

Cancer Patient Experience Survey

2023 Results

NHS Gloucestershire Integrated Care Board

Published November 2024

Cancer Patient Experience Survey 2023 NHS Gloucestershire Integrated Care Board

Contents

Executive summary	. 3
ntroduction	4
Methodology	4
Inderstanding the results	5
Further information	6
Response rate	8
Expected range charts	10
Comparability tables	14
Tumour group tables	18
Age group tables	23
Male/Female/Non-binary/Other tables	27
Ethnicity tables	32
MD quintile tables	36
ong-term condition status tables	40
ear on vear charts	44

Executive summary

Questions above expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q3. Referral for diagnosis was explained in a way the patient could completely understand	75%	60%	73%	67%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	80%	61%	78%	70%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	87%	70%	87%	78%
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	70%	54%	69%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	63%	42%	62%	52%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	47%	20%	44%	32%

Questions below expected range

	Case	mix adjusted s		
	2023 score	Lower expected range	Upper expected range	England score
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	78%	79%	91%	85%

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.

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 Gloucestershire 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

316 patients responded out of a total of 528 patients, resulting in a response rate of 60%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	559	528	316	60%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	228
Online	88
Phone	0
Translation service	0
Total	316

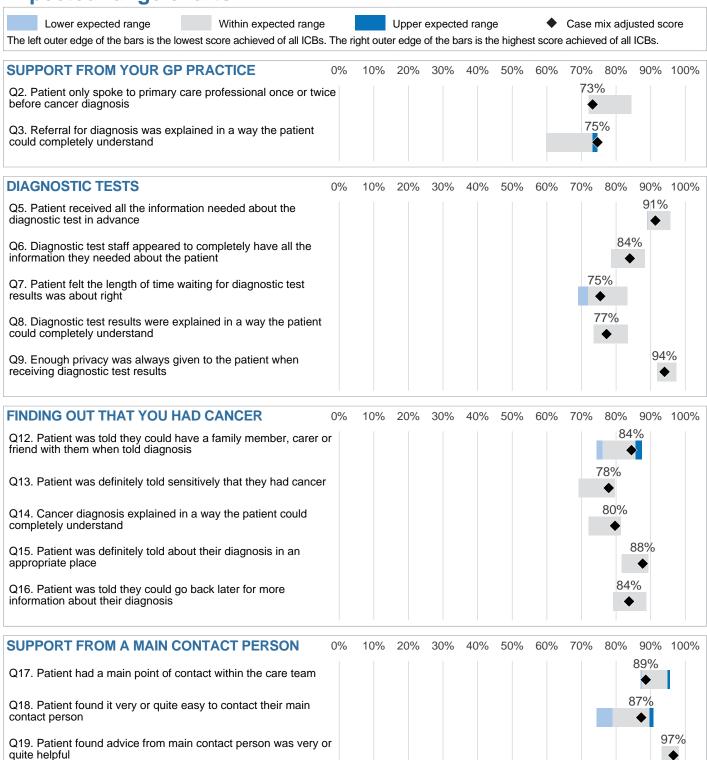
Respondents by tumour group

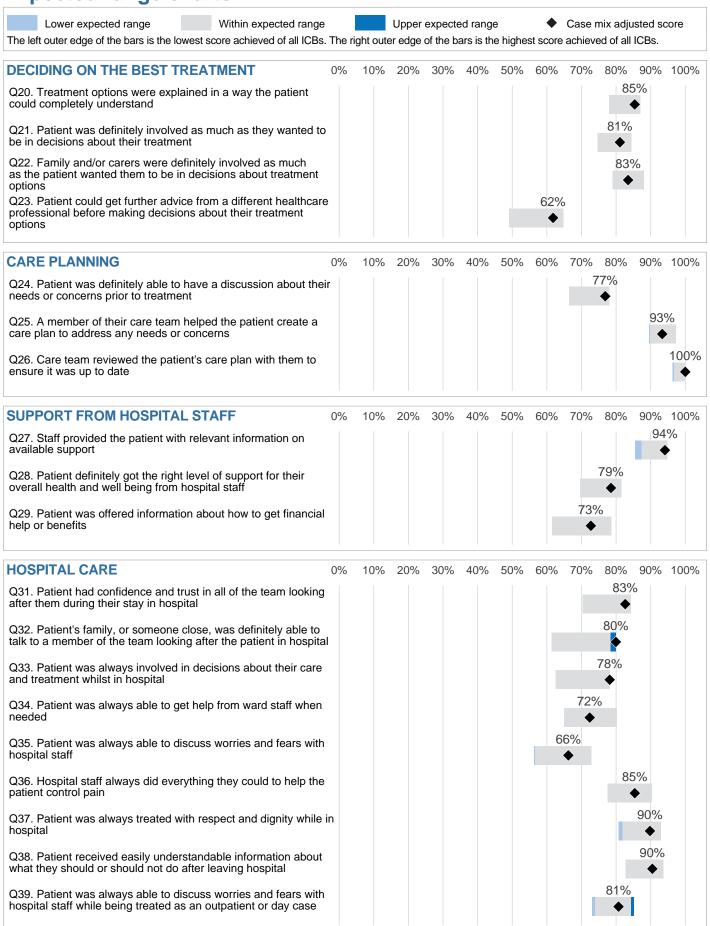
	Number of respondents
Brain / CNS	*
Breast	96
Colorectal / LGT	31
Gynaecological	18
Haematological	33
Head and neck	10
Lung	17
Prostate	33
Sarcoma	*
Skin	8
Upper gastro	13
Urological	14
Other	37
Total	316

