80%	73%	74%	74%	77%	79%	82%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	80%	81%	84%	83%	86%	88%	87%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	90%	91%	86%	86%	82%	79%	73%	82%

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	100%	95%	92%	91%	92%	90%	92%	87%	91%
Q18. Patient found it very or quite easy to contact their main contact person	100%	76%	79%	81%	84%	84%	86%	87%	84%
Q19. Patient found advice from main contact person was very or quite helpful	100%	92%	91%	95%	95%	96%	96%	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	92%	81%	78%	82%	82%	82%	84%	82%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	71%	64%	72%	75%	78%	79%	82%	80%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	69%	79%	78%	81%	83%	85%	88%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	67%	48%	63%	58%	57%	57%	57%	51%	57%

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	64%	65%	73%	72%	71%	71%	72%	73%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	100%	100%	91%	90%	92%	92%	95%	97%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	90%	100%	99%	98%	100%	100%	98%	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	85%	86%	84%	89%	90%	90%	88%	89%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	59%	63%	70%	73%	73%	79%	84%	74%
Q29. Patient was offered information about how to get financial help or benefits	85%	50%	72%	72%	72%	68%	63%	58%	68%

HOSPITAL CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	55%	67%	65%	67%	69%	78%	79%	87%	75%
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%	62%	64%	58%	61%	69%	70%	75%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	61%	68%	61%	66%	70%	73%	66%	69%
Q34. Patient was always able to get help from ward staff when needed	55%	67%	70%	63%	63%	73%	75%	78%	70%
Q35. Patient was always able to discuss worries and fears with hospital staff	50%	33%	60%	56%	60%	65%	63%	65%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	70%	57%	80%	76%	80%	86%	87%	85%	83%
Q37. Patient was always treated with respect and dignity while in hospital	73%	78%	84%	78%	82%	89%	90%	93%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	83%	84%	88%	85%	90%	90%	88%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	100%	67%	71%	75%	78%	79%	81%	83%	79%

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	*	77%	87%	88%	90%	90%	92%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	83%	85%	84%	84%	87%	86%	88%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	85%	92%	89%	88%	88%	88%	88%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	73%	73%	80%	81%	83%	86%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	74%	82%	86%	85%	86%	75%	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	77%	82%	83%	86%	88%	90%	86%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	83%	79%	79%	80%	81%	84%	82%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	92%	86%	83%	84%	85%	85%	82%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	65%	67%	80%	77%	78%	72%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	76%	78%	82%	81%	84%	73%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	42%	63%	66%	76%	79%	78%	80%	84%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	69%	73%	80%	73%	76%	73%	73%	70%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	50%	61%	63%	66%	70%	69%	71%	70%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	77%	80%	80%	86%	87%	87%	85%	84%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	50%	58%	66%	57%	61%	59%	59%	56%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	50%	49%	48%	53%	54%	56%	54%	53%

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	77%	45%	56%	57%	57%	61%	63%	63%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	35%	46%	52%	52%	52%	55%	49%	53%

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	*	47%	46%	53%	49%	44%	49%	49%	48%
Q52. Patient has had a review of cancer care by GP practice	8%	26%	31%	26%	25%	23%	22%	21%	24%

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	*	37%	27%	27%	31%	30%	36%	35%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	73%	61%	70%	76%	79%	82%	84%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	55%	60%	44%	54%	62%	64%	64%	69%	62%

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	64%	89%	82%	88%	88%	89%	92%	93%	89%
Q57. Administration of care was very good or good	79%	84%	82%	84%	85%	86%	89%	90%	87%
Q58. Cancer research opportunities were discussed with patient	*	33%	37%	33%	40%	39%	39%	36%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.5	8.5	8.3	8.6	8.8	8.8	8.9	8.9	8.8

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	80%	79%	*	*	*	74%	79%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	66%	*	*	*	61%	68%	

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%	93%	*	*	91%	89%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	83%	*	*	73%	81%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	70%	78%	*	*	55%	77%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	78%	*	*	64%	77%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	95%	*	*	82%	94%	94%

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	85%	83%	*	*	73%	85%	84%
Q13. Patient was definitely told sensitively that they had cancer	76%	74%	*	*	67%	75%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	77%	*	*	55%	79%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	86%	*	*	73%	85%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	82%	*	*	50%	77%	82%

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	91%	91%	*	*	82%	91%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	85%	84%	*	*	*	82%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	95%	97%	*	*	*	94%	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%	83%	*	*	27%	82%	83%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	80%	*	*	42%	81%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	84%	*	*	60%	85%	83%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	57%	58%	*	*	*	50%	57%	

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	70%	73%	*	*	*	71%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	91%	95%	*	*	*	95%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	100%	*	*	*	98%	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	87%	92%	*	*	73%	86%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	71%	79%	*	*	36%	74%	74%	
Q29. Patient was offered information about how to get financial help or benefits	67%	68%	*	*	*	67%	68%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	73%	78%	*	*	*	76%	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	65%	68%	*	*	*	71%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	66%	72%	*	*	*	70%	69%
Q34. Patient was always able to get help from ward staff when needed	67%	74%	*	*	*	70%	70%
Q35. Patient was always able to discuss worries and fears with hospital staff	58%	67%	*	*	*	55%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	81%	86%	*	*	*	86%	83%
Q37. Patient was always treated with respect and dignity while in hospital	84%	89%	*	*	*	89%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	90%	*	*	*	88%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	76%	82%	*	*	50%	79%	79%

