

Cancer Patient Experience Survey

2023 Results

NHS Birmingham and Solihull Integrated Care Board

Published November 2024

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

Contents

xecutive summary	3
ntroduction	4
Methodology	4
Inderstanding the results	5
urther information	6
Response rate	8
xpected range charts	10
Comparability tables	14
umour group tables	18
sge group tables	23
fale/Female/Non-binary/Other tables	27
thnicity tables	32
MD quintile tables	36
ong-term condition status tables	40
ear on year charts	44

Executive summary

Questions above expected range

NHS Birmingham and Solihull Integrated Care Board has no scores above expected range.

Questions below expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q5. Patient received all the information needed about the diagnostic test in advance	89%	90%	95%	92%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	69%	73%	82%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	92%	93%	97%	95%
Q16. Patient was told they could go back later for more information about their diagnosis	79%	80%	88%	84%
Q17. Patient had a main point of contact within the care team	87%	88%	94%	91%
Q19. Patient found advice from main contact person was very or quite helpful	93%	94%	97%	96%
Q27. Staff provided the patient with relevant information on available support	86%	88%	94%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	71%	80%	76%
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	72%	73%	82%	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	64%	65%	75%	70%
Q34. Patient was always able to get help from ward staff when needed	66%	68%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	56%	60%	70%	65%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	71%	74%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	56%	58%	69%	64%
Q56. The whole care team worked well together	87%	87%	93%	90%
Q57. Administration of care was very good or good	83%	84%	90%	87%

Introduction

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

Note on question comparability

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

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

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 ICB 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.

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

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

Scoring methodology

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

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

Statistical significance

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

Suppression

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

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

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

The same rule applies to groups in each sub-group breakdown. For example, if only one ICB has the 85+ age group suppressed for Q25 we will need to suppress another ICB'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 ICB scored for each question in the survey compared with England results. It is aimed at helping individual ICBs to understand their performance and identify areas for local and regional 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 ICB.

ICBs 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 ICB performs better than what ICBs 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 ICB's size and demographics.

Comparability tables

The comparability tables show the 2022 and 2023 unadjusted scores for this ICB 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 ICBs may not be comparable, as they do not account for the impact that differing patient populations might have on results.

Tumour group tables

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

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

National level and England level data

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

Overall response rate at response rate sections shows national level counts and response rate. For ICBs 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

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

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

Response rate

Overall response rate

656 patients responded out of a total of 1,442 patients, resulting in a response rate of 45%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	1,543	1,442	656	45%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	526
Online	130
Phone	0
Translation service	0
Total	656

Respondents by tumour group

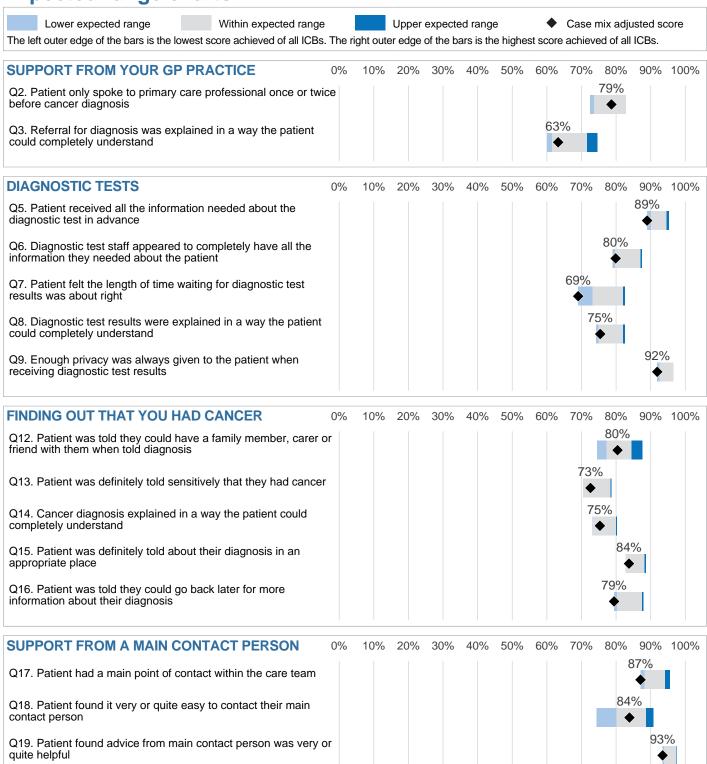
	Number of respondents
Brain / CNS	*
Breast	162
Colorectal / LGT	94
Gynaecological	42
Haematological	69
Head and neck	23
Lung	33
Prostate	60
Sarcoma	*
Skin	33
Upper gastro	19
Urological	53
Other	59
Total	656

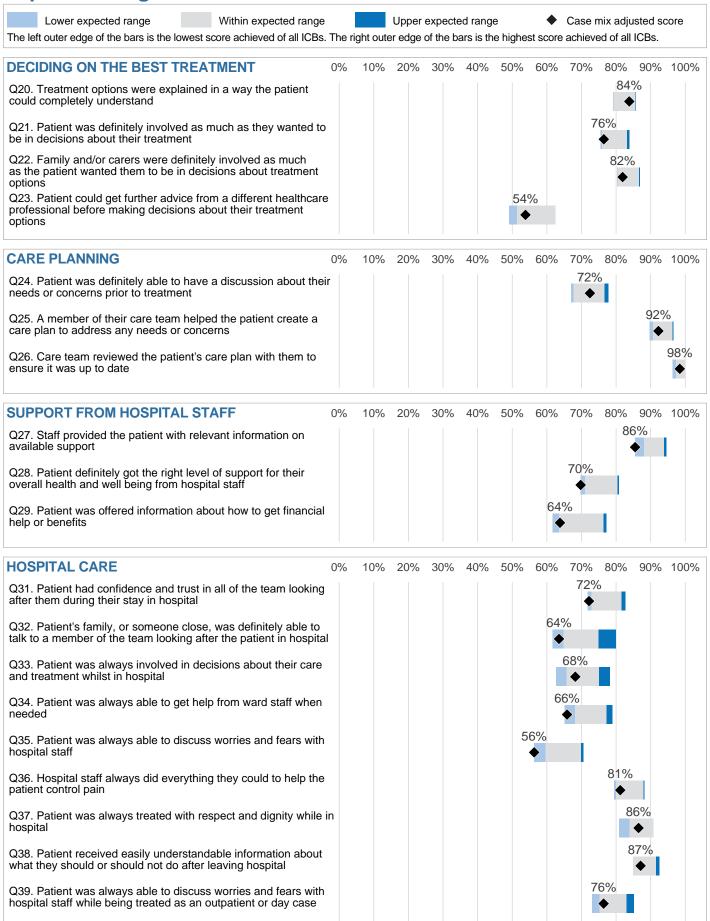
Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

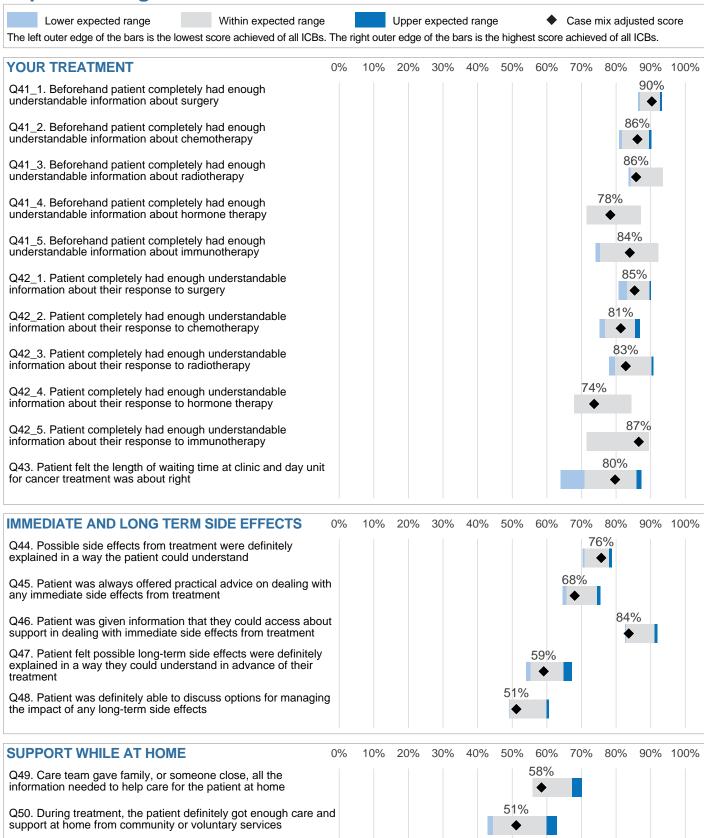
Respondents by ethnicity

	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	483
Irish	14
Gypsy or Irish Traveller	*
Roma	*
Any other White background	6
Mixed / Multiple Ethnic Groups	I
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	18
Pakistani	22
Bangladeshi	*
Chinese	*
Any other Asian background	6
Black / African / Caribbean / Black British	
African	8
Caribbean	27
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	50
Total	656

