

Cancer Patient Experience Survey

2023 Results

NHS Humber and North Yorkshire Integrated Care Board

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Executive summary

Questions above expected range

	Case	Case mix adjusted scores Lower Upper expected expected range range			
	2023 score	expected	expected	England score	
Q18. Patient found it very or quite easy to contact their main contact person	88%	81%	88%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	95%	97%	96%	

Questions below expected range

NHS Humber and North Yorkshire Integrated Care Board has no scores below expected range.

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.

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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

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

1,930 patients responded out of a total of 3,501 patients, resulting in a response rate of 55%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	3,745	3,501	1,930	55%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	1,618
Online	311
Phone	1
Translation service	0
Total	1,930

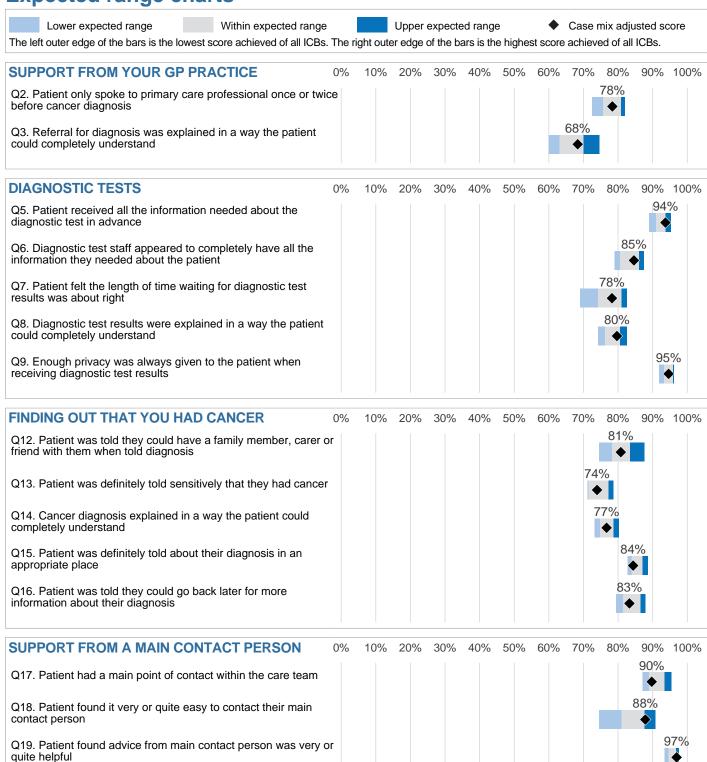
Respondents by tumour group

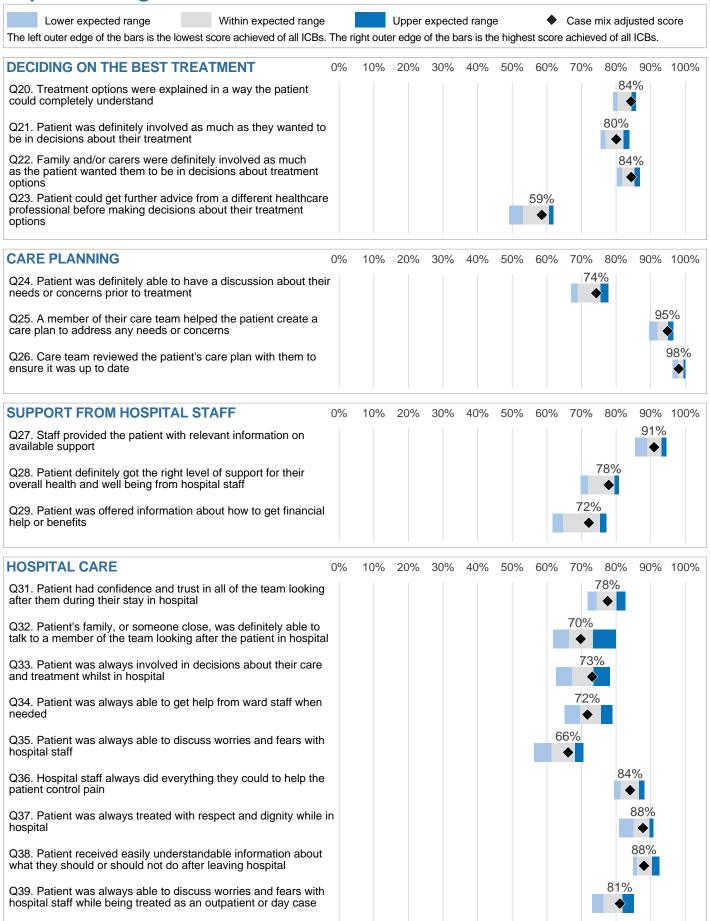
	Number of respondents
Brain / CNS	13
Breast	424
Colorectal / LGT	251
Gynaecological	74
Haematological	284
Head and neck	50
Lung	134
Prostate	158
Sarcoma	33
Skin	57
Upper gastro	113
Urological	109
Other	230
Total	1,930