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%	89%	*	*	*	95%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	87%	*	*	*	85%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	89%	*	*	*	80%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	85%	*	*	*	72%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	80%	88%	*	*	*	90%	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	88%	86%	*	*	*	93%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	84%	*	*	*	83%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	87%	*	*	*	77%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	74%	80%	*	*	*	75%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	81%	82%	*	*	*	83%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	82%	*	*	58%	80%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	75%	*	*	50%	74%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	71%	*	*	40%	70%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	86%	*	*	*	82%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	57%	62%	*	*	42%	57%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	50%	57%	*	*	27%	54%	53%

SUPPORT WHILE AT HOME		Male/Female/Non-binary/Other					
	Female	Not given	All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	56%	65%	*	*	*	60%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	50%	57%	*	*	*	47%	53%

CARE FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	47%	49%	*	*	*	39%	48%
Q52. Patient has had a review of cancer care by GP practice	24%	24%	*	*	25%	20%	24%

LIVING WITH AND BEYOND CANCER			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	35%	*	*	*	22%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	80%	*	*	*	77%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	59%	66%	*	*	40%	64%	62%

YOUR OVERALL NHS CARE		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	89%	91%	*	*	70%	90%	89%
Q57. Administration of care was very good or good	86%	88%	*	*	67%	88%	87%
Q58. Cancer research opportunities were discussed with patient	37%	41%	*	*	*	41%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	*	*	6.7	8.8	8.8

SUPPORT FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	68%	72%	67%	*	74%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	68%	74%	69%	59%	70%	63%	68%

DIAGNOSTIC TESTS		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	92%	82%	89%	93%	91%	90%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	75%	78%	74%	50%	80%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	74%	80%	65%	74%	42%	77%	74%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	80%	69%	66%	58%	77%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	82%	91%	91%	82%	93%	94%	

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	84%	92%	88%	82%	92%	85%	84%
Q13. Patient was definitely told sensitively that they had cancer	75%	75%	77%	72%	69%	75%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	70%	73%	71%	50%	78%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	84%	88%	88%	92%	86%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	73%	84%	86%	83%	77%	82%

SUPPORT FROM A MAIN CONTACT PERSO	N			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	91%	95%	91%	90%	85%	91%	91%
Q18. Patient found it very or quite easy to contact their main contact person	84%	84%	83%	81%	64%	83%	84%
Q19. Patient found advice from main contact person was very or quite helpful	96%	98%	96%	99%	100%	94%	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	83%	83%	73%	76%	75%	82%	83%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	72%	72%	76%	62%	80%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	76%	73%	76%	*	86%	83%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	57%	70%	51%	54%	*	56%	57%	

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	71%	70%	71%	69%	69%	72%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	87%	94%	95%	100%	95%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	97%	98%	100%	*	98%	99%	

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	89%	89%	88%	86%	92%	87%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	75%	74%	74%	62%	75%	74%
Q29. Patient was offered information about how to get financial help or benefits	68%	81%	65%	69%	80%	65%	68%

HOSPITAL CARE	Ethnicity									
	White	Mixed	Asian	Black	Other	Not given	All			
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	76%	64%	72%	74%	*	79%	75%			
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	64%	64%	78%	*	71%	67%			
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	58%	70%	65%	50%	69%	69%			
Q34. Patient was always able to get help from ward staff when needed	70%	59%	74%	61%	70%	72%	70%			
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	52%	56%	50%	50%	58%	62%			
Q36. Hospital staff always did everything they could to help the patient control pain	84%	70%	79%	76%	*	89%	83%			
Q37. Patient was always treated with respect and dignity while in hospital	87%	67%	86%	80%	80%	89%	87%			
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	84%	81%	89%	90%	87%	88%			
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	79%	73%	70%	58%	79%	79%			

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	84%	82%	81%	80%	95%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	86%	78%	87%	83%	*	86%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	90%	93%	85%	*	85%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	80%	75%	89%	71%	*	78%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	*	88%	82%	*	92%	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	77%	81%	82%	*	93%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	75%	82%	82%	*	82%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	89%	93%	89%	*	82%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	75%	82%	71%	*	77%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	81%	*	94%	*	*	86%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	79%	70%	68%	73%	73%	79%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	74%	76%	73%	92%	74%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	69%	70%	65%	75%	70%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	85%	83%	85%	73%	84%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	57%	66%	64%	54%	60%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	44%	57%	52%	38%	57%	53%

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	60%	65%	67%	57%	82%	60%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	53%	53%	35%	58%	50%	53%

CARE FROM YOUR GP PRACTICE				Ethnicity			
	White Mixed Asian Black Other Not given A						
Q51. Patient definitely received the right amount of support from their GP practice during treatment	48%	49%	50%	43%	55%	43%	48%
Q52. Patient has had a review of cancer care by GP practice	23%	36%	30%	28%	54%	22%	24%

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	32%	28%	35%	42%	*	27%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	78%	81%	80%	71%	*	79%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	57%	58%	55%	36%	62%	62%

YOUR OVERALL NHS CARE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	89%	84%	90%	90%	92%	91%	89%
Q57. Administration of care was very good or good	87%	83%	87%	89%	85%	86%	87%
Q58. Cancer research opportunities were discussed with patient	38%	38%	45%	46%	*	43%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.4	8.5	8.7	8.8	8.8	8.8

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	75%	75%	80%	81%	81%	79%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	67%	70%	68%	71%	68%	