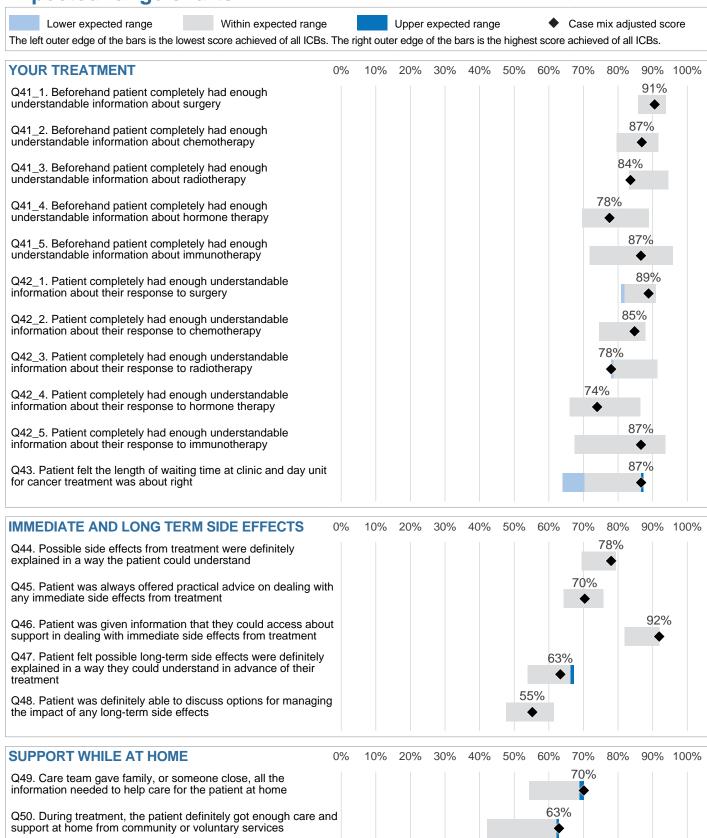
Respondents by ethnicity

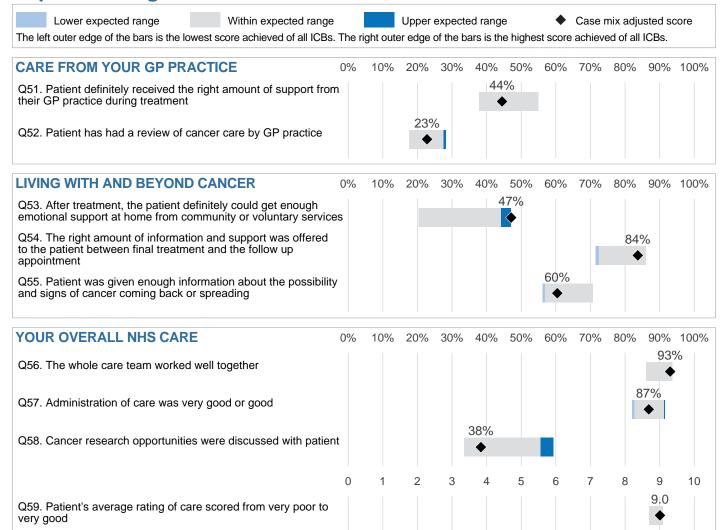
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	272
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	8
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	'
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	'
Arab	*
Any other ethnic group	*
Not given	
Not given	26
Total	316

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









Cancer Patient Experience Survey 2023 NHS Gloucestershire 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 ▼	, significantly high	2023: Indicates where 2023 score is gher or lower than 2022 score. I: Indicates significant change overall nd 2023).	expected range Adjusted score between upplower expected ranges Adjusted score above uppe expected range	•
			Unadjusted scores	Case mix adjusted scores	

			,					,		
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	231	79%	170	76%			73%	72%	84%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	300	74%	215	77%			75%	60%	73%	67%
	Unadjusted scores Case mix adjusted sc									
DIAGNOSTIC TESTS	2022	2022	2023	2023	Change	Change	2023	Lower	Upper	England

			Unadjust	ted score	es		Case n	nix adjuste	d 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	374	94%	253	91%			91%	89%	96%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	392	84%	273	84%			84%	79%	88%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	394	78%	271	74%			75%	72%	83%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	394	77%	271	77%			77%	73%	83%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	395	95%	272	94%			94%	92%	97%	95%

			Unadjus	ted score		Case n				
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	414	82%	295	84%			84%	76%	86%	81%
Q13. Patient was definitely told sensitively that they had cancer	444	74%	311	78%			78%	69%	80%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	439	78%	314	80%			80%	72%	81%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	445	86%	314	88%			88%	82%	89%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	394	87%	268	84%			84%	79%	89%	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	428	89%	303	88%		•	89%	88%	95%	91%
Q18. Patient found it very or quite easy to contact their main contact person	343	87%	238	87%			87%	79%	90%	84%
Q19. Patient found advice from main contact person was very or quite helpful	361	98%	255	96%			97%	93%	98%	96%

Cancer Patient Experience Survey 2023 NHS Gloucestershire Integrated Care Board

Comparability tables

Adjusted score below lower

*	Indicates where a score is not available due to suppression or a low base size.	A 0	or T	▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall	expected range Adjusted score between upper and lower expected ranges
*	* No score available for 2022.				(2021, 2022, and 2023).	Adjusted score above upper expected range

			Unadjust	ted score	s		Case n	nix adjuste	d 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	417	82%	283	86%			85%	78%	87%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	446	79%	306	81%			81%	75%	84%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	377	81%	263	84%			83%	79%	88%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	165	61%			62%	49%	65%	57%

	Unadjusted scores Case mix adjusted scores									
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	407	71%	285	77%			77%	66%	78%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	242	93%	167	93%			93%	90%	97%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	179	97%	124	100%			100%	97%	100%	99%

			Unadjust	ted score	es		Case n	nix adjuste	d scores	
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q27. Staff provided the patient with relevant information on available support	395	94%	268	94%			94%	87%	95%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	446	74%	310	77%			79%	70%	82%	76%
Q29. Patient was offered information about how to get financial help or benefits	225	77%	155	73%			73%	62%	79%	70%

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

			Unadjus	ted score		Case n	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	208	82%	139	83%			83%	70%	84%	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	163	66%	111	79%			80%	61%	78%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	208	76%	130	78%			78%	63%	78%	70%
Q34. Patient was always able to get help from ward staff when needed	203	73%	135	72%			72%	65%	80%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	200	67%	134	66%			66%	57%	73%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	189	90%	127	86%			85%	78%	90%	84%
Q37. Patient was always treated with respect and dignity while in hospital	207	91%	139	90%			90%	82%	93%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	203	89%	135	90%			90%	83%	94%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	382	80%	271	80%			81%	74%	84%	79%

			Unadjus	ted score	es		Case r			
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	317	90%	220	91%			91%	86%	94%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	211	87%	129	86%			87%	80%	92%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	183	89%	118	83%			84%	83%	95%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81	79%	68	76%			78%	70%	89%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	42	76%	36	86%			87%	72%	96%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	220	89%			89%	82%	91%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	131	84%			85%	75%	88%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	122	78%			78%	79%	91%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	67	73%			74%	66%	86%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	35	86%			87%	67%	94%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	433	83%	304	86%			87%	70%	87%	78%

Comparability tables



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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

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

** No score available for 2022.

			Unadjus	ted score		Case n				
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	432	72%	299	78%			78%	69%	79%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	413	66%	292	70%			70%	64%	76%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	343	90%	239	92%			92%	82%	92%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	406	59%	285	62%			63%	54%	66%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	353	52%	247	54%			55%	48%	62%	55%

			Unadjust	ted score	es		Case n	nix adjuste	ed scores	
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	312	63%	222	69%			70%	54%	69%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	177	57%	120	63%			63%	42%	62%	52%

			Unadjust	ted score	es		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	259	54%	189	45%			44%	38%	55%	46%
Q52. Patient has had a review of cancer care by GP practice	420	24%	300	23%			23%	18%	28%	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	105	32%	59	47%			47%	20%	44%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	247	79%	160	84%			84%	73%	86%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	363	58%	254	59%			60%	57%	71%	64%