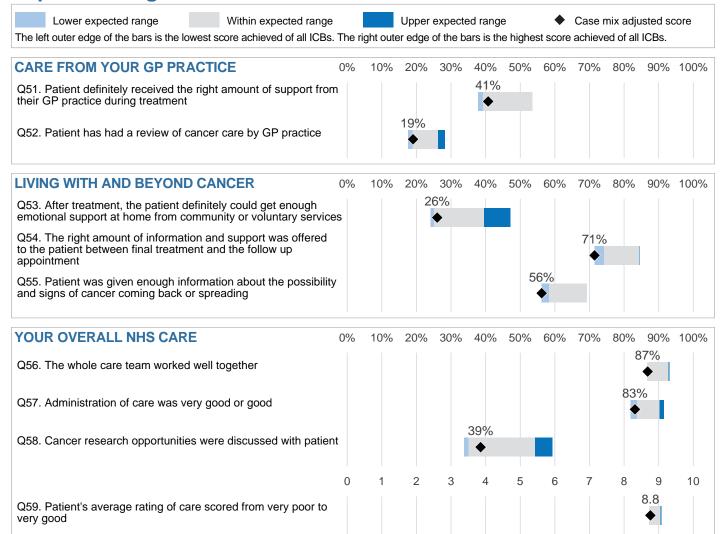
^{*} indicates the count is not shown due to suppression







Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board



Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

Comparability tables

Adjusted score below lower

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

			Unadjust	ted score	es		Case n	nix adjuste	ed 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	290	76%	307	78%			79%	74%	83%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	392	59%	414	62%			63%	61%	72%	67%

	Unadjusted scores Case mix adjuste								ed scores	
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q5. Patient received all the information needed about the diagnostic test in advance	513	91%	521	89%			89%	90%	95%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	541	80%	547	79%		•	80%	80%	87%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	538	75%	546	69%		•	69%	73%	82%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	542	76%	559	75%			75%	75%	82%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	542	94%	550	92%			92%	93%	97%	95%

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	581	78%	611	81%		A	80%	77%	84%	81%
Q13. Patient was definitely told sensitively that they had cancer	606	74%	639	73%			73%	70%	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	612	78%	642	76%			75%	73%	80%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	615	83%	638	84%			84%	83%	88%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	554	82%	554	80%			79%	80%	88%	84%

			Unadjust	ed score	s		Case n	nix adjuste	d scores	
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q17. Patient had a main point of contact within the care team	585	91%	610	88%			87%	88%	94%	91%
Q18. Patient found it very or quite easy to contact their main contact person	477	83%	477	84%			84%	80%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	513	95%	514	93%			93%	94%	97%	96%

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

Comparability tables

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

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges
Adjusted score above upper expected range

**	No	score	availal	ble t	for	2022.
----	----	-------	---------	-------	-----	-------

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	576	80%	604	84%			84%	79%	86%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	606	77%	643	76%			76%	76%	83%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	516	78%	556	81%		•	82%	80%	87%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	367	55%			54%	51%	62%	57%

			Unadjus	ted score	es		Case n	ed 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	548	71%	568	73%			72%	68%	77%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	335	90%	303	92%			92%	91%	96%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	264	98%	247	98%			98%	97%	100%	99%

			Unadjust	ted score		Case n				
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q27. Staff provided the patient with relevant information on available support	488	84%	523	85%			86%	88%	94%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	608	74%	638	70%			70%	71%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	350	62%	390	64%			64%	64%	77%	70%

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

Comparability tables

Adjusted score below lower

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

	Unadjusted scores						Case n	nix adjuste	ed scores	
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	345	74%	365	72%			72%	73%	82%	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	277	59%	317	64%		•	64%	65%	75%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	335	63%	362	69%			68%	66%	75%	70%
Q34. Patient was always able to get help from ward staff when needed	340	65%	358	66%			66%	68%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	329	57%	347	56%			56%	60%	70%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	299	79%	328	81%			81%	80%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	342	85%	363	86%			86%	84%	91%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	335	87%	353	87%			87%	85%	92%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	528	72%	539	76%			76%	75%	83%	79%

	Unadjusted scores						Case n	d scores		
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	417	89%	418	90%			90%	87%	93%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	278	84%	311	86%			86%	82%	90%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	203	88%	174	86%			86%	84%	94%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	98	78%	102	79%			78%	71%	87%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	50	82%	74	85%			84%	75%	92%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	408	85%			85%	83%	90%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	312	82%			81%	77%	86%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	174	83%			83%	80%	90%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	102	75%			74%	68%	84%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	74	88%			87%	72%	90%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	594	81%	620	79%		•	80%	71%	86%	78%

Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

Comparability tables

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

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges Adjusted score above upper expected range

**	No score	available	for 2022.
----	----------	-----------	-----------

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	576	74%	601	76%			76%	71%	78%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	545	65%	571	69%			68%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	455	84%	454	83%			84%	83%	91%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	545	58%	572	61%			59%	55%	65%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	471	49%	485	52%			51%	49%	60%	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	423	54%	446	59%		A	58%	56%	67%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	253	40%	248	50%			51%	44%	60%	52%

			Unadjust	ted score	S		Case n	nix adjuste	d 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	347	37%	342	41%			41%	39%	54%	46%
Q52. Patient has had a review of cancer care by GP practice	584	22%	610	20%			19%	19%	26%	23%

			Unadjus	ted score	s		Case n	nix adjuste	d 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	168	23%	162	27%			26%	25%	39%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	300	72%	315	71%			71%	74%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	472	60%	522	57%			56%	58%	69%	64%

			Unadjus	ted score		Case n				
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q56. The whole care team worked well together	579	88%	604	87%			87%	87%	93%	90%
Q57. Administration of care was very good or good	599	86%	632	84%			83%	84%	90%	87%
Q58. Cancer research opportunities were discussed with patient	349	40%	369	39%			39%	35%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	581	8.7	621	8.7			8.8	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	96%	70%	76%	59%	38%	*	83%	*	96%	62%	73%	68%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	83%	49%	41%	46%	42%	53%	71%	*	77%	53%	65%	58%	62%

DIAGNOSTIC TESTS							Tumo	ur 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	*	82%	88%	83%	91%	100%	96%	88%	*	91%	89%	93%	93%	89%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	80%	84%	73%	69%	65%	90%	78%	*	84%	65%	84%	73%	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	58%	75%	54%	81%	75%	83%	77%	*	75%	84%	60%	66%	69%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	69%	74%	84%	75%	85%	87%	76%	*	91%	63%	75%	68%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	95%	91%	95%	90%	95%	97%	85%	*	97%	89%	91%	84%	92%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	90%	89%	83%	74%	70%	84%	71%	*	73%	84%	64%	79%	81%
Q13. Patient was definitely told sensitively that they had cancer	*	73%	85%	63%	74%	87%	82%	51%	*	91%	63%	66%	77%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	76%	83%	76%	71%	74%	82%	72%	*	88%	74%	64%	71%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	88%	89%	80%	85%	96%	85%	73%	*	91%	79%	84%	75%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	*	85%	80%	82%	80%	90%	82%	80%	*	88%	65%	70%	67%	80%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	83%	89%	88%	98%	100%	94%	81%	*	94%	100%	77%	82%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	83%	94%	86%	86%	95%	68%	74%	*	87%	88%	74%	80%	84%
Q19. Patient found advice from main contact person was very or quite helpful	*	93%	100%	83%	92%	100%	90%	93%	*	93%	100%	94%	88%	93%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	79%	90%	83%	80%	91%	91%	78%	*	97%	94%	79%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	71%	78%	73%	80%	78%	88%	71%	*	91%	74%	72%	76%	76%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	77%	81%	79%	86%	82%	84%	88%	*	96%	79%	78%	73%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	55%	63%	55%	61%	88%	48%	56%	*	62%	*	34%	40%	55%