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	91%	90%	92%	92%	92%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	81%	81%	84%	83%	83%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	71%	76%	73%	73%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	77%	79%	78%	76%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	93%	95%	95%	95%	94%

FINDING OUT THAT YOU HAD CANCER		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	87%	82%	85%	83%	82%	84%		
Q13. Patient was definitely told sensitively that they had cancer	77%	73%	76%	75%	73%	75%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	75%	77%	78%	77%	77%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	85%	86%	86%	84%	86%		
Q16. Patient was told they could go back later for more information about their diagnosis	84%	83%	83%	81%	81%	82%		

SUPPORT FROM A MAIN CONTACT PERSON			IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q17. Patient had a main point of contact within the care team	92%	91%	91%	90%	91%	91%
Q18. Patient found it very or quite easy to contact their main contact person	85%	82%	84%	84%	85%	84%
Q19. Patient found advice from main contact person was very or quite helpful	95%	96%	96%	96%	95%	96%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	83%	82%	83%	83%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	77%	80%	81%	78%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	81%	82%	82%	83%	83%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	61%	59%	56%	56%	53%	57%

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	71%	71%	71%	72%	72%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	94%	92%	93%	93%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	99%	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	88%	88%	90%	90%	89%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	75%	74%	76%	74%	73%	74%
Q29. Patient was offered information about how to get financial help or benefits	71%	66%	66%	68%	67%	68%

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	78%	74%	78%	72%	76%	75%		
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%	65%	70%	62%	67%	67%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	65%	72%	68%	69%	69%		
Q34. Patient was always able to get help from ward staff when needed	72%	69%	72%	68%	70%	70%		
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	62%	64%	61%	60%	62%		
Q36. Hospital staff always did everything they could to help the patient control pain	84%	83%	86%	81%	83%	83%		
Q37. Patient was always treated with respect and dignity while in hospital	87%	84%	89%	85%	88%	87%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	88%	90%	88%	87%	88%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	77%	79%	79%	79%	79%		

IMD quintile tables

YOUR TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	89%	91%	90%	90%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	85%	86%	85%	85%	86%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	92%	89%	87%	88%	85%	88%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	81%	81%	81%	77%	80%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	81%	86%	86%	84%	85%	
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	87%	87%	88%	87%	87%	
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	82%	79%	81%	83%	82%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	85%	82%	83%	83%	84%	
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	81%	73%	77%	74%	76%	76%	
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	84%	80%	80%	83%	81%	82%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	78%	77%	81%	79%	78%	79%	

IMMEDIATE AND LONG TERM SIDE EFFECT	rs		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	74%	73%	74%	73%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	68%	70%	69%	69%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	86%	86%	87%	85%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	66%	60%	59%	57%	57%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	54%	53%	53%	51%	53%

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	64%	60%	58%	61%	59%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	53%	50%	56%	53%	53%

CARE FROM YOUR GP PRACTICE			IMD q	uintile				
	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	44%	46%	50%	47%	50%	48%		
Q52. Patient has had a review of cancer care by GP practice	26%	24%	24%	23%	23%	24%		

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	32%	27%	31%	34%	34%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	76%	80%	77%	80%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	62%	63%	62%	62%	62%	62%

YOUR OVERALL NHS CARE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	91%	89%	89%	89%	89%	89%
Q57. Administration of care was very good or good	87%	86%	86%	88%	86%	87%
Q58. Cancer research opportunities were discussed with patient	43%	39%	37%	36%	41%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.8	8.9	8.8	8.8	8.8

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status					
	Yes	All				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	78%	79%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65%	68%				

DIAGNOSTIC TESTS		Long-term con-	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	91%	92%	90%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	85%	81%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	74%	73%	75%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	80%	74%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	96%	94%	94%

FINDING OUT THAT YOU HAD CANCER		Long-term condition status		
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	84%	84%	86%	84%
Q13. Patient was definitely told sensitively that they had cancer	74%	77%	76%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	79%	78%	77%
Q15. Patient was definitely told about their diagnosis in appropriate place	86%	86%	85%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	86%	79%	82%

SUPPORT FROM A MAIN CONTACT PERSOI	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	91%	91%	90%	91%
Q18. Patient found it very or quite easy to contact their main contact person	83%	86%	83%	84%
Q19. Patient found advice from main contact person was very or quite helpful	95%	96%	96%	96%

DECIDING ON THE BEST TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	84%	81%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	80%	79%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	84%	83%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	56%	58%	57%	57%

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	70%	75%	71%	71%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	94%	94%	93%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	98%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	All		
Q27. Staff provided the patient with relevant information on available support	88%	91%	88%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	77%	73%	74%
Q29. Patient was offered information about how to get financial help or benefits	66%	73%	65%	68%

HOSPITAL CARE		Long-term co	ndition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	75%	76%	75%	75%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	65%	69%	68%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	71%	66%	69%
Q34. Patient was always able to get help from ward staff when needed	70%	71%	70%	70%
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	65%	58%	62%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	85%	83%	83%
Q37. Patient was always treated with respect and dignity while in hospital	86%	88%	87%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	91%	87%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	82%	78%	79%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	90%	88%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	88%	85%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	88%	82%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	82%	67%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	85%	84%	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	88%	85%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	84%	82%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	84%	76%	84%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	77%	70%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	80%	84%	81%	82%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	78%	80%	81%	79%

IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	72%	78%	73%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	72%	71%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	89%	84%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	62%	59%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	57%	53%	53%