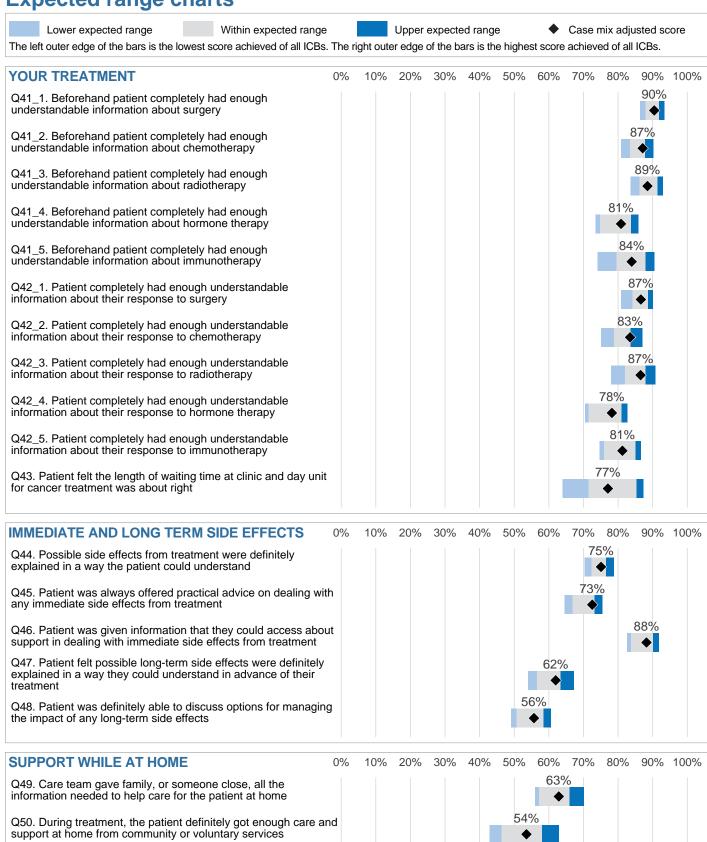
Respondents by ethnicity

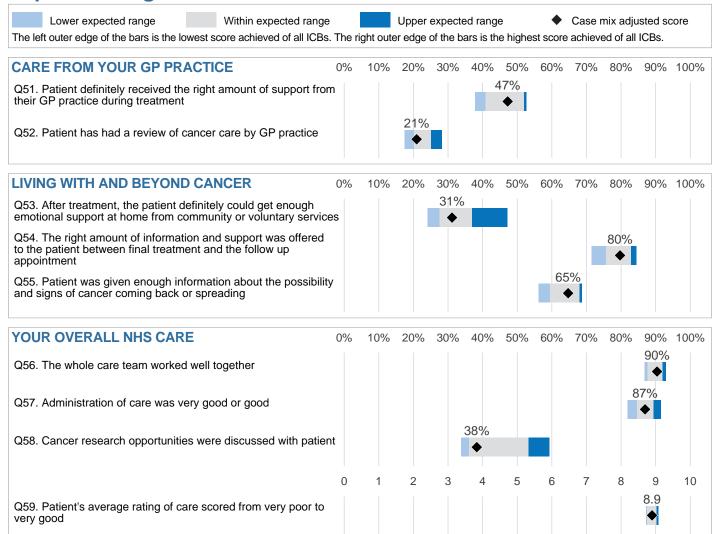
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,754
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	25
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	I
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	
Not given	130
Total	1,930

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









Comparability tables

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

** No score available for 2022.

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

	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	973	79%	952	79%			78%	76%	81%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	1325	67%	1309	68%		A	68%	63%	70%	67%

			Unadjus	ted score	Case n					
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	1544	93%	1499	94%			94%	91%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	1651	85%	1578	85%			85%	81%	86%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	1648	79%	1581	78%			78%	74%	81%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	1649	78%	1586	80%			80%	76%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	1651	94%	1591	95%			95%	93%	96%	95%

			Unadjus	ted score		Case n				
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	1846	75%	1780	81%	A	A	81%	78%	83%	81%
Q13. Patient was definitely told sensitively that they had cancer	1965	72%	1899	74%			74%	72%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	1971	74%	1906	77%			77%	75%	79%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	1963	83%	1902	84%			84%	84%	87%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	1755	83%	1695	83%			83%	81%	87%	84%

			Unadjust	ted score	Case n					
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	1902	89%	1819	90%			90%	89%	93%	91%
Q18. Patient found it very or quite easy to contact their main contact person	1565	87%	1495	88%			88%	81%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	1631	96%	1548	97%			97%	95%	97%	96%

Comparability tables

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

▲ or ▼

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

Adjusted score below lower expected range

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

**	No	score	available	for	2022.
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			Unadjust	ted score	:S		Case n			
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	1826	83%	1778	84%			84%	81%	84%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1942	81%	1884	80%			80%	77%	82%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	1662	81%	1649	85%	A	A	84%	82%	85%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	988	58%			59%	53%	61%	57%

			Unadjus	ted score	es		Case n	nix adjuste	ed scores	
CARE PLANNING	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	1777	70%	1712	74%	A		74%	69%	76%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	1017	94%	1016	95%			95%	92%	95%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	788	98%	792	98%			98%	98%	100%	99%

			Unadjust	ted score	es		Case n	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	1629	89%	1608	91%		A	91%	89%	93%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1960	78%	1884	78%			78%	72%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	1070	70%	1069	72%			72%	65%	75%	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 range Adjusted score between upper and lower expected ranges Adjusted score above upper
140 doore available for 2022.		,	expected range

	Unadjusted scores						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	843	79%	842	77%			78%	74%	80%	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	665	66%	694	69%		•	70%	66%	73%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	829	69%	831	73%			73%	67%	74%	70%
Q34. Patient was always able to get help from ward staff when needed	829	69%	820	71%			72%	70%	76%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	800	64%	808	66%			66%	61%	68%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	724	83%	734	84%			84%	81%	87%	84%
Q37. Patient was always treated with respect and dignity while in hospital	841	87%	834	88%			88%	85%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	824	87%	814	88%			88%	86%	90%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	1728	81%	1679	81%			81%	76%	82%	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	1032	89%	928	91%			90%	88%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	1087	87%	1040	87%			87%	84%	88%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	659	90%	581	88%			89%	86%	91%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	339	84%	318	80%			81%	75%	84%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	270	86%	297	84%			84%	80%	88%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	926	87%			87%	84%	89%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	1027	83%			83%	79%	84%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	574	86%			87%	82%	88%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	310	78%			78%	71%	81%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	295	81%			81%	76%	85%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1935	76%	1842	77%			77%	71%	85%	78%

Comparability tables

Adjusted score below lower

* Indicates where a score is not available due to suppression or a low base size. Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	expected range Adjusted score between upper and lower expected ranges Adjusted score above upper
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			Unadjust	ed score	es		Case n	d scores		
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	1892	74%	1810	75%			75%	72%	76%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	1816	71%	1726	73%			73%	67%	73%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	1426	88%	1392	88%			88%	84%	90%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	1770	58%	1730	61%			62%	57%	63%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	1526	51%	1502	55%			56%	51%	59%	55%

			Unadjust	ted score	es		Case n			
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	1295	57%	1266	63%	A	A	63%	57%	66%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	758	54%	736	54%			54%	46%	58%	52%

			Unadjust	ed score	Case m					
CARE FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	1143	44%	1137	47%		A	47%	41%	52%	46%
Q52. Patient has had a review of cancer care by GP practice	1885	20%	1807	20%		A	21%	20%	25%	23%

			Unadjust	ed 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	440	35%	388	32%			31%	28%	37%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	925	80%	861	80%			80%	76%	83%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	1564	62%	1518	65%			65%	59%	68%	64%

			Unadjust	ted score	es		Case n	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	1869	89%	1798	90%			90%	88%	92%	90%
Q57. Administration of care was very good or good	1945	87%	1881	87%			87%	85%	89%	87%
Q58. Cancer research opportunities were discussed with patient	1145	37%	1152	38%			38%	36%	53%	45%
Q59. Patient's average rating of care scored from very poor to very good	1907	8.9	1817	8.9			8.9	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	96%	76%	80%	65%	85%	61%	80%	80%	87%	78%	82%	73%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	88%	67%	65%	59%	58%	49%	81%	64%	73%	52%	63%	64%	68%

DIAGNOSTIC TESTS							Tumo	our gro	oup					
	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	83%	94%	94%	90%	91%	97%	96%	98%	96%	93%	92%	93%	95%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	62%	85%	88%	72%	83%	88%	82%	93%	78%	91%	74%	89%	86%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	81%	81%	61%	85%	70%	76%	83%	71%	60%	75%	79%	73%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	54%	82%	87%	71%	79%	81%	77%	84%	75%	81%	71%	80%	77%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	77%	97%	96%	90%	94%	100%	94%	95%	83%	96%	91%	94%	94%	95%