CARE PLANNING							Tumo	ur gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	69%	78%	60%	79%	91%	79%	69%	*	74%	83%	79%	59%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	83%	96%	87%	100%	100%	100%	100%	*	100%	90%	95%	84%	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	96%	98%	100%	100%	100%	100%	100%	*	90%	*	100%	100%	98%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	86%	80%	90%	91%	95%	89%	91%	*	88%	87%	66%	81%	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	65%	70%	56%	85%	91%	76%	69%	*	76%	79%	64%	61%	70%
Q29. Patient was offered information about how to get financial help or benefits	*	68%	65%	61%	69%	100%	64%	63%	*	43%	75%	19%	58%	64%

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	*	63%	69%	72%	75%	75%	75%	91%	*	*	75%	74%	73%	72%
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%	57%	65%	68%	56%	71%	81%	*	*	64%	62%	59%	64%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	64%	70%	73%	75%	81%	81%	63%	*	*	58%	63%	64%	69%
Q34. Patient was always able to get help from ward staff when needed	*	59%	74%	67%	55%	50%	69%	84%	*	*	83%	70%	57%	66%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	51%	64%	45%	50%	60%	50%	74%	*	*	67%	61%	46%	56%
Q36. Hospital staff always did everything they could to help the patient control pain	*	75%	88%	90%	76%	71%	88%	90%	*	*	82%	79%	69%	81%
Q37. Patient was always treated with respect and dignity while in hospital	*	77%	92%	88%	81%	81%	81%	97%	*	*	83%	94%	86%	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	85%	86%	97%	91%	94%	73%	87%	*	*	75%	91%	86%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	70%	70%	86%	77%	68%	77%	78%	*	90%	79%	78%	74%	76%

YOUR TREATMENT							Tumo	ur 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	*	88%	90%	91%	*	100%	72%	86%	*	93%	100%	95%	89%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	84%	92%	86%	84%	*	82%	100%	*	*	81%	89%	81%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	82%	95%	*	*	93%	*	70%	*	*	*	*	87%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	76%	*	*	*	*	*	93%	*	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	73%	*	*	*	*	91%	*	*	*	*	92%	*	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	86%	89%	87%	*	94%	69%	74%	*	90%	92%	79%	83%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	77%	82%	89%	83%	*	75%	90%	*	*	75%	89%	79%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	81%	89%	*	*	100%	*	60%	*	*	*	*	80%	83%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	73%	*	*	*	*	*	82%	*	*	*	*	*	75%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	82%	*	*	*	*	100%	*	*	*	*	88%	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	74%	85%	84%	76%	83%	81%	77%	*	88%	100%	73%	75%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	73%	74%	79%	73%	90%	77%	78%	*	82%	68%	84%	74%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	66%	72%	70%	64%	83%	76%	69%	*	64%	71%	67%	65%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	80%	89%	90%	87%	85%	86%	82%	*	77%	86%	70%	80%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	61%	67%	66%	61%	86%	57%	54%	*	64%	53%	56%	47%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	54%	52%	53%	51%	71%	38%	56%	*	60%	54%	41%	41%	52%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	60%	55%	57%	65%	74%	72%	48%	*	57%	67%	40%	59%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	45%	56%	56%	59%	60%	*	38%	*	*	*	38%	47%	50%

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	*	43%	45%	41%	47%	31%	27%	37%	*	31%	*	31%	41%	41%
Q52. Patient has had a review of cancer care by GP practice	*	20%	19%	22%	22%	26%	13%	30%	*	13%	13%	13%	30%	20%

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	*	22%	25%	*	50%	*	*	23%	*	*	*	*	31%	27%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	65%	75%	75%	83%	100%	64%	73%	*	63%	75%	60%	67%	71%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	50%	47%	65%	73%	67%	48%	43%	*	75%	54%	60%	60%	57%

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	*	82%	89%	92%	87%	96%	91%	86%	*	84%	88%	86%	93%	87%
Q57. Administration of care was very good or good	*	81%	85%	87%	92%	96%	81%	68%	*	85%	89%	76%	91%	84%
Q58. Cancer research opportunities were discussed with patient	*	26%	49%	42%	67%	47%	50%	31%	*	31%	42%	16%	34%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	8.5	8.9	8.8	9.0	9.0	8.9	8.3	*	8.9	8.9	8.7	8.8	8.7

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	82%	74%	81%	79%	80%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	86%	58%	61%	57%	67%	62%

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	*	*	*	90%	83%	91%	91%	90%	89%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	88%	70%	84%	80%	77%	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	71%	59%	71%	74%	91%	69%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	80%	67%	83%	72%	82%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	94%	89%	95%	91%	86%	92%

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	*	*	*	82%	80%	82%	82%	87%	81%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	75%	62%	76%	78%	81%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	72%	66%	84%	74%	92%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	80%	77%	87%	87%	92%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	86%	80%	85%	71%	70%	80%

SUPPORT FROM A MAIN CONTACT PERSO	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	*	90%	87%	87%	85%	100%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	88%	82%	86%	82%	76%	84%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	98%	90%	93%	94%	94%	93%

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	*	*	*	88%	82%	86%	83%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	73%	72%	80%	78%	73%	76%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	84%	76%	84%	83%	91%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	60%	47%	63%	51%	*	55%

CARE PLANNING					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	82%	73%	73%	70%	71%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	89%	88%	93%	94%	100%	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	95%	100%	100%	90%	98%

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	*	*	*	80%	87%	91%	82%	80%	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	69%	66%	70%	75%	80%	70%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	67%	72%	67%	52%	*	64%

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	*	*	*	69%	62%	77%	76%	90%	72%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	57%	56%	74%	63%	*	64%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	72%	61%	69%	75%	*	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	59%	60%	70%	70%	*	66%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	50%	52%	65%	54%	*	56%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	74%	73%	88%	85%	*	81%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	81%	78%	91%	89%	90%	86%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	86%	81%	88%	90%	*	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	80%	70%	81%	76%	75%	76%

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	*	*	*	90%	84%	95%	90%	100%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	84%	80%	90%	87%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	84%	82%	92%	81%	*	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	80%	70%	84%	80%	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	83%	84%	95%	*	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	85%	81%	89%	85%	*	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	79%	81%	81%	81%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	79%	82%	88%	76%	*	83%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	53%	70%	84%	76%	*	75%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	83%	92%	90%	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	78%	76%	81%	82%	83%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS				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	*	*	*	76%	76%	78%	77%	65%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	77%	66%	75%	61%	63%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	90%	78%	86%	83%	*	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	65%	63%	60%	55%	59%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	57%	55%	52%	46%	53%	52%

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	*	*	*	67%	56%	60%	57%	64%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	55%	42%	57%	50%	*	50%

CARE FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	56%	38%	42%	34%	*	41%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	23%	18%	23%	20%	9%	20%

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	*	*	*	36%	23%	26%	22%	*	27%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	75%	63%	79%	74%	60%	71%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	57%	54%	62%	50%	68%	57%

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	*	*	*	88%	83%	89%	90%	91%	87%
Q57. Administration of care was very good or good	*	*	*	88%	78%	87%	82%	92%	84%
Q58. Cancer research opportunities were discussed with patient	*	*	*	31%	47%	42%	33%	*	39%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.8	8.4	9.0	8.7	9.0	8.7

SUPPORT FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77%	80%	*	*	*	77%	78%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65%	62%	*	*	*	37%	62%	