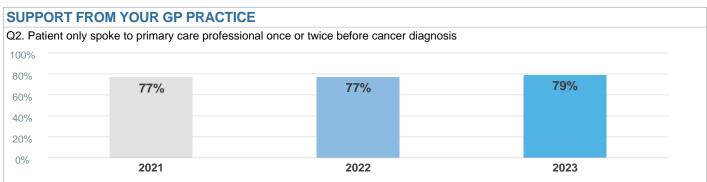
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	59%	64%	59%	60%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	50%	62%	46%	53%

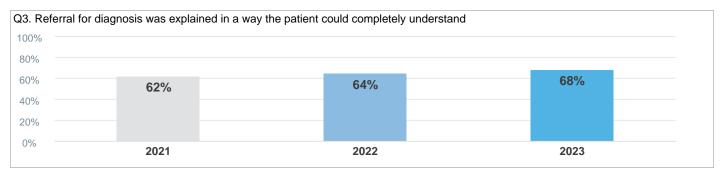
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	45%	54%	42%	48%	
Q52. Patient has had a review of cancer care by GP practice	24%	25%	20%	24%	

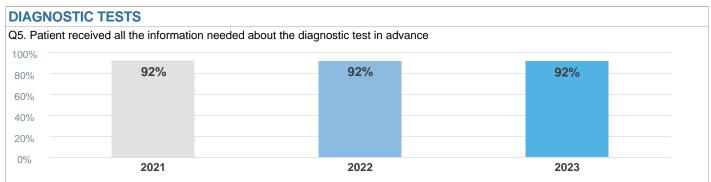
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	35%	28%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	82%	77%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	64%	62%	62%

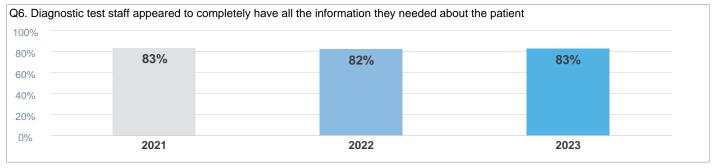
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	89%	91%	90%	89%
Q57. Administration of care was very good or good	86%	89%	86%	87%
Q58. Cancer research opportunities were discussed with patient	38%	40%	38%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.0	8.7	8.8