			Unadjus	ted score	es		Case n	nix adjuste	d scores	
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q56. The whole care team worked well together	422	90%	300	93%			93%	86%	94%	90%
Q57. Administration of care was very good or good	439	89%	309	86%			87%	83%	91%	87%
Q58. Cancer research opportunities were discussed with patient	263	36%	173	38%			38%	34%	56%	45%
Q59. Patient's average rating of care scored from very poor to very good	430	9.0	302	9.0			9.0	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	*	91%	63%	79%	59%	*	*	50%	*	*	*	*	75%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	90%	72%	94%	52%	*	67%	81%	*	*	*	64%	71%	77%

DIAGNOSTIC TESTS							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	93%	90%	93%	84%	*	83%	86%	*	*	100%	90%	100%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	90%	81%	94%	75%	100%	57%	93%	*	*	69%	82%	75%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	78%	71%	76%	72%	*	62%	62%	*	*	69%	82%	75%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	84%	73%	76%	60%	80%	77%	79%	*	*	77%	82%	78%	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	95%	94%	94%	88%	90%	92%	93%	*	*	92%	100%	97%	94%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	90%	86%	88%	80%	80%	63%	83%	*	*	75%	92%	79%	84%
Q13. Patient was definitely told sensitively that they had cancer	*	87%	77%	83%	61%	80%	69%	73%	*	*	69%	79%	71%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	85%	74%	83%	61%	100%	71%	79%	*	*	85%	86%	77%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	91%	87%	83%	73%	90%	76%	88%	*	*	85%	93%	94%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	88%	88%	88%	75%	*	81%	82%	*	*	*	83%	83%	84%

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	*	84%	90%	94%	94%	90%	88%	94%	*	*	85%	91%	86%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	87%	71%	92%	86%	*	92%	86%	*	*	91%	*	96%	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	100%	93%	97%	*	93%	97%	*	*	100%	100%	93%	96%

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	*	83%	81%	93%	82%	*	80%	82%	*	*	100%	85%	87%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	80%	83%	94%	76%	100%	75%	79%	*	*	85%	92%	76%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	90%	83%	93%	71%	*	75%	77%	*	*	92%	91%	79%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	63%	57%	*	50%	*	*	55%	*	*	*	*	63%	61%

CARE PLANNING							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	76%	81%	87%	66%	80%	88%	76%	*	*	92%	69%	70%	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	91%	94%	*	95%	*	*	100%	*	*	*	*	89%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	*	100%	*	*	100%	*	*	*	*	100%	100%

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	*	92%	95%	100%	93%	*	93%	90%	*	*	100%	*	100%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	80%	71%	76%	76%	90%	75%	76%	*	*	77%	85%	74%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	79%	75%	*	62%	*	*	55%	*	*	*	*	82%	73%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	77%	75%	100%	75%	*	80%	86%	*	*	80%	*	89%	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	80%	59%	*	83%	*	*	76%	*	*	90%	*	93%	79%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	83%	60%	100%	75%	*	90%	71%	*	*	*	*	86%	78%
Q34. Patient was always able to get help from ward staff when needed	*	50%	65%	91%	67%	*	80%	76%	*	*	70%	*	63%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	33%	60%	100%	58%	*	*	62%	*	*	70%	*	69%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	70%	90%	90%	80%	*	*	80%	*	*	*	*	89%	86%
Q37. Patient was always treated with respect and dignity while in hospital	*	85%	90%	100%	92%	*	90%	90%	*	*	80%	*	83%	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	92%	85%	100%	100%	*	*	86%	*	*	90%	*	94%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	78%	82%	88%	81%	*	83%	83%	*	*	*	77%	77%	80%

YOUR TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	91%	96%	94%	*	*	100%	89%	*	*	*	75%	84%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	84%	86%	*	92%	*	*	*	*	*	*	*	86%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	86%	*	*	*	*	*	*	*	*	*	*	92%	83%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	73%	*	*	*	*	*	86%	*	*	*	*	*	76%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	90%	88%	88%	*	*	100%	83%	*	*	*	83%	84%	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	87%	79%	*	80%	*	*	*	*	*	*	*	93%	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	80%	*	*	*	*	*	*	*	*	*	*	92%	78%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	69%	*	*	*	*	*	85%	*	*	*	*	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	86%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	87%	86%	83%	82%	100%	93%	90%	*	*	82%	79%	84%	86%

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	*	74%	75%	83%	78%	80%	87%	76%	*	*	75%	77%	85%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	68%	68%	81%	59%	70%	75%	70%	*	*	91%	69%	71%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	86%	100%	100%	96%	*	91%	95%	*	*	*	*	93%	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	60%	65%	61%	55%	70%	80%	70%	*	*	45%	62%	62%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	58%	44%	75%	44%	*	50%	52%	*	*	*	*	52%	54%

SUPPORT WHILE AT HOME							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	66%	77%	79%	80%	*	*	58%	*	*	*	*	66%	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	58%	*	*	62%	*	*	55%	*	*	*	*	63%	63%

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	*	51%	67%	62%	48%	*	57%	29%	*	*	*	*	30%	45%
Q52. Patient has had a review of cancer care by GP practice	*	15%	23%	39%	16%	50%	13%	29%	*	*	20%	14%	31%	23%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	44%	27%	*	*	*	*	*	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	84%	81%	87%	*	*	*	75%	*	*	*	*	85%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	52%	50%	53%	86%	50%	*	65%	*	*	*	67%	65%	59%

YOUR OVERALL NHS CARE							Tumo	ur 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	*	94%	97%	100%	87%	90%	100%	91%	*	*	82%	92%	89%	93%
Q57. Administration of care was very good or good	*	93%	84%	100%	84%	80%	88%	91%	*	*	83%	71%	78%	86%
Q58. Cancer research opportunities were discussed with patient	*	26%	20%	*	65%	*	*	30%	*	*	40%	*	58%	38%
Q59. Patient's average rating of care scored from very poor to very good	*	9.1	9.0	9.5	8.9	9.3	8.9	8.6	*	*	8.3	9.1	9.1	9.0

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	75%	67%	79%	82%	*	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	94%	72%	79%	72%	*	77%

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	*	*	*	92%	91%	90%	91%	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	93%	80%	86%	84%	*	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	73%	60%	80%	80%	*	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	67%	81%	78%	77%	*	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	87%	90%	95%	97%	*	94%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	95%	77%	85%	85%	91%	84%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	70%	74%	76%	85%	82%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	70%	76%	83%	80%	100%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	87%	83%	88%	90%	100%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	95%	82%	82%	85%	90%	84%

SUPPORT FROM A MAIN CONTACT PERSO	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	*	87%	84%	92%	87%	100%	88%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	83%	95%	80%	84%	*	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	89%	97%	96%	97%	100%	96%