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	87%	91%	*	*	*	89%	89%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	79%	80%	*	*	*	73%	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	64%	75%	*	*	*	70%	69%
Q8. Diagnostic test results were explained in a way the patient could completely understand	74%	77%	*	*	*	61%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	90%	*	*	*	90%	92%

FINDING OUT THAT YOU HAD CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	84%	77%	*	*	*	88%	81%	
Q13. Patient was definitely told sensitively that they had cancer	74%	73%	*	*	*	83%	73%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	76%	*	*	*	78%	76%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	84%	85%	*	*	*	92%	84%	
Q16. Patient was told they could go back later for more information about their diagnosis	80%	82%	*	*	*	72%	80%	

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	86%	89%	*	*	*	91%	88%	
Q18. Patient found it very or quite easy to contact their main contact person	85%	83%	*	*	*	78%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	93%	97%	*	*	*	77%	93%	

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	87%	*	*	*	86%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	79%	*	*	*	74%	76%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	84%	*	*	*	79%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	57%	55%	*	*	*	44%	55%

CARE PLANNING		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	71%	76%	*	*	*	68%	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	88%	98%	*	*	*	93%	92%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	97%	100%	*	*	*	100%	98%	

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	85%	87%	*	*	*	85%	85%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	67%	76%	*	*	*	65%	70%	
Q29. Patient was offered information about how to get financial help or benefits	62%	65%	*	*	*	73%	64%	

HOSPITAL CARE			Male/Fema	Male/Female/Non-binary/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	70%	76%	*	*	*	73%	72%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	65%	*	*	*	67%	64%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	67%	69%	*	*	*	75%	69%		
Q34. Patient was always able to get help from ward staff when needed	62%	71%	*	*	*	63%	66%		
Q35. Patient was always able to discuss worries and fears with hospital staff	49%	65%	*	*	*	50%	56%		
Q36. Hospital staff always did everything they could to help the patient control pain	79%	82%	*	*	*	85%	81%		
Q37. Patient was always treated with respect and dignity while in hospital	82%	90%	*	*	*	93%	86%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	87%	*	*	*	81%	87%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	73%	80%	*	*	*	61%	76%		

YOUR TREATMENT			Male/Fema	ile/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	90%	*	*	*	87%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	83%	95%	*	*	*	73%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	85%	90%	*	*	*	*	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	74%	94%	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	75%	91%	*	*	*	*	85%
Q42_1. Patient completely had enough understandable nformation about their response to surgery	88%	81%	*	*	*	92%	85%
Q42_2. Patient completely had enough understandable nformation about their response to chemotherapy	78%	88%	*	*	*	86%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	83%	87%	*	*	*	*	83%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	71%	84%	*	*	*	*	75%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	85%	89%	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	81%	*	*	*	82%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	77%	*	*	*	77%	76%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	70%	*	*	*	62%	69%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	87%	*	*	*	67%	83%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	62%	*	*	*	53%	61%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	54%	*	*	*	48%	52%	

SUPPORT WHILE AT HOME			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	58%	62%	*	*	*	52%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	50%	54%	*	*	*	41%	50%

CARE FROM YOUR GP PRACTICE	IR GP PRACTICE Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	41%	41%	*	*	*	39%	41%
Q52. Patient has had a review of cancer care by GP practice	20%	20%	*	*	*	23%	20%

LIVING WITH AND BEYOND CANCER	Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	29%	27%	*	*	*	8%	27%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	69%	76%	*	*	*	65%	71%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	55%	59%	*	*	*	58%	57%	

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	86%	89%	*	*	*	85%	87%	
Q57. Administration of care was very good or good	83%	84%	*	*	*	85%	84%	
Q58. Cancer research opportunities were discussed with patient	39%	41%	*	*	*	35%	39%	
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.8	*	*	*	8.8	8.7	

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	81%	*	59%	80%	*	74%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	63%	*	71%	65%	*	39%	62%

DIAGNOSTIC TESTS				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	*	79%	88%	*	89%	89%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	81%	*	70%	72%	*	70%	79%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	69%	*	62%	64%	*	68%	69%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	*	59%	50%	*	63%	75%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	*	90%	87%	*	90%	92%

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	81%	*	84%	76%	*	81%	81%
Q13. Patient was definitely told sensitively that they had cancer	73%	*	78%	69%	*	83%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	*	66%	57%	*	74%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	84%	*	86%	83%	*	91%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	*	78%	81%	*	76%	80%

SUPPORT FROM A MAIN CONTACT PERSO	ON			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	87%	*	90%	83%	*	91%	88%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	85%	80%	*	76%	84%
Q19. Patient found advice from main contact person was very or quite helpful	93%	*	100%	100%	*	83%	93%

DECIDING ON THE BEST TREATMENT		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	85%	*	77%	79%	*	89%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	*	73%	69%	*	79%	76%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	*	66%	72%	*	81%	81%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	56%	*	48%	56%	*	52%	55%	

CARE PLANNING	i				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All		
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	73%	*	67%	70%	*	75%	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	91%	*	100%	88%	*	91%	92%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	*	100%	100%	*	100%	98%		

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	86%	*	87%	81%	*	83%	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	69%	*	77%	66%	*	70%	70%
Q29. Patient was offered information about how to get financial help or benefits	63%	*	61%	66%	*	68%	64%

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	71%	*	75%	76%	*	77%	72%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	63%	*	69%	74%	*	59%	64%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	*	69%	70%	*	77%	69%		
Q34. Patient was always able to get help from ward staff when needed	67%	*	70%	65%	*	60%	66%		
Q35. Patient was always able to discuss worries and fears with hospital staff	57%	*	59%	50%	*	46%	56%		
Q36. Hospital staff always did everything they could to help the patient control pain	82%	*	80%	68%	*	75%	81%		
Q37. Patient was always treated with respect and dignity while in hospital	86%	*	94%	76%	*	88%	86%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	*	79%	85%	*	75%	87%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	*	72%	69%	*	65%	76%		

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	92%	*	82%	80%	*	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	93%	82%	*	83%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	*	94%	70%	*	90%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	*	*	*	*	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	*	*	*	*	*	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	86%	*	81%	75%	*	96%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	*	83%	77%	*	88%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	83%	*	94%	73%	*	90%	83%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	77%	*	*	*	*	*	75%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	86%	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	82%	*	62%	71%	*	72%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS			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	78%	*	76%	62%	*	74%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	*	71%	62%	*	59%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	*	86%	80%	*	76%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	*	72%	55%	*	61%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	*	58%	46%	*	49%	52%

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	59%	*	60%	46%	*	57%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	*	59%	33%	*	43%	50%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	39%	*	53%	48%	*	41%	41%
Q52. Patient has had a review of cancer care by GP practice	18%	*	27%	27%	*	22%	20%

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	25%	*	47%	*	*	7%	27%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	72%	*	80%	63%	*	67%	71%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	58%	*	61%	42%	*	55%	57%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	87%	*	93%	85%	*	82%	87%
Q57. Administration of care was very good or good	83%	*	92%	83%	*	83%	84%
Q58. Cancer research opportunities were discussed with patient	41%	*	33%	50%	*	25%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	8.7	8.5	*	8.5	8.7

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	75%	78%	77%	80%	82%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	62%	60%	55%	74%	63%	62%

DIAGNOSTIC TESTS		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q5. Patient received all the information needed about the diagnostic test in advance	86%	86%	92%	89%	92%	89%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	76%	79%	81%	83%	79%	79%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	71%	65%	71%	66%	70%	69%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	71%	78%	75%	75%	78%	75%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	90%	91%	97%	90%	93%	92%		

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	81%	79%	88%	77%	81%	81%	
Q13. Patient was definitely told sensitively that they had cancer	75%	68%	78%	77%	69%	73%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	72%	77%	77%	79%	75%	76%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	80%	86%	86%	86%	84%	
Q16. Patient was told they could go back later for more information about their diagnosis	82%	84%	81%	77%	74%	80%	

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	88%	90%	87%	82%	90%	88%	
Q18. Patient found it very or quite easy to contact their main contact person	87%	79%	81%	81%	88%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	95%	92%	93%	96%	90%	93%	