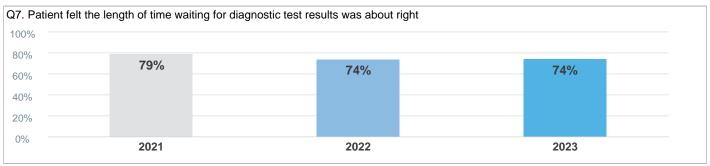




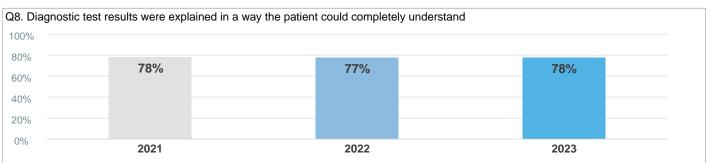


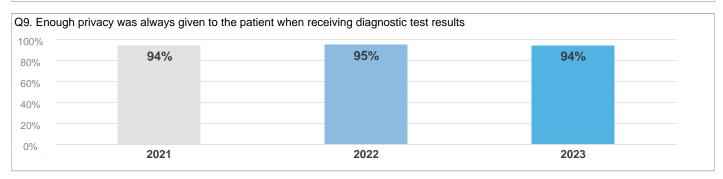


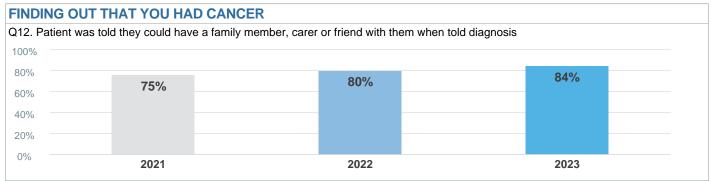


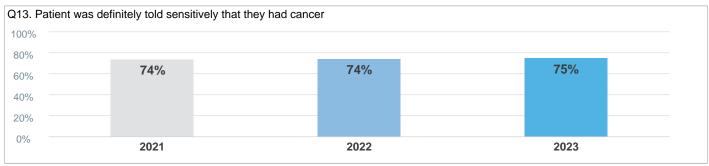


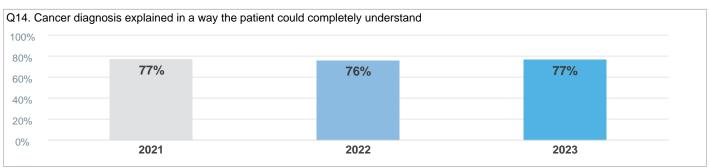


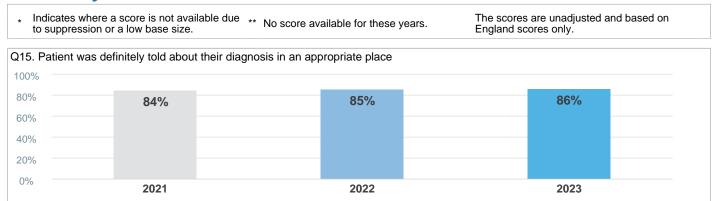


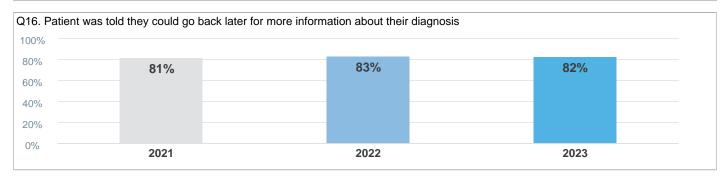


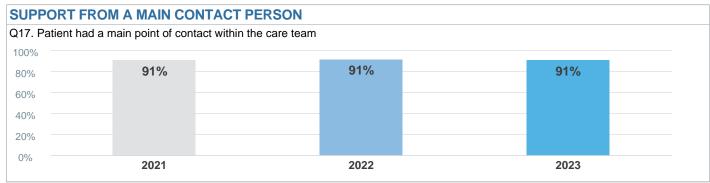


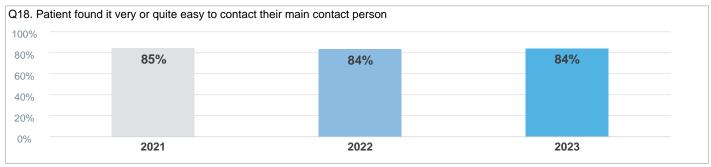


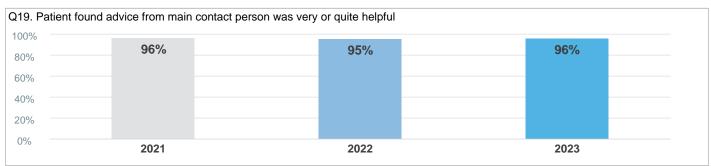




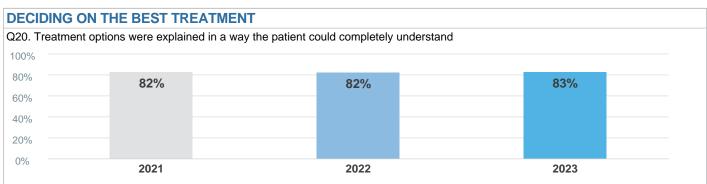


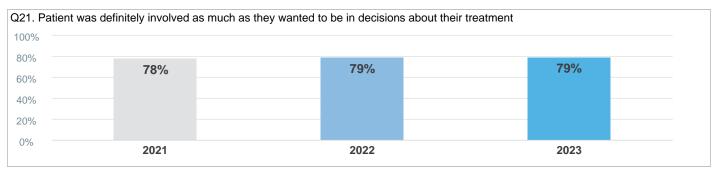


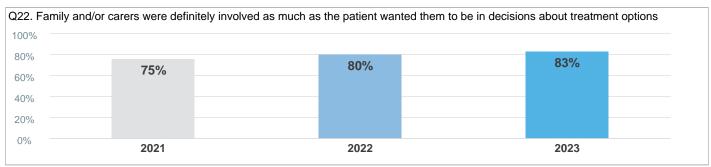


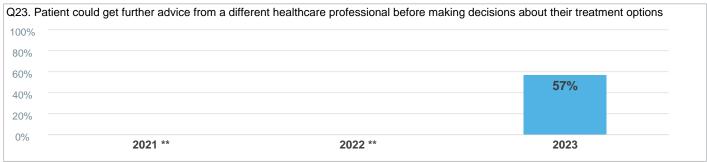


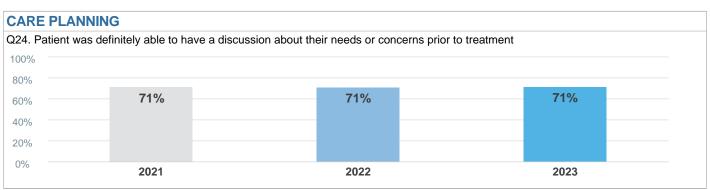




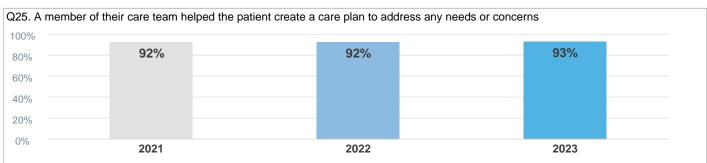


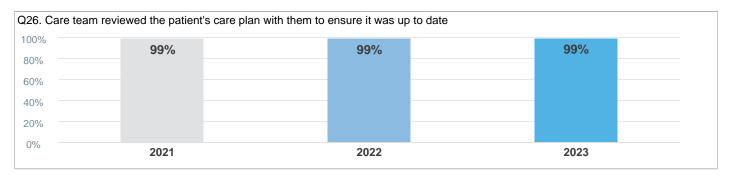