DECIDING ON THE BEST TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	74%	85%	84%	90%	100%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	74%	76%	83%	84%	91%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	81%	81%	85%	88%	64%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	67%	62%	65%	55%	*	61%

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	*	*	*	81%	75%	78%	73%	80%	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	92%	93%	92%	91%	*	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	100%	100%	100%	*	100%

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	*	*	*	95%	97%	90%	94%	*	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	61%	76%	81%	78%	90%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	83%	79%	61%	69%	*	73%

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	*	*	*	*	89%	88%	73%	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	84%	80%	80%	*	79%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	74%	87%	78%	*	78%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	71%	73%	69%	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	61%	70%	71%	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	94%	89%	78%	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	92%	90%	89%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	89%	94%	86%	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	67%	77%	85%	78%	*	80%

YOUR TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	88%	88%	92%	91%	*	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	81%	83%	89%	88%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	92%	79%	86%	73%	*	83%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	72%	81%	74%	*	76%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	93%	*	*	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	88%	90%	87%	91%	*	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	100%	76%	87%	80%	*	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	83%	69%	86%	68%	*	78%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	63%	81%	65%	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	93%	*	*	86%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	86%	87%	86%	85%	91%	86%

IMMEDIATE AND LONG TERM SIDE EFFECT	15				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	*	*	*	78%	80%	81%	69%	100%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	76%	69%	70%	65%	*	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	95%	93%	92%	88%	*	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	45%	66%	63%	58%	*	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	47%	51%	58%	48%	*	54%

SUPPORT WHILE AT HOME					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	58%	63%	70%	71%	*	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	64%	64%	67%	*	63%

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	*	*	*	38%	48%	37%	50%	*	45%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	20%	25%	21%	24%	*	23%

LIVING WITH AND BEYOND CANCER									
	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	*	*	*	*	50%	41%	53%	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	86%	85%	83%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	63%	54%	63%	54%	80%	59%

YOUR OVERALL NHS CARE									
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	*	90%	91%	94%	94%	91%	93%
Q57. Administration of care was very good or good	*	*	*	82%	90%	84%	89%	73%	86%
Q58. Cancer research opportunities were discussed with patient	*	*	*	29%	45%	35%	37%	*	38%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	8.7	9.0	9.1	9.0	8.9	9.0

SUPPORT FROM YOUR GP PRACTICE			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	70%	*	*	*	*	76%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	83%	71%	*	*	*	*	77%	

DIAGNOSTIC TESTS			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	91%	*	*	*	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	82%	*	*	*	*	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	72%	77%	*	*	*	*	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	75%	*	*	*	*	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	95%	*	*	*	*	94%

FINDING OUT THAT YOU HAD CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	84%	*	*	*	*	84%
Q13. Patient was definitely told sensitively that they had cancer	83%	73%	*	*	*	*	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	81%	*	*	*	*	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	91%	*	*	*	*	88%
Q16. Patient was told they could go back later for more information about their diagnosis	85%	84%	*	*	*	*	84%

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	88%	90%	*	*	*	*	88%	
Q18. Patient found it very or quite easy to contact their main contact person	88%	90%	*	*	*	*	87%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	98%	*	*	*	*	96%	

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	86%	87%	*	*	*	*	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	83%	*	*	*	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	87%	80%	*	*	*	*	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	64%	59%	*	*	*	*	61%

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	78%	80%	*	*	*	*	77%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	95%	*	*	*	*	93%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	*	*	*	*	100%		

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	95%	95%	*	*	*	*	94%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	80%	*	*	*	*	77%	
Q29. Patient was offered information about how to get financial help or benefits	80%	63%	*	*	*	*	73%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	80%	84%	*	*	*	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	73%	84%	*	*	*	*	79%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	75%	80%	*	*	*	*	78%
Q34. Patient was always able to get help from ward staff when needed	67%	76%	*	*	*	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	59%	71%	*	*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	81%	89%	*	*	*	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	86%	93%	*	*	*	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	91%	*	*	*	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	86%	*	*	*	*	80%

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

IMMEDIATE AND LONG TERM SIDE EFFECT	TS		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	83%	*	*	*	*	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	71%	*	*	*	*	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	92%	95%	*	*	*	*	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	65%	60%	*	*	*	*	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	51%	*	*	*	*	54%

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	70%	70%	*	*	*	*	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	65%	59%	*	*	*	*	63%

CARE FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	49%	38%	*	*	*	*	45%
Q52. Patient has had a review of cancer care by GP practice	19%	29%	*	*	*	*	23%

LIVING WITH AND BEYOND CANCER		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	47%	55%	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	83%	88%	*	*	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	56%	67%	*	*	*	*	59%

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	94%	90%	*	*	*	*	93%	
Q57. Administration of care was very good or good	91%	82%	*	*	*	*	86%	
Q58. Cancer research opportunities were discussed with patient	30%	53%	*	*	*	*	38%	
Q59. Patient's average rating of care scored from very poor to very good	9.1	8.9	*	*	*	*	9.0	

SUPPORT FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	*	*	*	*	60%	76%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	80%	*	*	*	*	59%	77%

DIAGNOSTIC TESTS	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	91%	*	*	*	*	94%	91%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	*	*	*	90%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	73%	*	*	*	*	84%	74%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	*	*	*	*	84%	77%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	*	*	*	*	89%	94%		

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	85%	*	*	*	*	75%	84%	
Q13. Patient was definitely told sensitively that they had cancer	79%	*	*	*	*	65%	78%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	81%	*	*	*	*	72%	80%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	*	*	*	*	76%	88%	
Q16. Patient was told they could go back later for more information about their diagnosis	84%	*	*	*	*	80%	84%	

SUPPORT FROM A MAIN CONTACT PERSO	N			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	89%	*	*	*	*	83%	88%
Q18. Patient found it very or quite easy to contact their main contact person	89%	*	*	*	*	63%	87%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	*	*	95%	96%

DECIDING ON THE BEST TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	86%	*	*	*	*	80%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	*	*	*	*	78%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	*	*	*	*	82%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	64%	*	*	*	*	38%	61%

CARE PLANNING				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	78%	*	*	*	*	57%	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	*	*	*	*	86%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	*	*	*	*	100%	100%

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	95%	*	*	*	*	85%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	*	*	*	*	75%	77%
Q29. Patient was offered information about how to get financial help or benefits	74%	*	*	*	*	54%	73%

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	83%	*	*	*	*	82%	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	80%	*	*	*	*	*	79%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	78%	*	*	*	*	90%	78%
Q34. Patient was always able to get help from ward staff when needed	72%	*	*	*	*	60%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	66%	*	*	*	*	70%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	*	*	*	90%	86%
Q37. Patient was always treated with respect and dignity while in hospital	90%	*	*	*	*	91%	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	*	*	*	*	70%	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	*	*	*	*	78%	80%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	*	*	*	81%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	*	*	*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	84%	*	*	*	*	*	83%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	76%	*	*	*	*	*	76%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	86%	*	*	*	*	*	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	89%	*	*	*	*	80%	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	*	*	*	*	*	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	79%	*	*	*	*	*	78%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	75%	*	*	*	*	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	85%	*	*	*	*	*	86%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	87%	*	*	*	*	76%	86%