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	100%	88%	86%	73%	74%	79%	73%	88%	67%	74%	78%	73%	81%	81%
Q13. Patient was definitely told sensitively that they had cancer	54%	81%	82%	70%	72%	78%	63%	72%	67%	76%	67%	66%	71%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	69%	82%	85%	76%	71%	82%	69%	82%	64%	84%	69%	73%	71%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	62%	89%	87%	79%	82%	98%	80%	88%	70%	86%	73%	81%	81%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	90%	90%	86%	79%	82%	89%	73%	87%	80%	90%	74%	71%	80%	83%

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	92%	85%	92%	90%	91%	96%	94%	89%	94%	91%	89%	82%	93%	90%
Q18. Patient found it very or quite easy to contact their main contact person	82%	93%	93%	86%	89%	90%	87%	81%	88%	87%	84%	77%	86%	88%
Q19. Patient found advice from main contact person was very or quite helpful	91%	99%	98%	97%	97%	95%	98%	96%	92%	98%	99%	96%	94%	97%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	80%	88%	87%	81%	82%	86%	80%	89%	90%	80%	82%	87%	78%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	84%	83%	74%	79%	88%	80%	85%	78%	74%	82%	68%	74%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	75%	88%	90%	81%	80%	86%	83%	86%	84%	87%	88%	79%	81%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	62%	61%	47%	62%	68%	59%	58%	47%	71%	53%	51%	48%	58%

CARE PLANNING							Tumo	our gro	oup					
	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	82%	81%	76%	65%	71%	77%	74%	74%	61%	78%	70%	78%	67%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	94%	95%	85%	96%	96%	95%	95%	100%	100%	100%	98%	93%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	97%	100%	96%	100%	94%	97%	98%	100%	96%	98%	100%	98%	98%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	92%	95%	91%	86%	90%	91%	89%	92%	84%	100%	89%	88%	87%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	58%	78%	78%	69%	82%	82%	76%	83%	76%	87%	76%	72%	73%	78%
Q29. Patient was offered information about how to get financial help or benefits	85%	75%	73%	64%	74%	61%	93%	71%	73%	71%	66%	52%	66%	72%

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	80%	75%	75%	60%	82%	92%	82%	74%	74%	*	82%	83%	77%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	70%	70%	71%	62%	72%	87%	70%	60%	75%	*	72%	72%	62%	69%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	77%	76%	56%	72%	85%	81%	67%	74%	*	73%	66%	73%	73%
Q34. Patient was always able to get help from ward staff when needed	70%	76%	64%	67%	71%	69%	80%	65%	68%	*	72%	73%	79%	71%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	66%	66%	51%	73%	72%	71%	65%	68%	*	73%	57%	60%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	86%	85%	75%	89%	88%	90%	84%	79%	*	88%	75%	81%	84%
Q37. Patient was always treated with respect and dignity while in hospital	80%	88%	86%	73%	89%	100%	96%	84%	89%	*	94%	91%	85%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	92%	87%	80%	87%	92%	89%	83%	83%	*	88%	94%	87%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	62%	79%	84%	75%	85%	88%	80%	80%	90%	84%	81%	80%	81%	81%

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	*	93%	92%	84%	96%	89%	96%	90%	86%	79%	93%	93%	82%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	75%	91%	86%	86%	87%	71%	84%	93%	94%	*	89%	79%	85%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	73%	92%	86%	90%	87%	84%	87%	94%	83%	*	89%	94%	78%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	79%	*	*	*	*	*	88%	*	*	*	*	72%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	81%	86%	*	78%	*	81%	*	*	81%	93%	90%	89%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	91%	92%	66%	93%	83%	84%	88%	81%	79%	86%	83%	80%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	81%	82%	82%	85%	88%	86%	93%	82%	*	82%	86%	82%	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	73%	91%	84%	95%	69%	90%	87%	86%	75%	*	86%	88%	80%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	76%	*	*	*	*	*	87%	*	*	*	*	68%	78%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	78%	87%	*	80%	*	84%	*	*	86%	79%	79%	76%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	54%	74%	78%	72%	72%	84%	73%	89%	78%	75%	69%	81%	84%	77%

IMMEDIATE AND LONG TERM SIDE EFFEC	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	62%	76%	79%	69%	68%	78%	74%	82%	74%	73%	76%	75%	74%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	75%	74%	77%	67%	72%	77%	68%	68%	67%	71%	74%	65%	75%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	88%	89%	86%	88%	81%	92%	93%	100%	88%	85%	92%	86%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	42%	64%	62%	54%	57%	57%	63%	67%	50%	64%	62%	61%	61%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	40%	59%	56%	43%	53%	55%	60%	58%	54%	56%	59%	53%	50%	55%

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	*	61%	61%	50%	67%	81%	73%	65%	61%	70%	63%	64%	55%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	56%	57%	33%	50%	60%	58%	56%	73%	54%	55%	60%	51%	54%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	60%	48%	45%	49%	47%	34%	47%	58%	50%	39%	46%	47%	42%	47%
Q52. Patient has had a review of cancer care by GP practice	15%	21%	27%	10%	17%	9%	16%	26%	12%	27%	23%	17%	20%	20%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	29%	43%	27%	28%	27%	35%	30%	*	*	31%	39%	26%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	83%	82%	73%	75%	81%	68%	80%	86%	94%	72%	79%	88%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	64%	63%	58%	75%	55%	63%	57%	68%	76%	60%	64%	67%	65%

YOUR OVERALL NHS CARE							Tumo	our gro	oup					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q56. The whole care team worked well together	75%	91%	89%	84%	93%	92%	88%	93%	84%	98%	93%	85%	88%	90%
Q57. Administration of care was very good or good	62%	88%	88%	79%	92%	90%	84%	89%	76%	82%	88%	82%	84%	87%
Q58. Cancer research opportunities were discussed with patient	36%	34%	40%	37%	51%	33%	45%	28%	35%	42%	45%	33%	31%	38%
Q59. Patient's average rating of care scored from very poor to very good	8.0	9.0	8.9	8.6	9.1	8.9	8.9	9.0	8.7	8.9	8.8	8.6	8.8	8.9

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	*	73%	88%	80%	76%	77%	82%	87%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	61%	82%	73%	69%	67%	67%	67%	68%

DIAGNOSTIC TESTS					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	69%	92%	97%	93%	94%	94%	97%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	71%	85%	82%	84%	83%	88%	86%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	59%	46%	68%	73%	83%	82%	84%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	76%	63%	77%	76%	84%	80%	82%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	94%	95%	92%	93%	95%	96%	98%	95%

FINDING OUT THAT YOU HAD CANCER									
	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%	86%	74%	75%	82%	85%	85%	81%
Q13. Patient was definitely told sensitively that they had cancer	*	79%	80%	62%	70%	76%	77%	77%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	84%	76%	69%	71%	81%	77%	82%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	89%	76%	71%	82%	85%	86%	93%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	*	94%	100%	90%	84%	83%	81%	69%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N								
	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	*	84%	91%	86%	90%	90%	91%	88%	90%
Q18. Patient found it very or quite easy to contact their main contact person	*	79%	82%	91%	89%	88%	88%	90%	88%
Q19. Patient found advice from main contact person was very or quite helpful	*	93%	97%	96%	95%	98%	98%	97%	97%