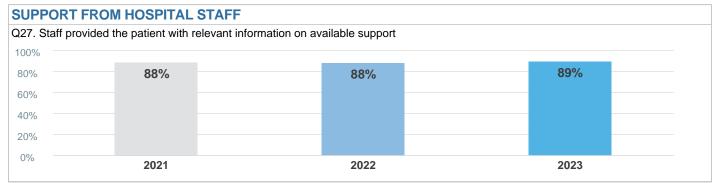


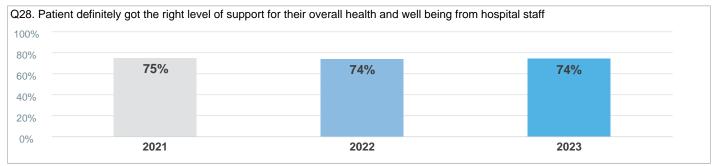


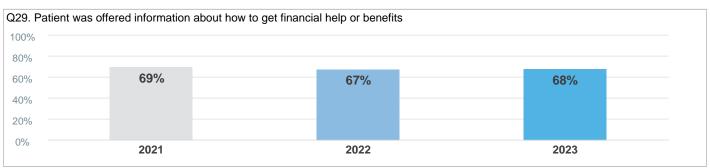




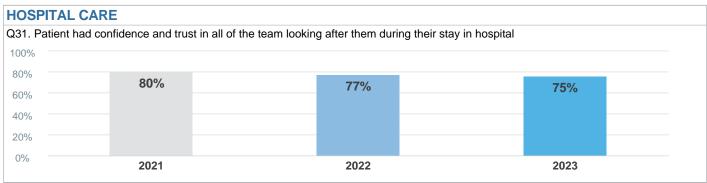


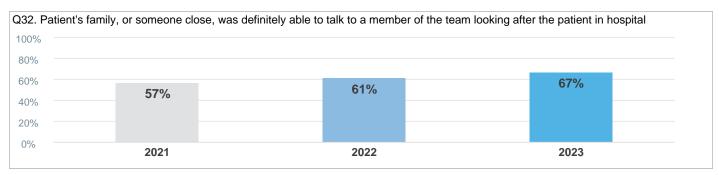


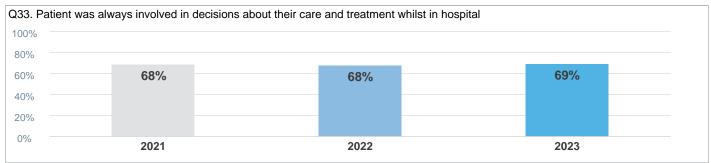


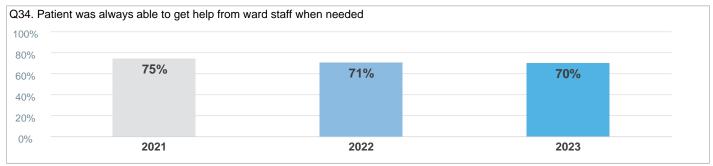


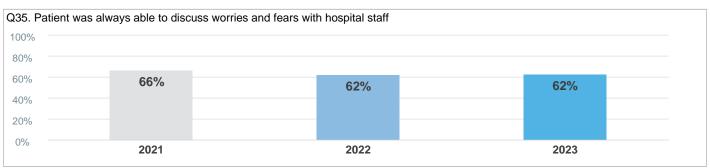












2023

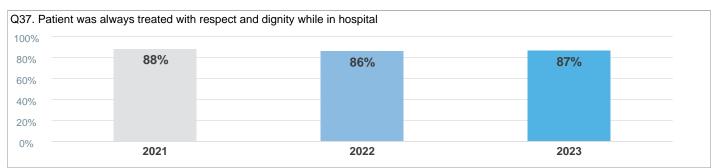
Year on year charts

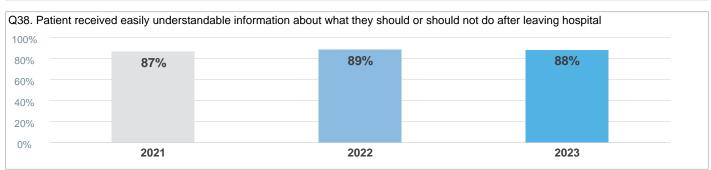
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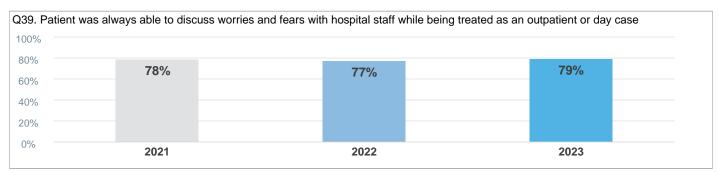
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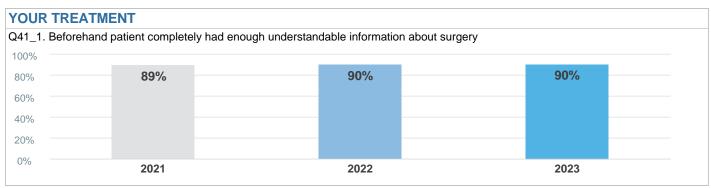


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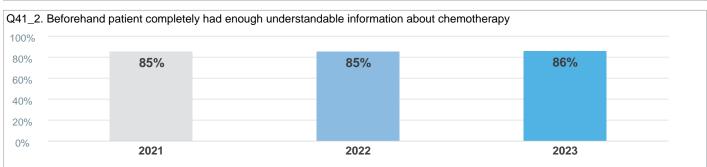