IMMEDIATE AND LONG TERM SIDE EFFECT	S			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	79%	*	*	*	*	70%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	*	*	*	*	71%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	93%	*	*	*	*	72%	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	63%	*	*	*	*	53%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	*	*	*	*	59%	54%

SUPPORT WHILE AT HOME				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	69%	*	*	*	*	63%	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	66%	*	*	*	*	36%	63%

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	45%	*	*	*	*	38%	45%
Q52. Patient has had a review of cancer care by GP practice	22%	*	*	*	*	26%	23%

LIVING WITH AND BEYOND CANCER				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	55%	*	*	*	*	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	86%	*	*	*	*	62%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	60%	*	*	*	*	44%	59%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	92%	*	*	*	*	100%	93%
Q57. Administration of care was very good or good	88%	*	*	*	*	67%	86%
Q58. Cancer research opportunities were discussed with patient	39%	*	*	*	*	23%	38%
Q59. Patient's average rating of care scored from very poor to very good	9.0	*	*	*	*	8.4	9.0

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	77%	78%	77%	74%	76%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	67%	68%	85%	78%	77%	

DIAGNOSTIC TESTS			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q5. Patient received all the information needed about the diagnostic test in advance	83%	94%	92%	94%	89%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	83%	85%	81%	87%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	58%	75%	76%	77%	73%	74%
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	82%	71%	82%	77%	77%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	83%	94%	93%	97%	93%	94%

FINDING OUT THAT YOU HAD CANCER			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	86%	63%	88%	90%	82%	84%
Q13. Patient was definitely told sensitively that they had cancer	71%	80%	82%	72%	80%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	64%	71%	84%	79%	82%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	76%	91%	88%	87%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	82%	89%	81%	84%	87%	84%

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	100%	84%	86%	87%	90%	88%
Q18. Patient found it very or quite easy to contact their main contact person	79%	100%	88%	89%	84%	87%
Q19. Patient found advice from main contact person was very or quite helpful	93%	100%	100%	95%	96%	96%

IMD quintile tables

DECIDING ON THE BEST TREATMENT			IMD q	uintile		
	1 (most deprived) 2 3 4 5 dep					AII
Q20. Treatment options were explained in a way the patient could completely understand	79%	78%	87%	83%	89%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	57%	84%	86%	81%	80%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	62%	87%	88%	85%	83%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	62%	52%	66%	61%

CARE PLANNING			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	AII
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	50%	82%	79%	72%	82%	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	91%	95%	90%	95%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	100%	100%	100%	100%

SUPPORT FROM HOSPITAL STAFF	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q27. Staff provided the patient with relevant information on available support	100%	100%	98%	91%	92%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	64%	89%	79%	74%	79%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	58%	66%	79%	79%	73%

HOSPITAL CARE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	79%	85%	83%	83%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	87%	74%	79%	79%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	81%	75%	78%	78%	
Q34. Patient was always able to get help from ward staff when needed	*	*	72%	79%	68%	72%	
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	75%	64%	65%	66%	
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	91%	86%	84%	86%	
Q37. Patient was always treated with respect and dignity while in hospital	*	*	94%	90%	90%	90%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	94%	87%	92%	90%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	58%	82%	85%	75%	83%	80%	

IMD quintile tables

YOUR TREATMENT			IMD q	uintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	94%	92%	83%	96%	91%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	88%	91%	88%	86%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	84%	85%	87%	83%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	93%	63%	75%	76%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	94%	86%		
Q42_1. Patient completely had enough understandable information about their response to surgery	*	75%	94%	83%	93%	89%		
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	91%	88%	82%	84%		
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	77%	78%	82%	78%		
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	86%	63%	74%	73%		
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	94%	86%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	86%	90%	88%	83%	87%	86%		

IMMEDIATE AND LONG TERM SIDE EFFECT	rs		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	71%	80%	79%	77%	78%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	54%	58%	73%	69%	73%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	90%	79%	98%	91%	91%	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	64%	61%	66%	61%	61%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	43%	67%	59%	51%	53%	54%

SUPPORT WHILE AT HOME		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	46%	67%	68%	72%	71%	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	36%	*	64%	53%	75%	63%

CARE FROM YOUR GP PRACTICE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	40%	46%	52%	48%	37%	45%
Q52. Patient has had a review of cancer care by GP practice	21%	32%	20%	26%	20%	23%

IMD quintile tables

LIVING WITH AND BEYOND CANCER			IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	64%	69%	32%	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	91%	88%	86%	82%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	38%	71%	56%	68%	55%	59%

YOUR OVERALL NHS CARE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q56. The whole care team worked well together	100%	89%	93%	95%	90%	93%	
Q57. Administration of care was very good or good	93%	85%	87%	85%	86%	86%	
Q58. Cancer research opportunities were discussed with patient	0%	50%	37%	41%	40%	38%	
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.0	9.1	9.1	8.9	9.0	

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status						
	Yes No Not given All						
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77% 75% 73% 76%						
Q3. Referral for diagnosis was explained in a way the patient could completely understand	78% 75% 76% 77%						

DIAGNOSTIC TESTS		Long-term condition status				
	Yes	No	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	92%	90%	94%	91%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	83%	90%	84%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	74%	73%	80%	74%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	73%	90%	77%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	91%	95%	94%		

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	88%	81%	78%	84%
Q13. Patient was definitely told sensitively that they had cancer	82%	74%	73%	78%
Q14. Cancer diagnosis explained in a way the patient could completely understand	85%	73%	79%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	90%	86%	82%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	83%	77%	84%

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	89%	89%	81%	88%
Q18. Patient found it very or quite easy to contact their main contact person	91%	87%	63%	87%
Q19. Patient found advice from main contact person was very or quite helpful	96%	97%	95%	96%

DECIDING ON THE BEST TREATMENT		Long-term condition status		
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	87%	84%	87%	86%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	83%	73%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	87%	81%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	60%	67%	44%	61%

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	80%	76%	61%	77%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	95%	88%	93%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	100%	100%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	All		
Q27. Staff provided the patient with relevant information on available support	95%	95%	83%	94%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	79%	81%	77%
Q29. Patient was offered information about how to get financial help or benefits	73%	75%	63%	73%

HOSPITAL CARE		Long-term cor	dition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	83%	83%	*	83%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	79%	76%	*	79%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	85%	67%	*	78%
Q34. Patient was always able to get help from ward staff when needed	73%	69%	*	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	70%	58%	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	85%	*	86%
Q37. Patient was always treated with respect and dignity while in hospital	88%	94%	*	90%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	91%	92%	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	80%	85%	80%