IMD quintile tables

DECIDING ON THE BEST TREATMENT			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q20. Treatment options were explained in a way the patient could completely understand	80%	87%	85%	90%	82%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	73%	80%	74%	81%	76%	76%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	75%	82%	79%	85%	89%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	55%	58%	54%	58%	50%	55%

CARE PLANNING			IMD q	uintile		
	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	69%	76%	76%	68%	79%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	94%	89%	88%	94%	92%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	96%	100%	100%	98%	98%

SUPPORT FROM HOSPITAL STAFF	IMD quintile					
	1 (most deprived) 2 3 4 5 (least deprived)					
Q27. Staff provided the patient with relevant information on available support	83%	89%	83%	87%	87%	85%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	74%	71%	69%	66%	70%
Q29. Patient was offered information about how to get financial help or benefits	66%	66%	72%	60%	46%	64%

HOSPITAL CARE			IMD qu	uintile						
	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	77%	76%	79%	61%	60%	72%				
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%	63%	68%	56%	62%	64%				
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	66%	78%	68%	57%	69%				
Q34. Patient was always able to get help from ward staff when needed	73%	68%	69%	63%	50%	66%				
Q35. Patient was always able to discuss worries and fears with hospital staff	53%	59%	62%	55%	50%	56%				
Q36. Hospital staff always did everything they could to help the patient control pain	85%	81%	85%	75%	73%	81%				
Q37. Patient was always treated with respect and dignity while in hospital	87%	83%	89%	84%	85%	86%				
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	87%	88%	85%	85%	87%				
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	76%	75%	78%	73%	74%	76%				

IMD quintile tables

YOUR TREATMENT			IMD q	IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	90%	91%	93%	94%	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	87%	87%	82%	89%	86%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	87%	88%	84%	78%	89%	86%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	90%	81%	73%	61%	79%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	82%	82%	100%	80%	87%	85%		
Q42_1. Patient completely had enough understandable information about their response to surgery	83%	86%	90%	85%	84%	85%		
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	78%	87%	80%	79%	85%	82%		
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	89%	89%	76%	69%	85%	83%		
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	81%	76%	76%	64%	67%	75%		
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	85%	82%	100%	*	88%	88%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	75%	80%	80%	84%	82%	79%		

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	77%	79%	79%	75%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	65%	68%	74%	71%	70%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	82%	85%	84%	78%	87%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	65%	70%	56%	52%	54%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	49%	60%	44%	44%	52%

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	61%	59%	55%	58%	59%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	46%	54%	45%	64%	53%	50%

CARE FROM YOUR GP PRACTICE	M YOUR GP PRACTICE			IMD quintile			
	1 (most deprived) 2 3 4				5 (least deprived)	All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	39%	33%	52%	41%	42%	41%	
Q52. Patient has had a review of cancer care by GP practice	24%	17%	25%	18%	16%	20%	

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	30%	13%	31%	17%	38%	27%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75%	67%	72%	63%	76%	71%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	53%	60%	58%	59%	55%	57%

YOUR OVERALL NHS CARE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	88%	87%	89%	85%	86%	87%
Q57. Administration of care was very good or good	84%	85%	83%	82%	82%	84%
Q58. Cancer research opportunities were discussed with patient	39%	40%	45%	33%	40%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.6	8.8	9.0	8.7	8.7	8.7

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status					
	Yes No Not given					
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	78%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	59%	62%				

DIAGNOSTIC TESTS	Long-term condition status					
	Yes	No	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	89%	89%	88%	89%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	77%	83%	75%	79%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	72%	63%	68%	69%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	79%	59%	75%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	90%	95%	92%	92%		

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	80%	81%	81%
Q13. Patient was definitely told sensitively that they had cancer	74%	73%	73%	73%
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	78%	75%	76%
Q15. Patient was definitely told about their diagnosis in appropriate place	84%	84%	90%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	78%	74%	80%

SUPPORT FROM A MAIN CONTACT PERSO	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	88%	87%	85%	88%
Q18. Patient found it very or quite easy to contact their main contact person	81%	90%	83%	84%
Q19. Patient found advice from main contact person was very or quite helpful	94%	94%	88%	93%

DECIDING ON THE BEST TREATMENT		Long-term con	dition status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	83%	88%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	76%	76%	75%	76%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	79%	82%	81%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	52%	60%	56%	55%

CARE PLANNING	Long-term condition status					
	Yes No Not given All					
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	70%	78%	73%	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	91%	95%	93%	92%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	97%	100%	98%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	86%	85%	88%	85%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	71%	71%	63%	70%	
Q29. Patient was offered information about how to get financial help or benefits	62%	67%	66%	64%	

HOSPITAL CARE	Long-term condition 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	71%	75%	72%	72%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	64%	64%	58%	64%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	71%	63%	69%	
Q34. Patient was always able to get help from ward staff when needed	66%	67%	62%	66%	
Q35. Patient was always able to discuss worries and fears with hospital staff	56%	59%	43%	56%	
Q36. Hospital staff always did everything they could to help the patient control pain	82%	80%	71%	81%	
Q37. Patient was always treated with respect and dignity while in hospital	85%	87%	89%	86%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	89%	79%	87%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	76%	77%	66%	76%	

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	93%	89%	79%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	86%	81%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	88%	83%	80%	86%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	75%	*	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	90%	*	85%
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	87%	83%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	81%	84%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	83%	85%	80%	83%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	77%	69%	80%	75%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	85%	95%	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	80%	78%	82%	79%

IMMEDIATE AND LONG TERM SIDE EFFECTS	3	Long-term condition status		
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	78%	75%	76%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	70%	68%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	83%	68%	83%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	61%	56%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	52%	55%	43%	52%

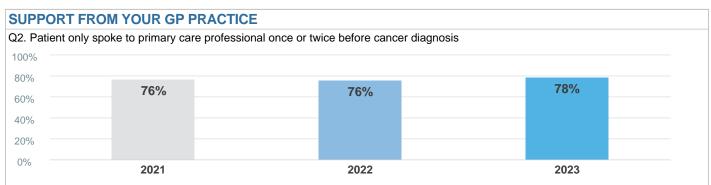
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes No Not given All			
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	60%	61%	46%	59%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	49%	56%	43%	50%

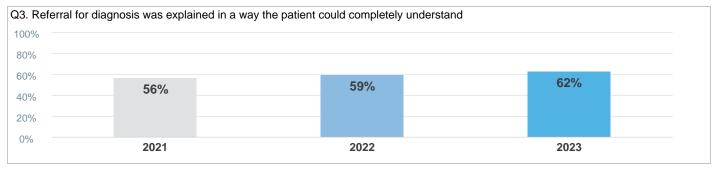
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	38%	47%	35%	41%	
Q52. Patient has had a review of cancer care by GP practice	21%	20%	14%	20%	

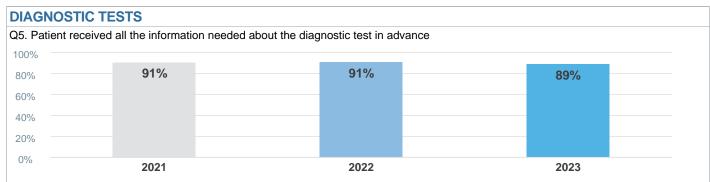
LIVING WITH AND BEYOND CANCER		Long-term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	25%	31%	22%	27%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	71%	74%	68%	71%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	54%	60%	57%	57%

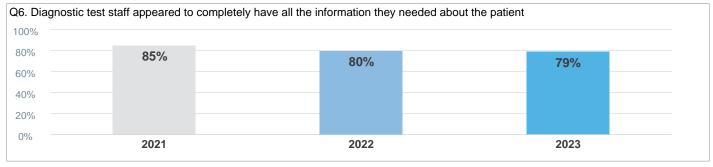
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given				
Q56. The whole care team worked well together	87%	88%	86%	87%	
Q57. Administration of care was very good or good	84%	83%	84%	84%	
Q58. Cancer research opportunities were discussed with patient	39%	42%	31%	39%	
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.8	8.8	8.7	