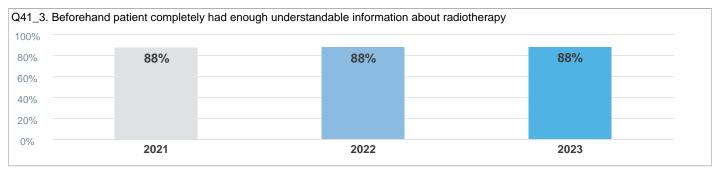


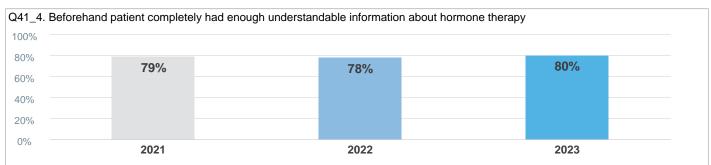


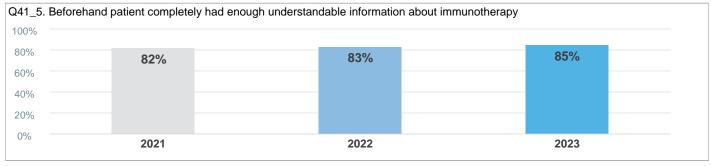


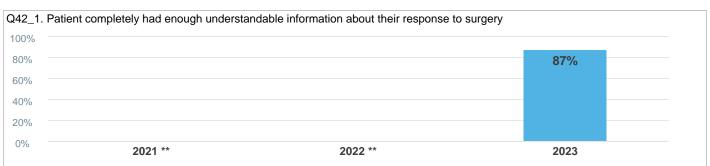












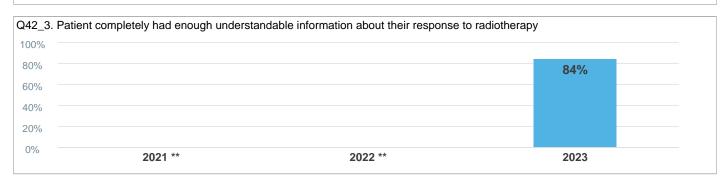
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Year on year charts

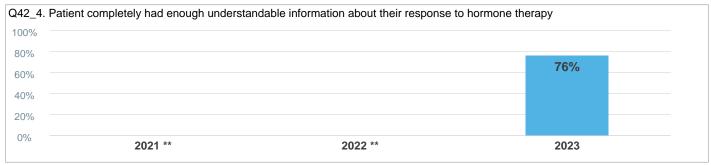
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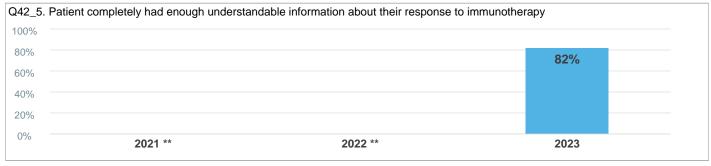
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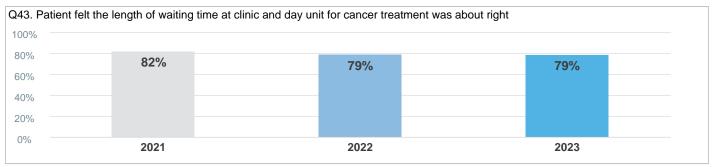


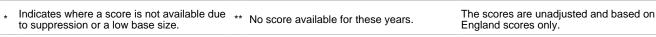


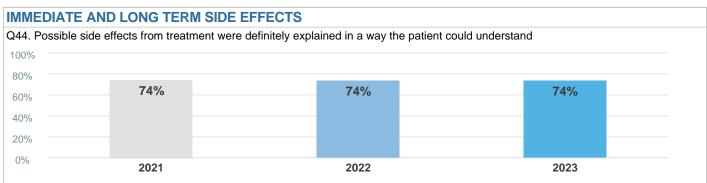
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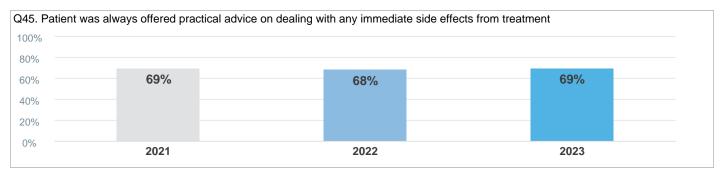