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	92%	84%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	83%	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	86%	82%	*	83%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	74%	76%	*	76%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	85%	83%	*	86%
Q42_1. Patient completely had enough understandable information about their response to surgery	92%	87%	83%	89%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	84%	*	84%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	79%	78%	*	78%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	73%	81%	*	73%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	84%	83%	*	86%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	86%	86%	91%	86%

IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	77%	81%	70%	78%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	67%	70%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	91%	95%	84%	92%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	65%	57%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	54%	63%	54%

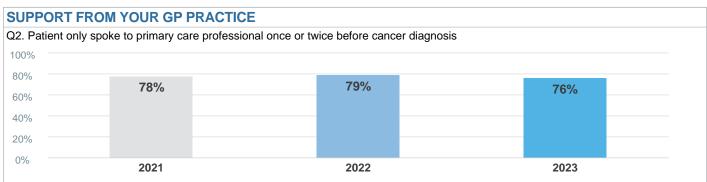
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	66%	74%	65%	69%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	58%	71%	60%	63%

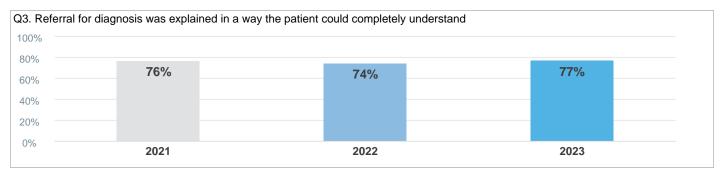
CARE FROM YOUR GP PRACTICE	Long-term condition status			
	Yes No Not given All			
Q51. Patient definitely received the right amount of support from their GP practice during treatment	49%	39%	50%	45%
Q52. Patient has had a review of cancer care by GP practice	21%	25%	24%	23%

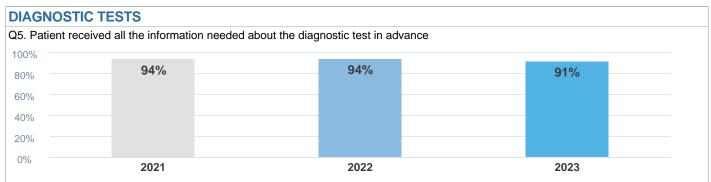
LIVING WITH AND BEYOND CANCER		Long-term condition status		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	48%	60%	*	47%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	93%	64%	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	59%	42%	59%

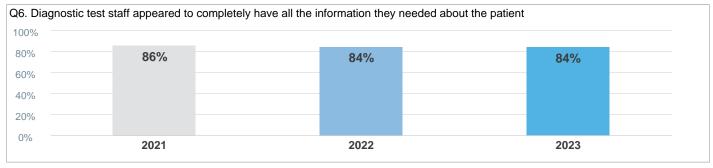
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	91%	93%	100%	93%
Q57. Administration of care was very good or good	87%	89%	65%	86%
Q58. Cancer research opportunities were discussed with patient	38%	40%	25%	38%
Q59. Patient's average rating of care scored from very poor to very good	9.0	9.1	8.7	9.0