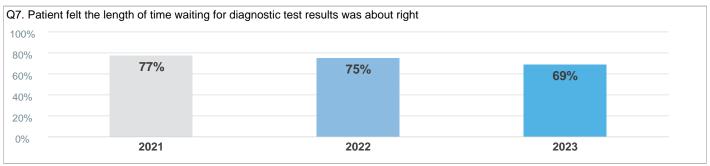


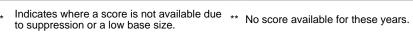


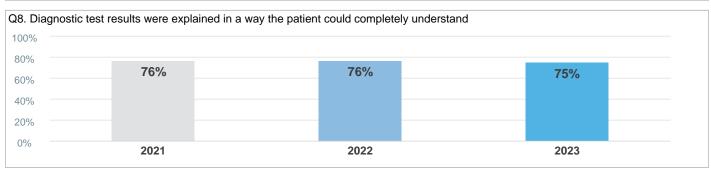


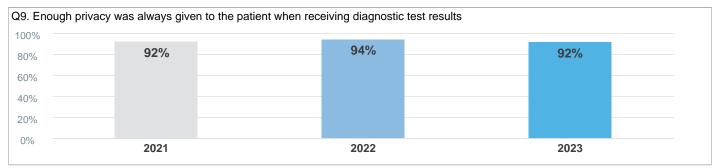


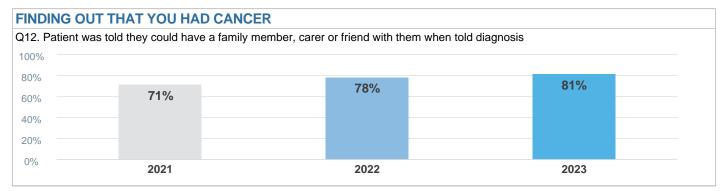


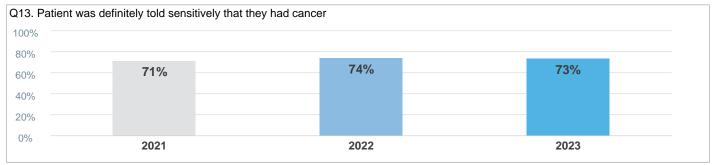


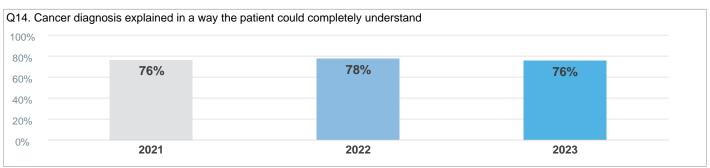


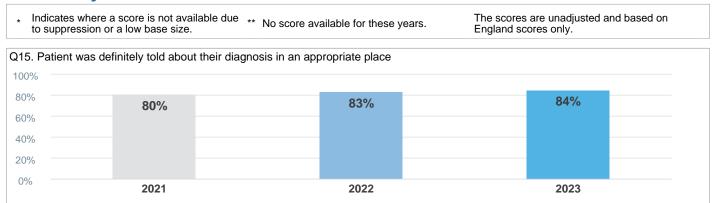


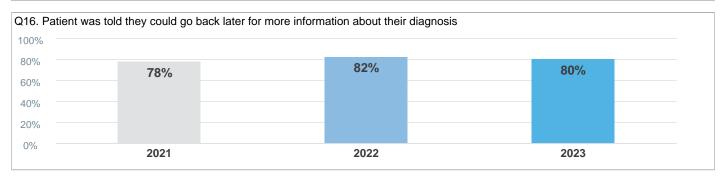


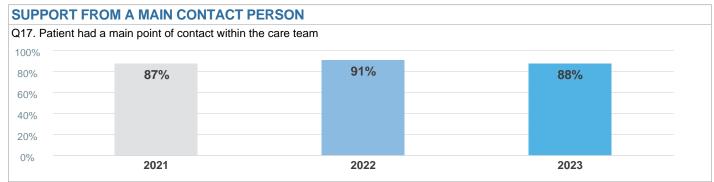


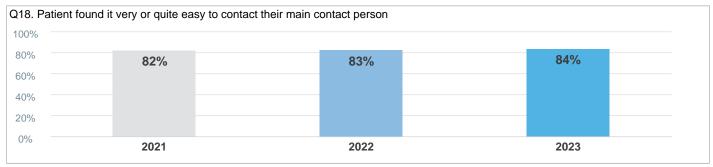


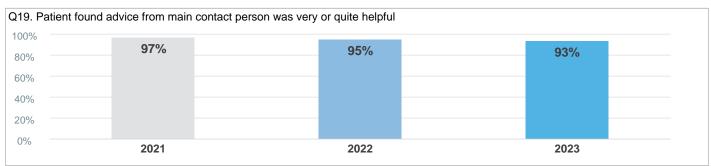




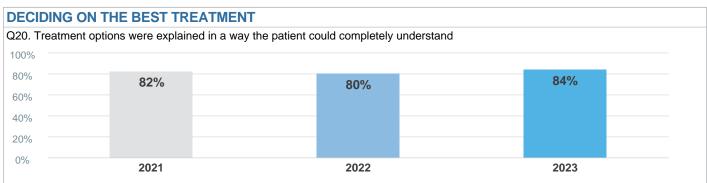


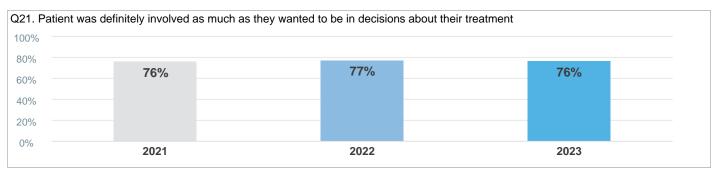


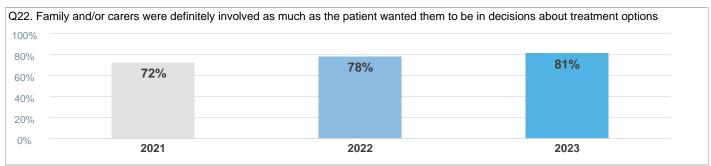


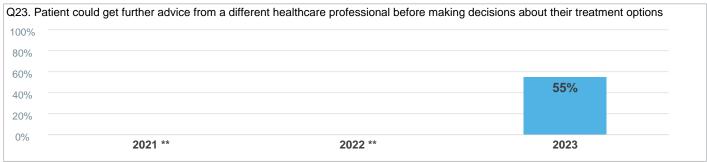


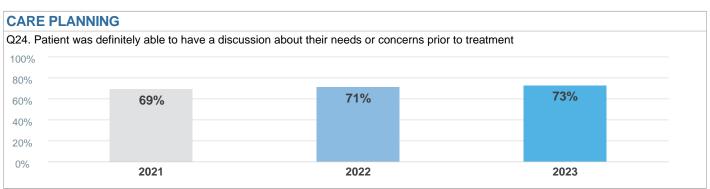


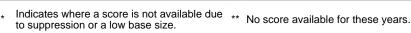


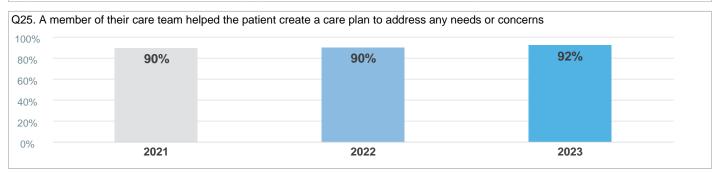


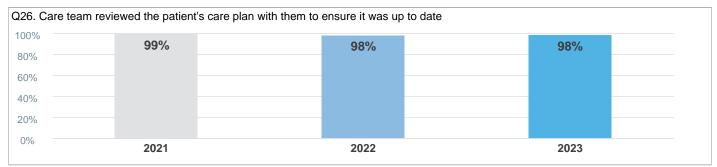


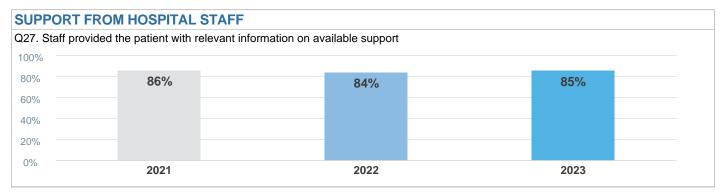