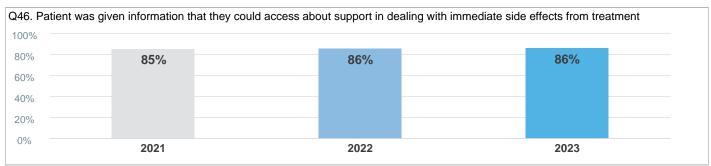


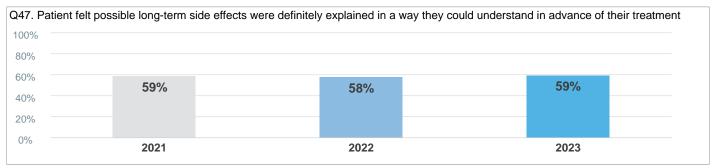


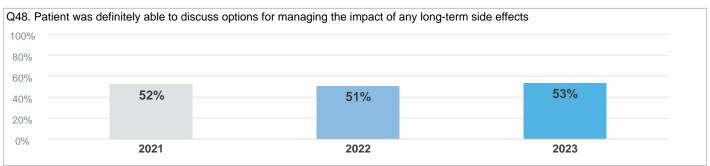


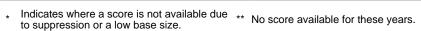




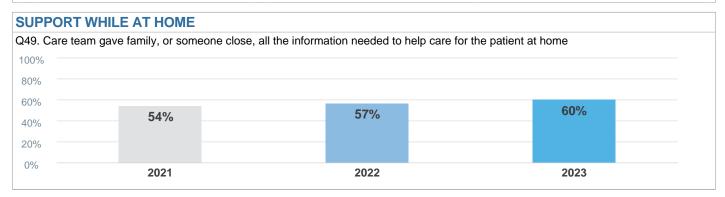


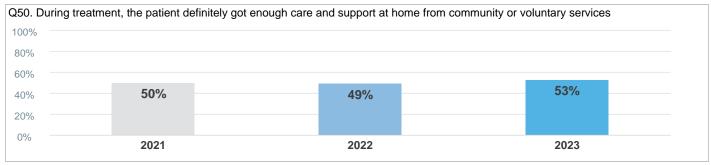


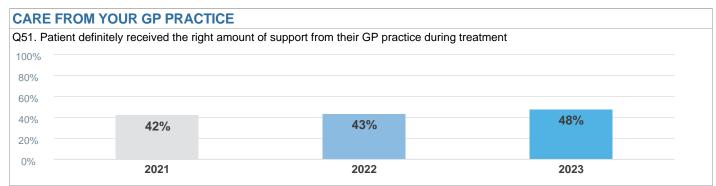


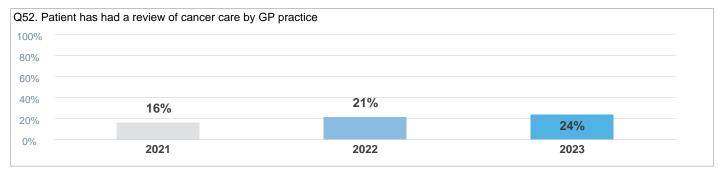


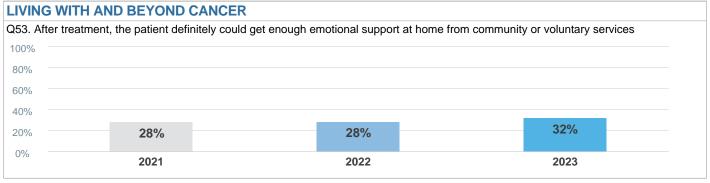
The scores are unadjusted and based on England scores only.



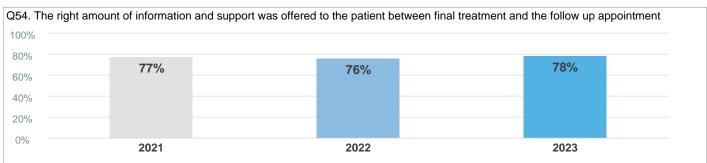


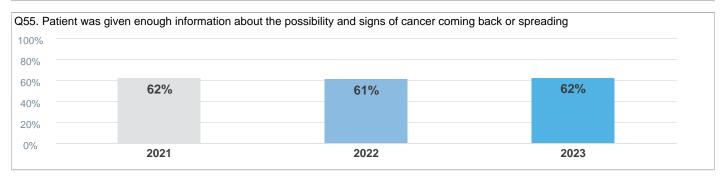


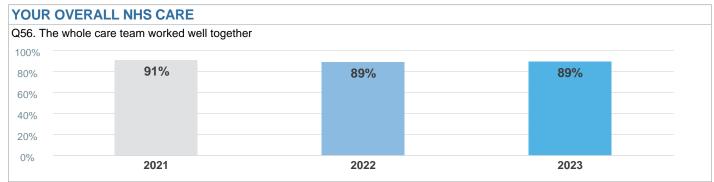


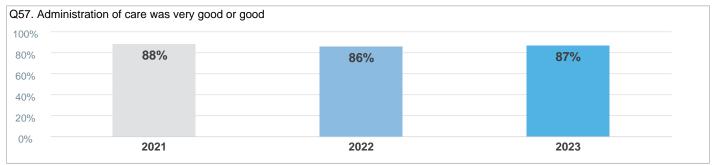


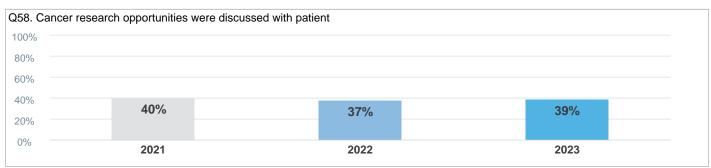














Trust expected range summary

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		
RL1	The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust			
RLQ	Wye Valley NHS Trust		53	8
RKB	University Hospitals Coventry and Warwickshire NHS Trust	3	50	8
RBK	Walsall Healthcare NHS Trust	3	54	4
RRJ	The Royal Orthopaedic Hospital NHS Foundation Trust		55	
RXK	Sandwell and West Birmingham Hospitals NHS Trust		61	
RXW	The Shrewsbury and Telford Hospital NHS Trust	4	54	3
RLT	George Eliot Hospital NHS Trust	3	55	1
RJE	University Hospitals of North Midlands NHS Trust	5	54	2
RWP	Worcestershire Acute Hospitals NHS Trust	12	46	3
RNA	The Dudley Group NHS Foundation Trust	12	48	1
RL4	The Royal Wolverhampton NHS Trust	15	45	1
RRK	University Hospitals Birmingham NHS Foundation Trust	17	44	

ICB expected range summary

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

Number of scores below the lower expected range

Number of scores between the upper and lower expected ranges

Number of scores above the upper expected range

	ICB	Expected range classification			
QWU	NHS Coventry and Warwickshire Integrated Care Board		54	7	
QNC	NHS Staffordshire and Stoke-on-Trent Integrated Care Board	3	57	1	
QGH	NHS Herefordshire and Worcestershire Integrated Care Board	7	51	3	
QOC	NHS Shropshire, Telford and Wrekin Integrated Care Board	5	55	1	
QUA	NHS Black Country Integrated Care Board	10	50	1	
QHL	NHS Birmingham and Solihull Integrated Care Board	16	45		