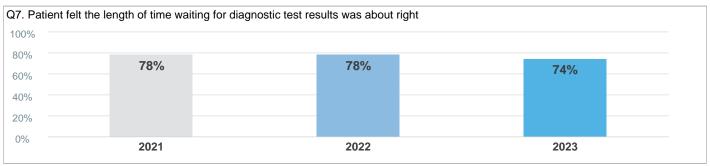




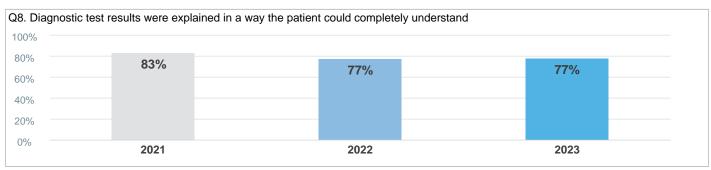


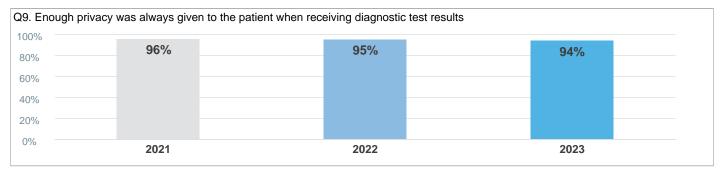


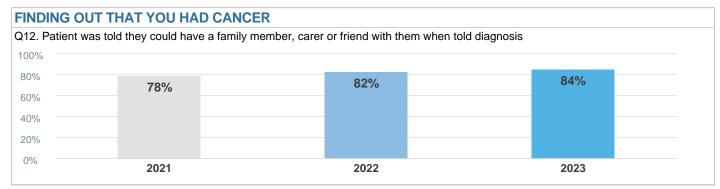


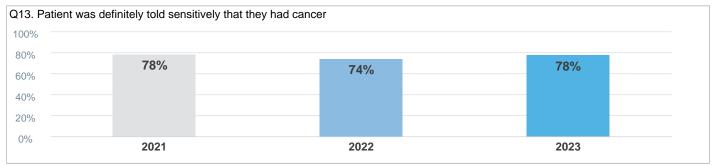


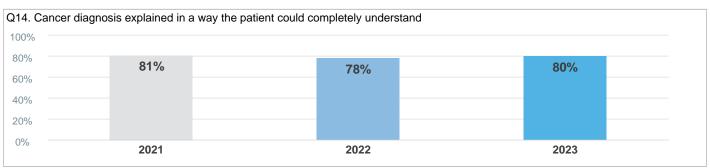


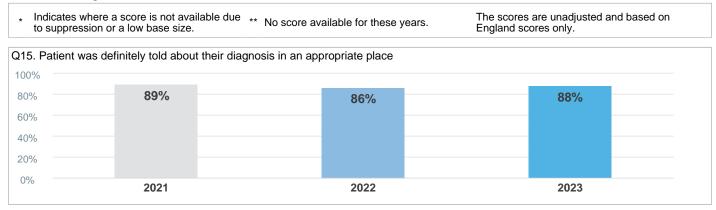


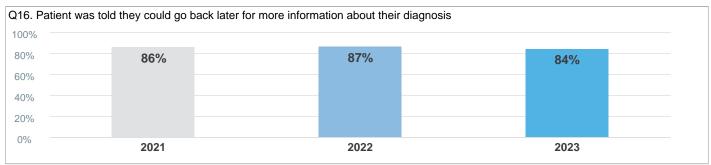


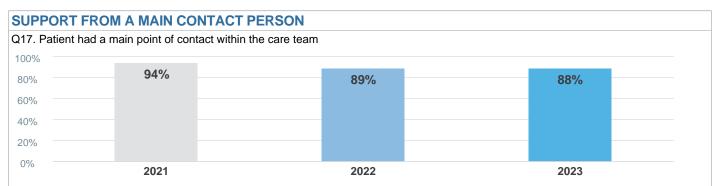


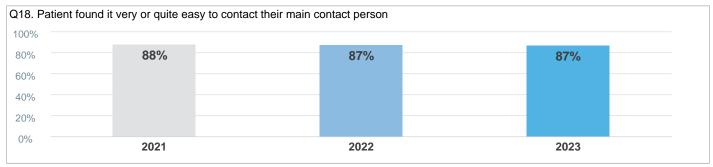


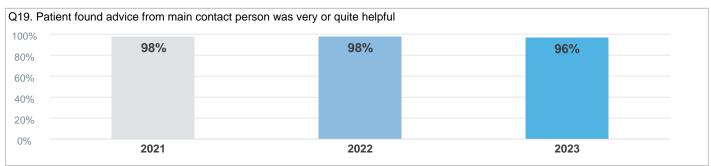




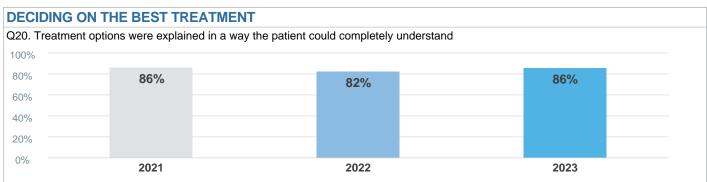


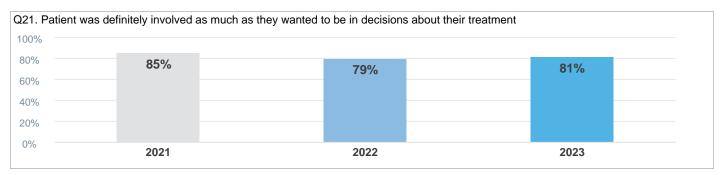


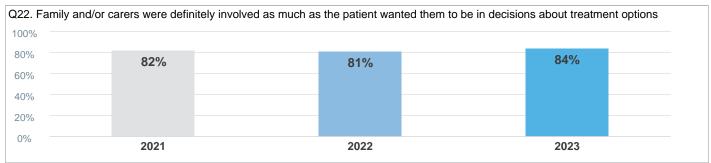


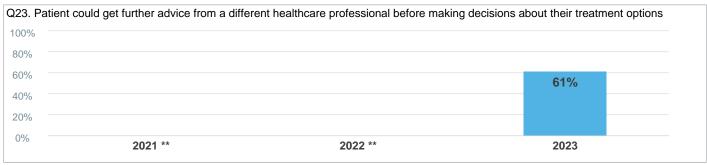


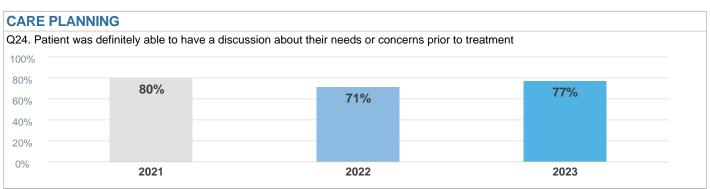


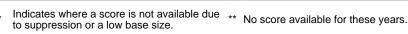


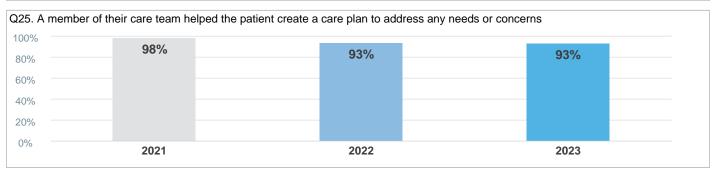


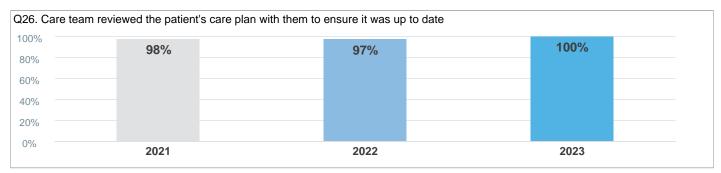


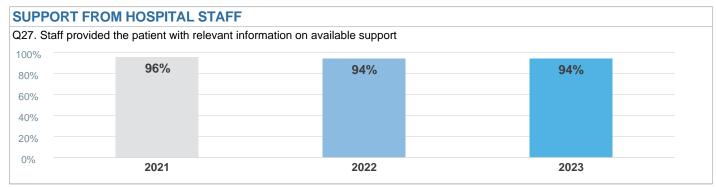