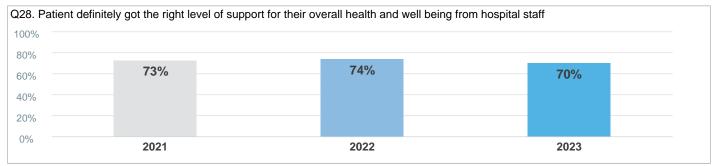


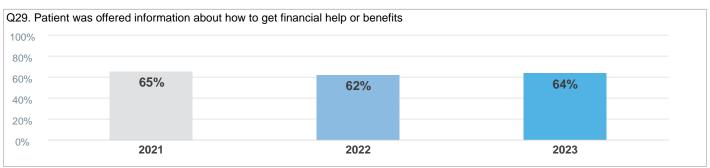




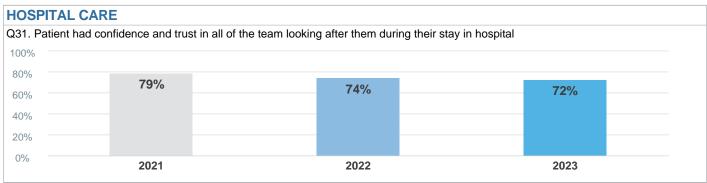


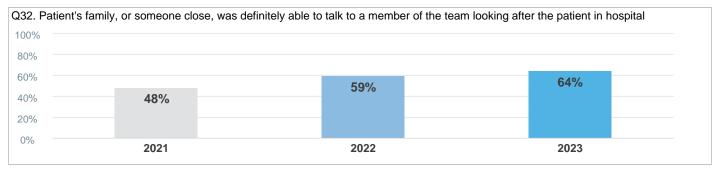


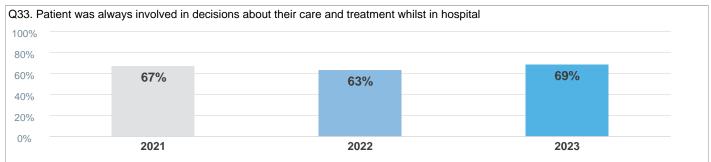


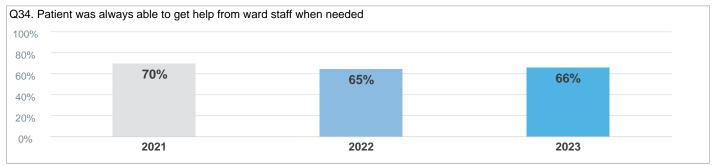


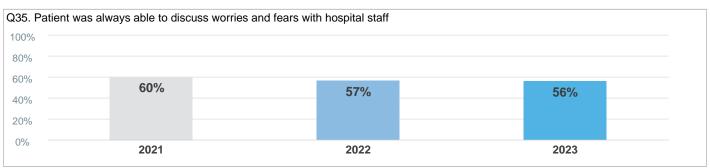












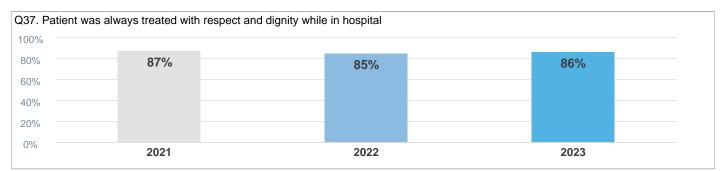
2023

Year on year charts

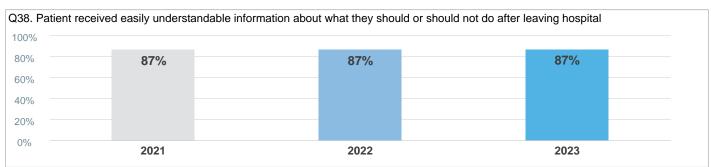
2021

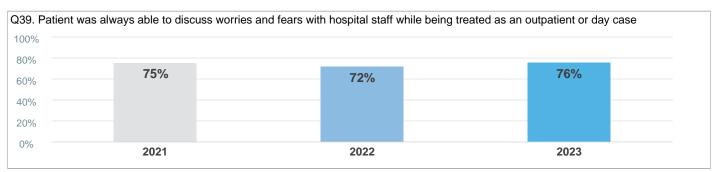
20%

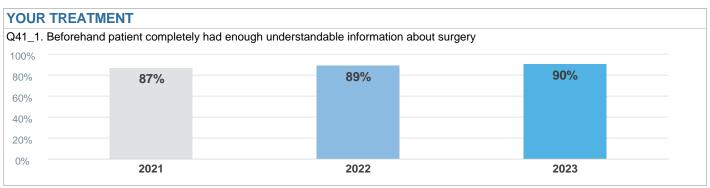


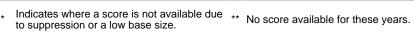


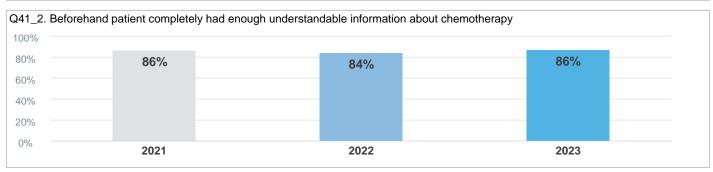
2022

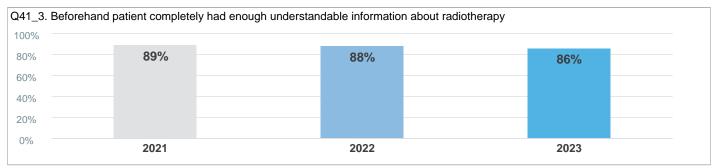


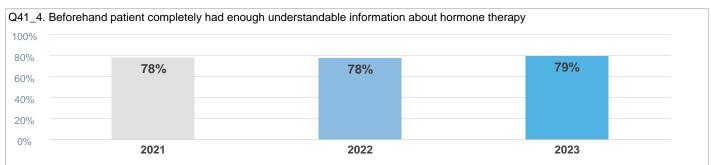


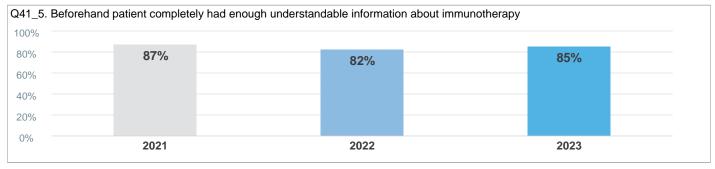


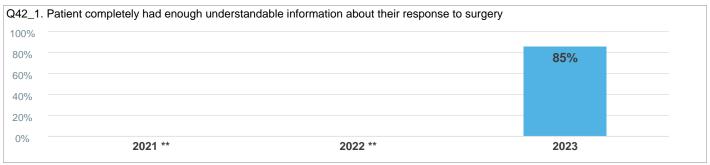


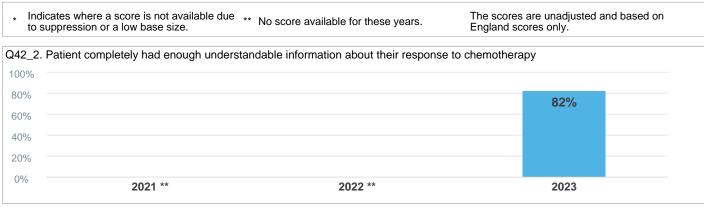


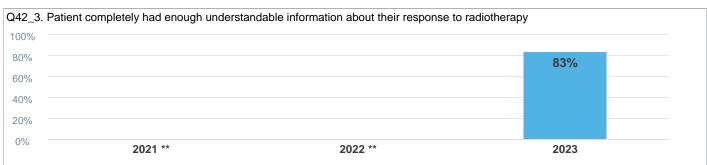


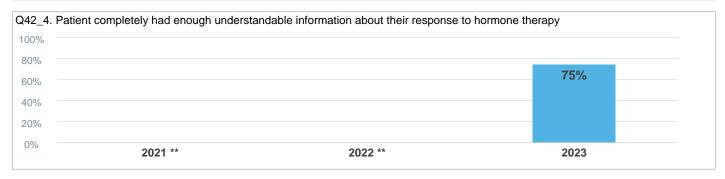


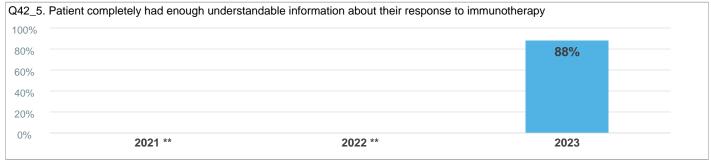