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	*	82%	78%	80%	86%	86%	83%	88%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	74%	70%	79%	76%	83%	80%	86%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	82%	79%	87%	79%	87%	86%	87%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	50%	65%	57%	55%	62%	56%	60%	58%

CARE PLANNING					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	74%	78%	75%	73%	76%	72%	78%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	96%	89%	95%	95%	96%	98%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	96%	98%	97%	99%	100%	100%	98%

SUPPORT FROM HOSPITAL STAFF	Age								
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	89%	91%	94%	90%	93%	89%	91%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	42%	69%	72%	74%	81%	79%	81%	78%
Q29. Patient was offered information about how to get financial help or benefits	*	60%	68%	70%	76%	74%	67%	79%	72%

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	*	*	74%	71%	77%	78%	79%	81%	77%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	70%	63%	66%	69%	74%	79%	69%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	65%	78%	74%	74%	71%	74%	73%
Q34. Patient was always able to get help from ward staff when needed	*	*	71%	65%	70%	73%	74%	64%	71%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	70%	60%	63%	68%	70%	58%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	88%	81%	84%	83%	89%	71%	84%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	83%	85%	88%	90%	88%	76%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	89%	90%	87%	90%	86%	90%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	67%	80%	71%	80%	83%	84%	79%	81%

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	*	69%	88%	87%	91%	91%	92%	94%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	90%	91%	87%	87%	87%	87%	84%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	100%	85%	84%	89%	91%	88%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	67%	78%	77%	81%	84%	*	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	87%	80%	83%	83%	100%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	77%	83%	89%	83%	88%	89%	91%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	70%	82%	78%	80%	85%	86%	91%	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	94%	90%	83%	90%	83%	83%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	83%	81%	74%	82%	73%	*	78%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	94%	79%	78%	79%	91%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	53%	68%	70%	79%	77%	79%	79%	77%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	68%	81%	68%	78%	77%	72%	74%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	58%	72%	69%	71%	77%	70%	73%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	64%	90%	87%	88%	90%	87%	98%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	37%	54%	58%	61%	65%	60%	59%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	32%	52%	47%	58%	58%	54%	53%	55%

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	*	53%	62%	55%	61%	65%	64%	70%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	56%	64%	46%	57%	55%	58%	54%

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%	34%	44%	49%	49%	45%	51%	47%
Q52. Patient has had a review of cancer care by GP practice	*	17%	20%	20%	22%	21%	19%	20%	20%

LIVING WITH AND BEYOND CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	29%	22%	30%	34%	36%	39%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	64%	76%	80%	83%	81%	85%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	33%	62%	53%	64%	69%	65%	65%	65%

YOUR OVERALL NHS CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	78%	88%	88%	89%	90%	92%	96%	90%
Q57. Administration of care was very good or good	*	74%	76%	83%	84%	88%	89%	92%	87%
Q58. Cancer research opportunities were discussed with patient	*	20%	27%	33%	39%	41%	38%	36%	38%
Q59. Patient's average rating of care scored from very poor to very good	*	7.4	8.6	8.6	8.9	9.0	9.0	9.0	8.9

SUPPORT 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
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	83%	76%	*	*	*	69%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	65%	*	*	*	74%	68%

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	93%	95%	*	*	*	92%	94%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	86%	*	*	*	77%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	77%	80%	*	*	*	70%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	80%	*	*	*	85%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	95%	*	*	*	96%	95%

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

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Fema	le/Non-bina	ry/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	90%	91%	*	*	*	88%	90%
Q18. Patient found it very or quite easy to contact their main contact person	90%	87%	*	*	*	87%	88%
Q19. Patient found advice from main contact person was very or quite helpful	97%	97%	*	*	*	96%	97%

DECIDING ON THE BEST TREATMENT			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	84%	85%	*	*	*	82%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	80%	*	*	*	74%	80%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	85%	*	*	*	79%	85%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	57%	58%	*	*	*	68%	58%	

CARE PLANNING		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	75%	*	*	*	70%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	97%	*	*	*	89%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	*	*	*	96%	98%

SUPPORT FROM HOSPITAL STAFF		Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q27. Staff provided the patient with relevant information on available support	90%	92%	*	*	*	92%	91%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	81%	*	*	*	82%	78%	
Q29. Patient was offered information about how to get financial help or benefits	73%	72%	*	*	*	74%	72%	

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	73%	82%	*	*	*	76%	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	67%	72%	*	*	*	75%	69%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	75%	*	*	*	71%	73%
Q34. Patient was always able to get help from ward staff when needed	68%	75%	*	*	*	69%	71%
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	71%	*	*	*	59%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	86%	*	*	*	84%	84%
Q37. Patient was always treated with respect and dignity while in hospital	85%	91%	*	*	*	86%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	90%	*	*	*	79%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	82%	*	*	*	87%	81%

YOUR TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	90%	*	*	*	91%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	87%	*	*	*	82%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	88%	*	*	*	86%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	79%	84%	*	*	*	67%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	81%	86%	*	*	*	100%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	86%	*	*	*	86%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	81%	86%	*	*	*	82%	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	89%	84%	*	*	*	82%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	76%	83%	*	*	*	62%	78%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	77%	84%	*	*	*	100%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	73%	81%	*	*	*	75%	77%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	78%	*	*	*	73%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	74%	*	*	*	70%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	90%	*	*	*	91%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	59%	64%	*	*	*	58%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	58%	*	*	*	51%	55%

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						
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	59%	68%	*	*	*	60%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	52%	58%	*	*	*	47%	54%

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	46%	49%	*	*	*	41%	47%
Q52. Patient has had a review of cancer care by GP practice	21%	20%	*	*	*	22%	20%

LIVING WITH AND BEYOND CANCER			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	32%	*	*	*	41%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	81%	*	*	*	78%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	62%	69%	*	*	*	60%	65%

YOUR OVERALL NHS CARE		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	89%	93%	*	*	*	87%	90%
Q57. Administration of care was very good or good	85%	89%	*	*	*	87%	87%
Q58. Cancer research opportunities were discussed with patient	36%	39%	*	*	*	55%	38%
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.0	*	*	*	9.0	8.9

Ethnicity tables

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%	*	*	*	*	73%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	68%	*	*	*	*	69%	68%

DIAGNOSTIC TESTS	Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	94%	*	*	*	*	93%	94%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	*	*	*	*	78%	85%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	*	*	*	*	72%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	*	*	*	*	86%	80%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	*	*	*	*	96%	95%	

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	81%	*	*	*	*	83%	81%	
Q13. Patient was definitely told sensitively that they had cancer	74%	*	*	*	*	75%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	*	*	*	*	79%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	84%	*	*	*	*	86%	84%	
Q16. Patient was told they could go back later for more information about their diagnosis	83%	*	*	*	*	76%	83%	