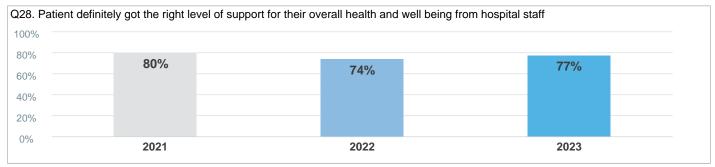


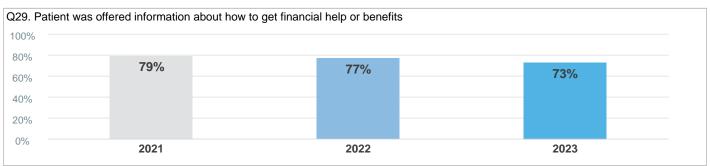


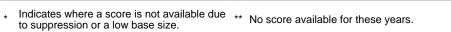


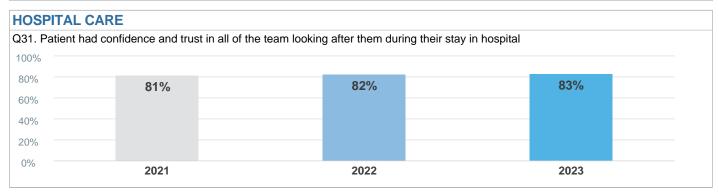


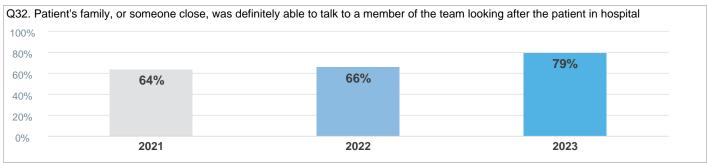


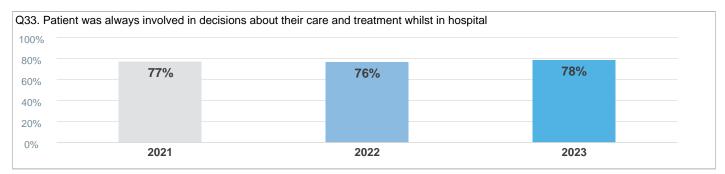


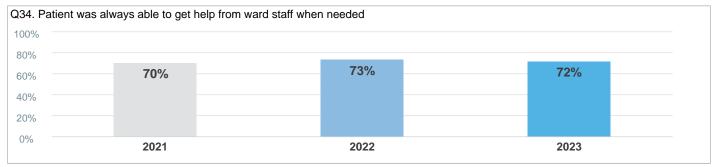


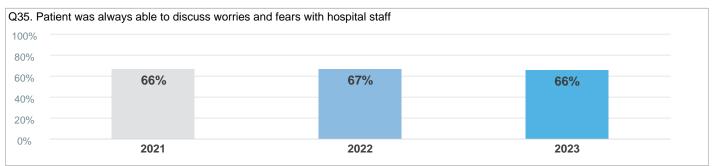


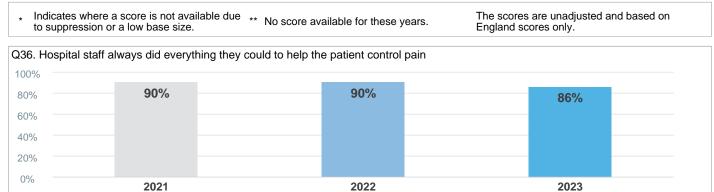


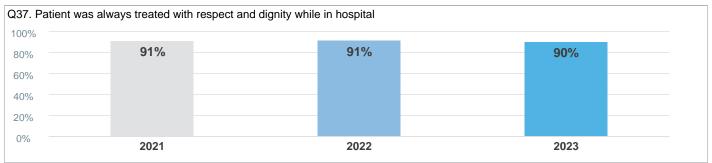


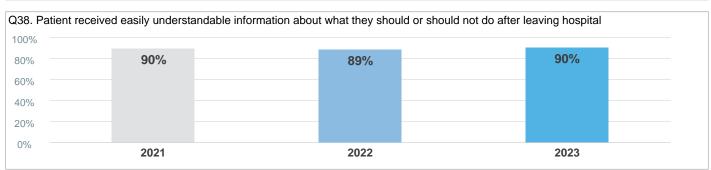


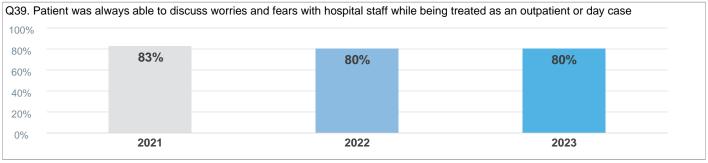


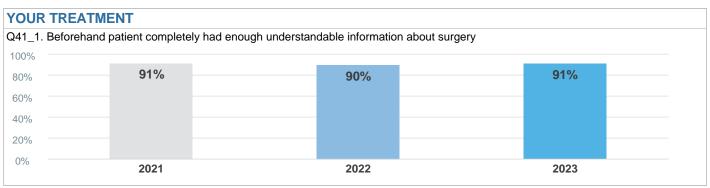




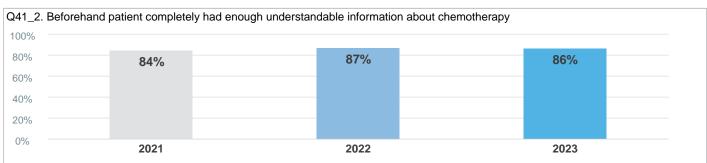


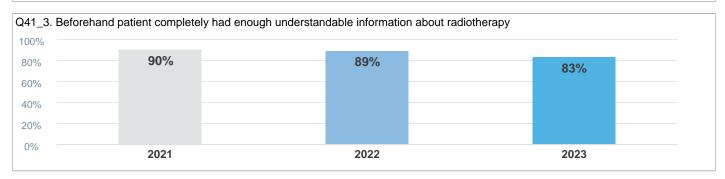


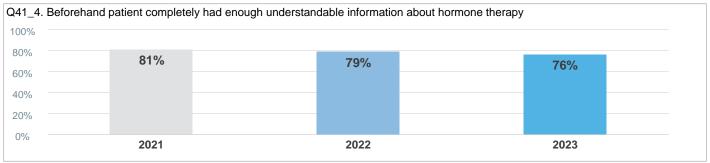


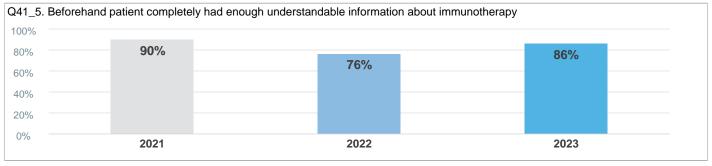


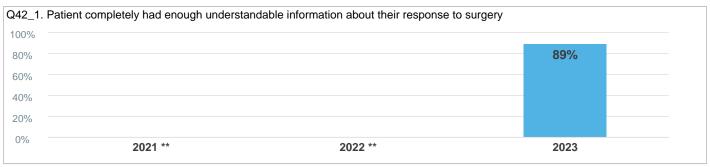






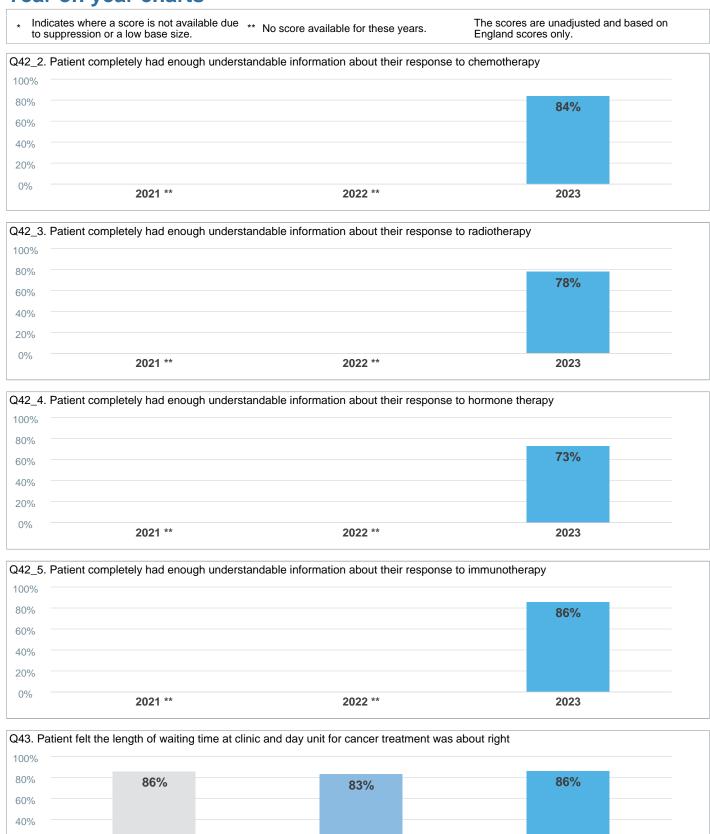






20%

2021



2022

2023