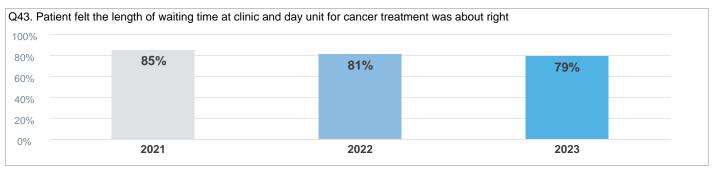


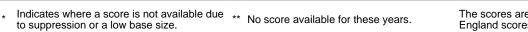


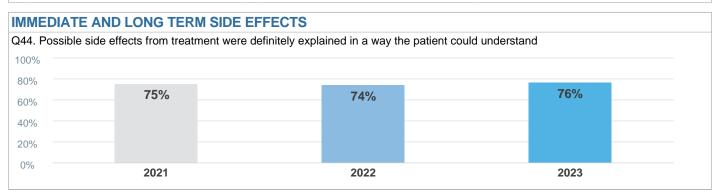


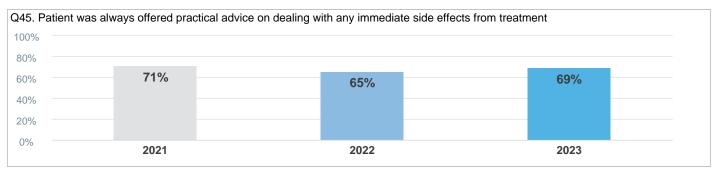


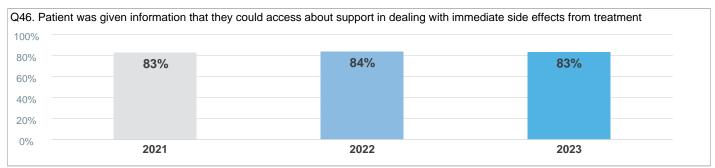


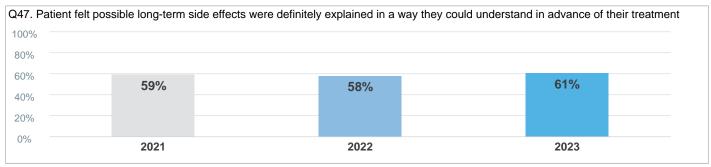


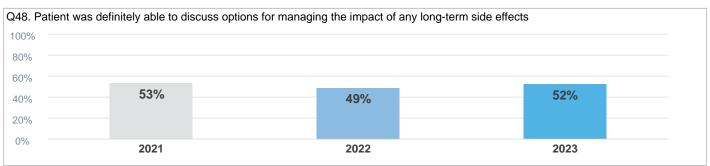


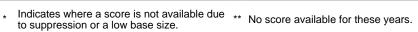


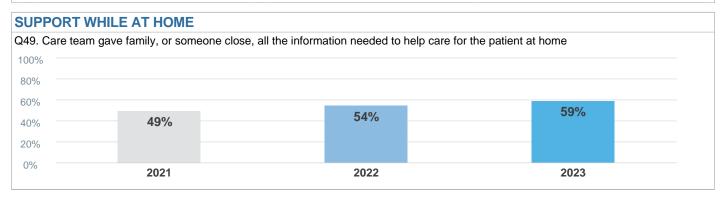


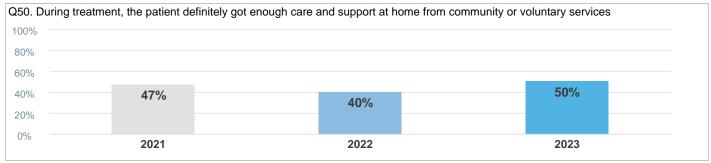


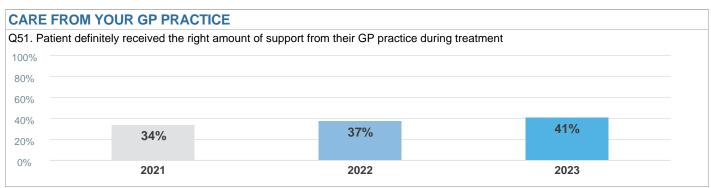


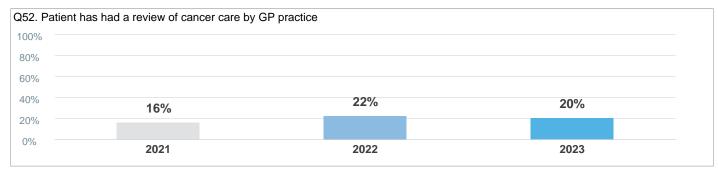


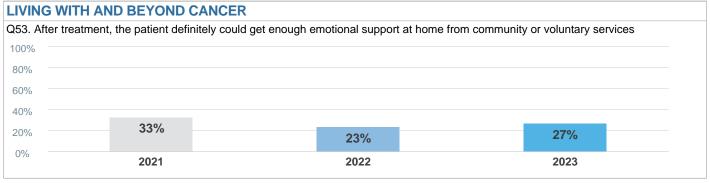


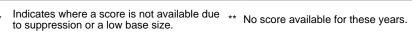


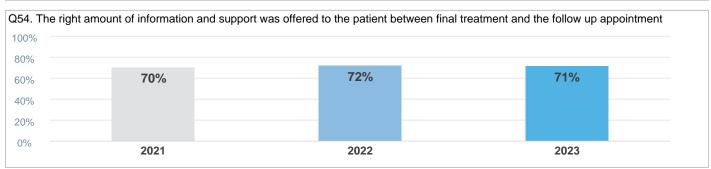


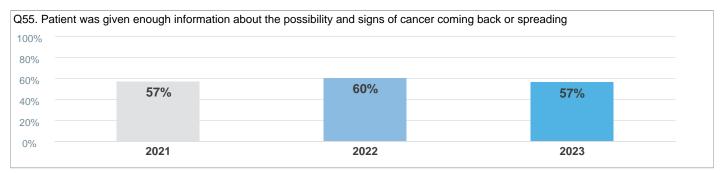


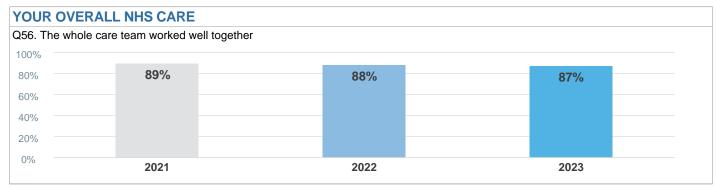


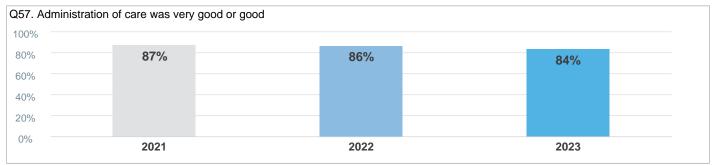


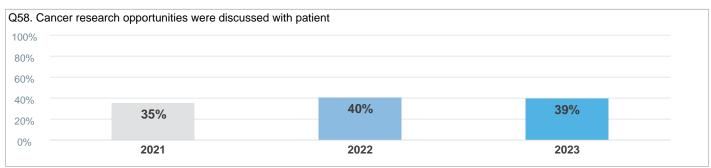












Cancer Patient Experience Survey 2023 NHS Birmingham and Solihull Integrated Care Board