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	90%	*	*	*	*	89%	90%
Q18. Patient found it very or quite easy to contact their main contact person	88%	*	*	*	*	89%	88%
Q19. Patient found advice from main contact person was very or quite helpful	97%	*	*	*	*	96%	97%

DECIDING ON THE BEST TREATMENT		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	85%	*	*	*	*	82%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	*	*	*	*	73%	80%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	*	*	*	*	78%	85%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	58%	*	*	*	*	63%	58%	

Ethnicity tables

CARE PLANNING	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	74%	*	*	*	*	70%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	*	*	*	*	90%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	*	*	*	*	96%	98%

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	91%	*	*	*	*	91%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	*	*	*	*	82%	78%
Q29. Patient was offered information about how to get financial help or benefits	73%	*	*	*	*	68%	72%

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	77%	*	*	*	*	75%	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	69%	*	*	*	*	71%	69%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	73%	*	*	*	*	69%	73%		
Q34. Patient was always able to get help from ward staff when needed	71%	*	*	*	*	67%	71%		
Q35. Patient was always able to discuss worries and fears with hospital staff	67%	*	*	*	*	56%	66%		
Q36. Hospital staff always did everything they could to help the patient control pain	84%	*	*	*	*	80%	84%		
Q37. Patient was always treated with respect and dignity while in hospital	88%	*	*	*	*	83%	88%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	*	*	*	*	77%	88%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	*	*	*	*	84%	81%		

Ethnicity tables

YOUR TREATMENT	Ethnicity									
	White	Mixed	Asian	Black	Other	Not given	All			
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	*	*	*	*	90%	91%			
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	*	*	*	82%	87%			
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	*	*	*	*	86%	88%			
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	*	*	*	*	76%	80%			
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	*	*	*	*	92%	84%			
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	*	*	*	*	82%	87%			
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	*	*	*	*	82%	83%			
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	*	*	*	*	86%	86%			
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	78%	*	*	*	*	75%	78%			
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	80%	*	*	*	*	93%	81%			
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	*	*	*	*	71%	77%			

IMMEDIATE AND LONG TERM SIDE EFFECT	S	Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	75%	*	*	*	*	73%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	*	*	*	*	73%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	*	*	*	*	89%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	*	*	*	*	59%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	*	*	*	*	56%	55%

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	63%	*	*	*	*	61%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	54%	*	*	*	*	51%	54%

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	47%	*	*	*	*	51%	47%
Q52. Patient has had a review of cancer care by GP practice	20%	*	*	*	*	24%	20%

Ethnicity tables

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	31%	*	*	*	*	39%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	81%	*	*	*	*	75%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	65%	*	*	*	*	59%	65%

YOUR OVERALL NHS CARE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	90%	*	*	*	*	89%	90%
Q57. Administration of care was very good or good	87%	*	*	*	*	88%	87%
Q58. Cancer research opportunities were discussed with patient	37%	*	*	*	*	53%	38%
Q59. Patient's average rating of care scored from very poor to very good	8.9	*	*	*	*	8.9	8.9

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	74%	77%	83%	80%	78%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60%	65%	75%	68%	67%	68%

DIAGNOSTIC TESTS		IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q5. Patient received all the information needed about the diagnostic test in advance	93%	96%	93%	93%	94%	94%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	85%	85%	85%	85%	85%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	77%	75%	80%	79%	78%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	75%	81%	84%	80%	78%	80%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	96%	95%	95%	94%	95%		

FINDING OUT THAT YOU HAD CANCER			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	83%	83%	82%	81%	79%	81%
Q13. Patient was definitely told sensitively that they had cancer	67%	78%	76%	72%	74%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	76%	80%	75%	77%	77%
Q15. Patient was definitely told about their diagnosis in appropriate place	82%	87%	84%	86%	82%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	80%	86%	83%	80%	85%	83%

SUPPORT FROM A MAIN CONTACT PERSON			IMD q			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q17. Patient had a main point of contact within the care team	89%	89%	90%	91%	90%	90%
Q18. Patient found it very or quite easy to contact their main contact person	84%	90%	88%	89%	89%	88%
Q19. Patient found advice from main contact person was very or quite helpful	96%	98%	98%	97%	97%	97%

IMD quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q20. Treatment options were explained in a way the patient could completely understand	85%	80%	87%	84%	84%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	72%	79%	81%	80%	82%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	84%	80%	86%	84%	87%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	65%	57%	58%	55%	59%	58%

CARE PLANNING		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	72%	75%	77%	74%	73%	74%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	92%	96%	95%	95%	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	92%	99%	99%	98%	100%	98%

SUPPORT FROM HOSPITAL STAFF			IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q27. Staff provided the patient with relevant information on available support	91%	90%	91%	89%	92%	91%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	79%	78%	78%	78%	78%		
Q29. Patient was offered information about how to get financial help or benefits	66%	73%	76%	71%	74%	72%		

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	81%	80%	76%	77%	75%	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	76%	72%	68%	66%	70%	69%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	72%	75%	72%	72%	74%	73%		
Q34. Patient was always able to get help from ward staff when needed	77%	72%	69%	71%	71%	71%		
Q35. Patient was always able to discuss worries and fears with hospital staff	71%	69%	67%	64%	65%	66%		
Q36. Hospital staff always did everything they could to help the patient control pain	85%	89%	83%	83%	83%	84%		
Q37. Patient was always treated with respect and dignity while in hospital	93%	93%	86%	86%	87%	88%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	84%	90%	89%	87%	89%	88%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	83%	80%	79%	83%	82%	81%		

IMD quintile tables

YOUR TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	88%	91%	91%	91%	91%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	93%	86%	85%	87%	87%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	83%	84%	90%	90%	89%	88%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	75%	92%	74%	77%	85%	80%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	75%	89%	80%	79%	91%	84%	
Q42_1. Patient completely had enough understandable information about their response to surgery	86%	87%	86%	88%	87%	87%	
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	76%	88%	82%	83%	85%	83%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	85%	84%	81%	89%	89%	86%	
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	75%	82%	74%	81%	77%	78%	
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	76%	83%	78%	74%	91%	81%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	63%	75%	75%	80%	80%	77%	

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	71%	77%	76%	75%	75%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	75%	74%	72%	71%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	89%	89%	87%	89%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	63%	63%	61%	60%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	58%	56%	56%	54%	55%

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	62%	63%	62%	63%	64%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	57%	54%	51%	54%	56%	54%

CARE FROM YOUR GP PRACTICE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	41%	48%	50%	49%	45%	47%
Q52. Patient has had a review of cancer care by GP practice	22%	23%	18%	21%	20%	20%

IMD quintile tables

LIVING WITH AND BEYOND CANCER			IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	28%	26%	32%	34%	33%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	83%	81%	82%	79%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	65%	63%	67%	64%	65%

YOUR OVERALL NHS CARE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	91%	90%	90%	90%	90%	90%
Q57. Administration of care was very good or good	86%	83%	85%	88%	89%	87%
Q58. Cancer research opportunities were discussed with patient	39%	39%	37%	36%	41%	38%
Q59. Patient's average rating of care scored from very poor to very good	8.7	8.9	9.0	8.9	8.9	8.9

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status						
	Yes No Not given A						
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	78%	83%	72%	79%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65%	73%	72%	68%			

DIAGNOSTIC TESTS	Long-term condition status				
	Yes	No	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	93%	95%	93%	94%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	87%	78%	85%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	78%	72%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	82%	84%	80%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	95%	95%	95%	

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	80%	82%	84%	81%
Q13. Patient was definitely told sensitively that they had cancer	73%	76%	72%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	79%	73%	77%
Q15. Patient was definitely told about their diagnosis in appropriate place	84%	84%	83%	84%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	88%	75%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N Long-term condition status				
	Yes No Not given				
Q17. Patient had a main point of contact within the care team	89%	93%	85%	90%	
Q18. Patient found it very or quite easy to contact their main contact person	88%	88%	89%	88%	
Q19. Patient found advice from main contact person was very or quite helpful	97%	97%	97%	97%	

DECIDING ON THE BEST TREATMENT		Long-term con-	dition status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	83%	88%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	79%	83%	74%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	86%	83%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	56%	60%	64%	58%

CARE PLANNING	Long-term condition status				
	Yes No Not given				
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	73%	78%	68%	74%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	97%	90%	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	96%	98%	

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given Al				
Q27. Staff provided the patient with relevant information on available support	89%	94%	90%	91%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	80%	79%	78%	
Q29. Patient was offered information about how to get financial help or benefits	69%	78%	74%	72%	

HOSPITAL CARE	Long-term condition status				
	Yes	No	Not given	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	77%	79%	66%	77%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	68%	75%	58%	69%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	71%	78%	64%	73%	
Q34. Patient was always able to get help from ward staff when needed	70%	76%	62%	71%	
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	71%	50%	66%	
Q36. Hospital staff always did everything they could to help the patient control pain	82%	88%	82%	84%	
Q37. Patient was always treated with respect and dignity while in hospital	87%	90%	82%	88%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	89%	90%	75%	88%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	83%	81%	81%	

YOUR TREATMENT		Long-term co	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	92%	89%	91%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	88%	81%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	89%	88%	89%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	79%	76%	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	81%	85%	100%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	88%	83%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	84%	84%	77%	83%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	86%	87%	84%	86%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	78%	80%	68%	78%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	78%	82%	100%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	77%	76%	77%

IMMEDIATE AND LONG TERM SIDE EFFECTS	Long-term condition status			
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	79%	71%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	76%	65%	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	90%	87%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	64%	56%	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	60%	46%	55%

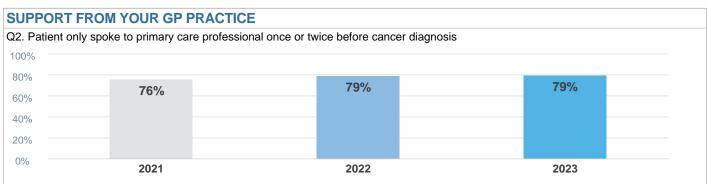
SUPPORT WHILE AT HOME	Long-term condition status				
	Yes No Not given All				
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	62%	66%	55%	63%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	59%	48%	54%	

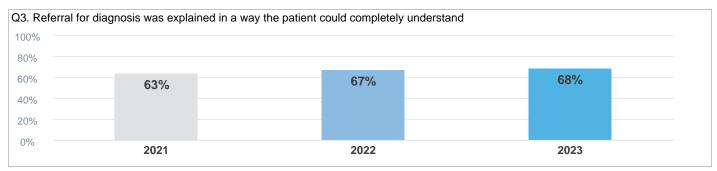
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	46%	49%	47%	47%	
Q52. Patient has had a review of cancer care by GP practice	20%	20%	23%	20%	

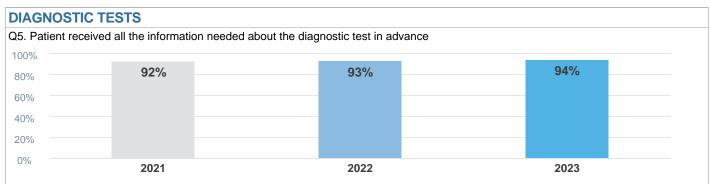
LIVING WITH AND BEYOND CANCER		Long-term con	condition status	
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	29%	33%	46%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	79%	83%	78%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	64%	67%	60%	65%

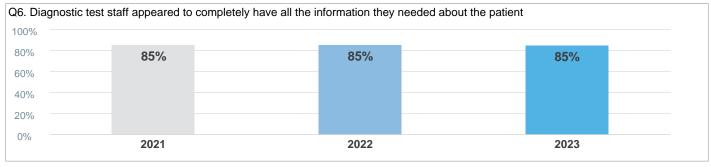
YOUR OVERALL NHS CARE	Long-term condition status				
	Yes No Not given Al				
Q56. The whole care team worked well together	89%	93%	89%	90%	
Q57. Administration of care was very good or good	87%	87%	87%	87%	
Q58. Cancer research opportunities were discussed with patient	37%	39%	46%	38%	
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	8.8	8.9	

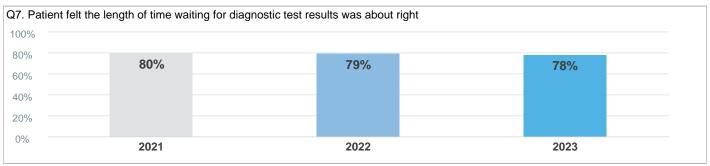




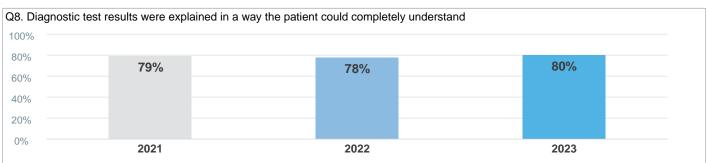


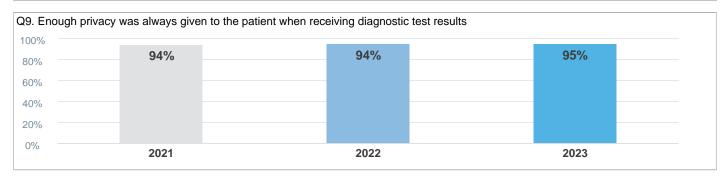


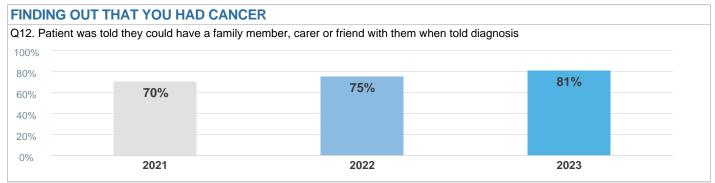


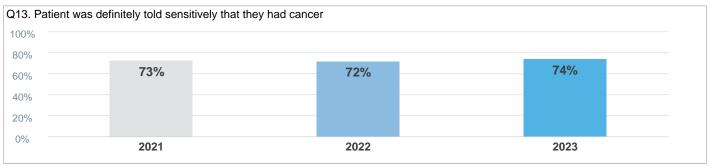


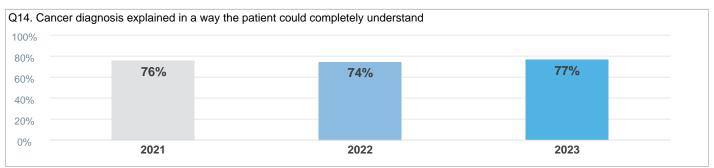




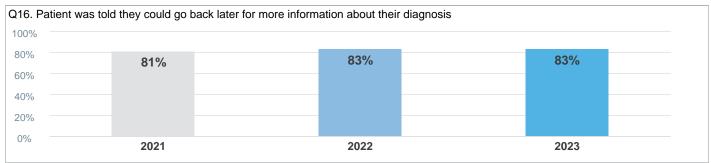


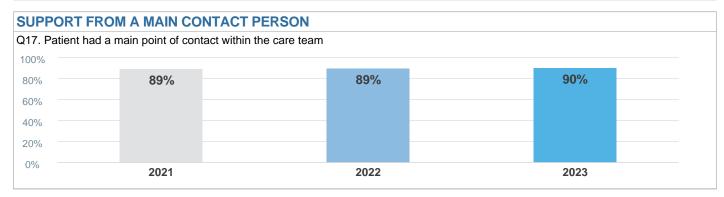


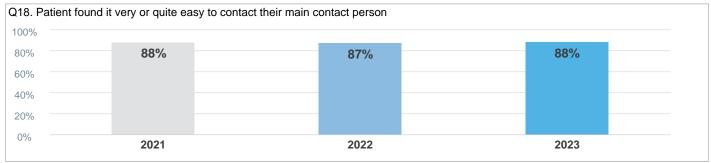


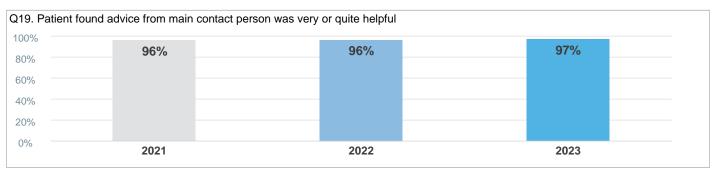




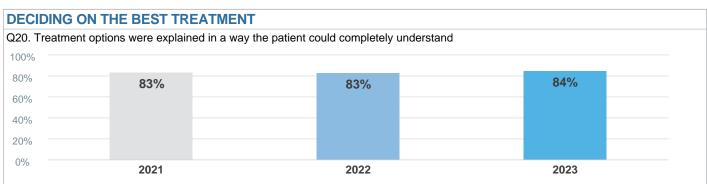


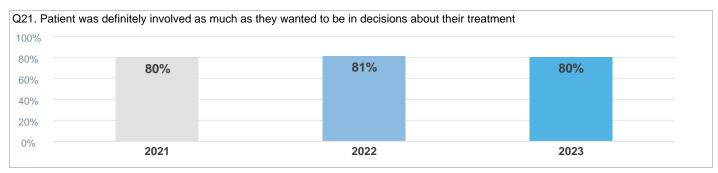


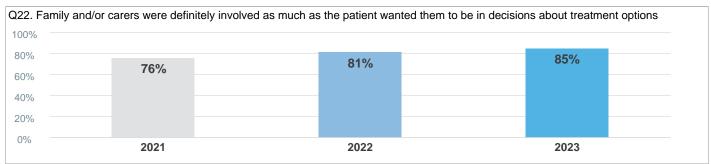


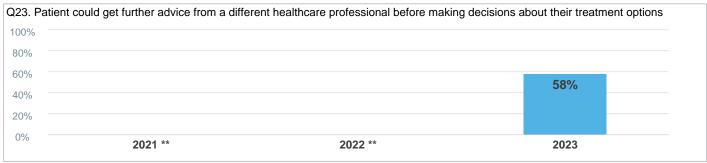


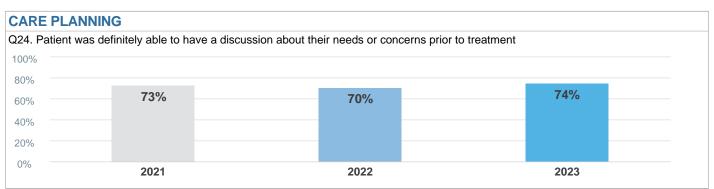


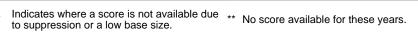


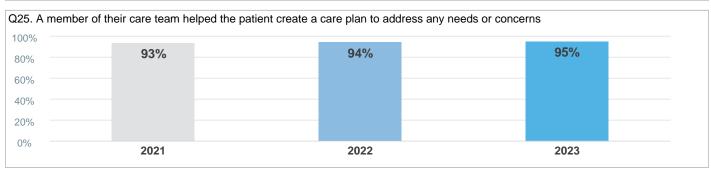


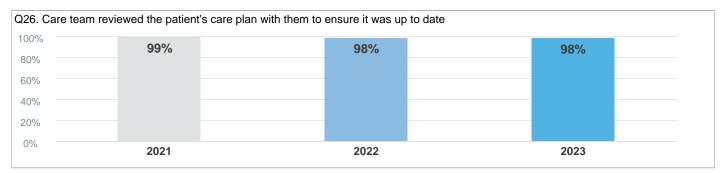


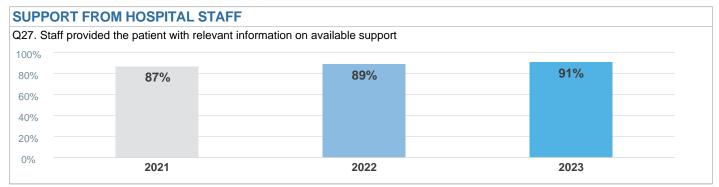


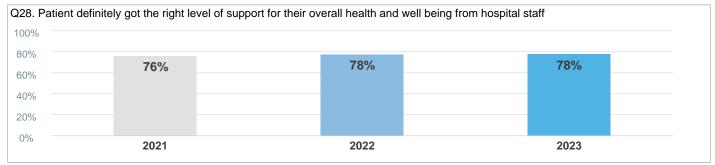


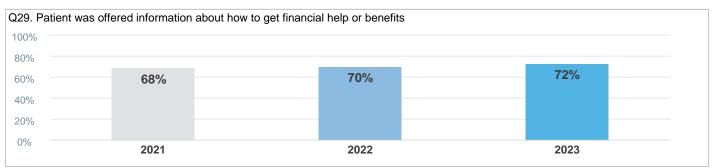




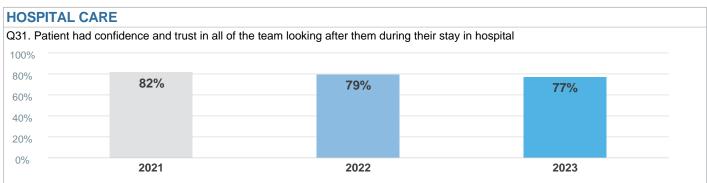


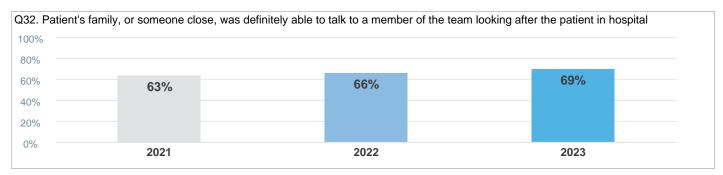


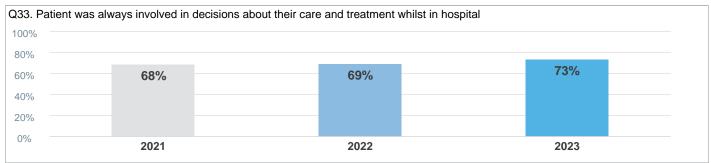


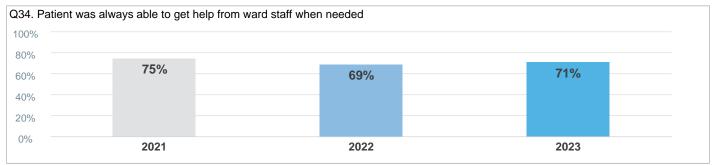


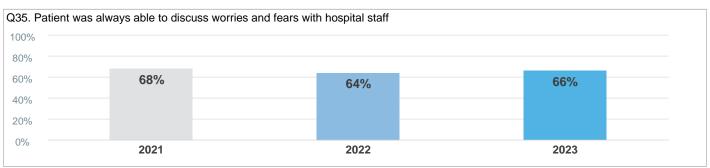


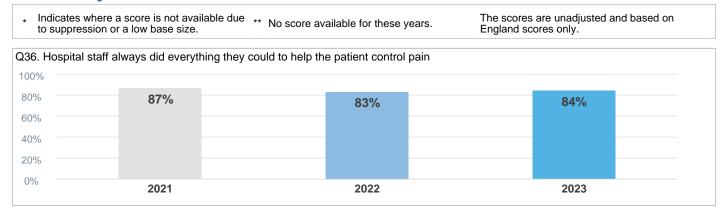


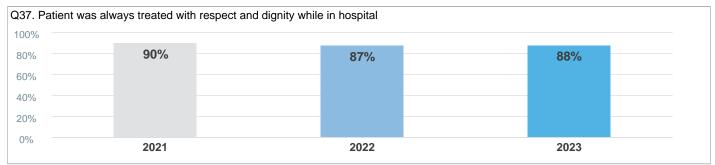


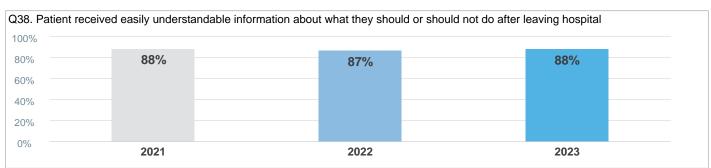


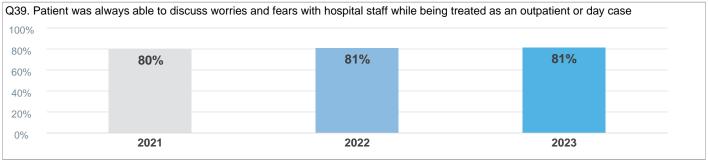


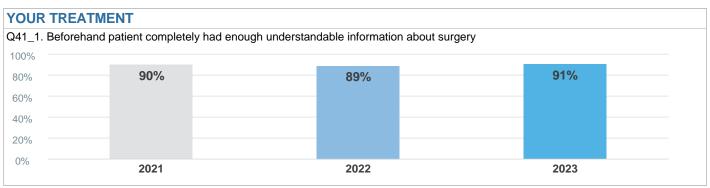


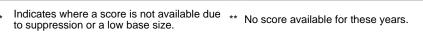


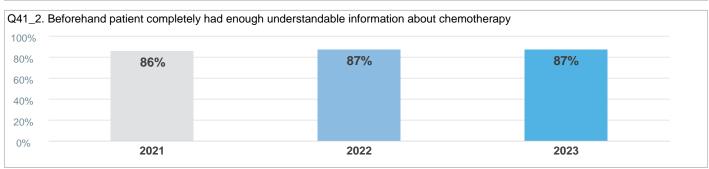


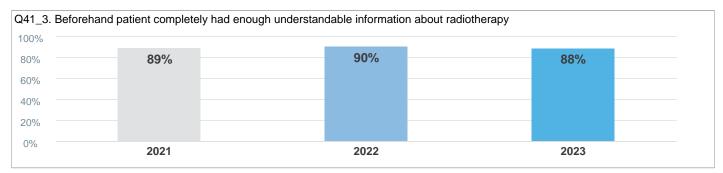


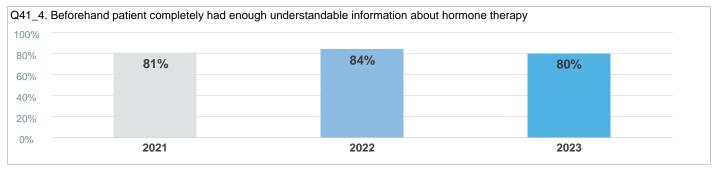


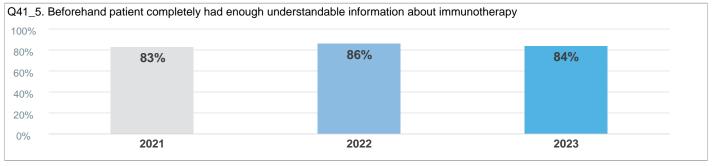


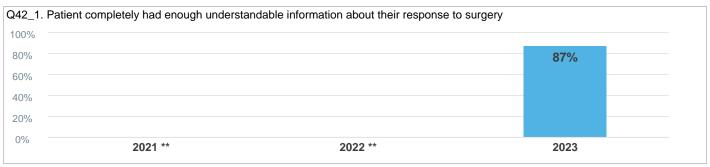


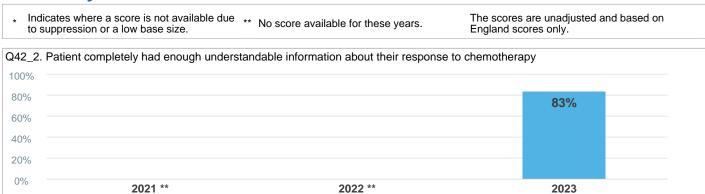


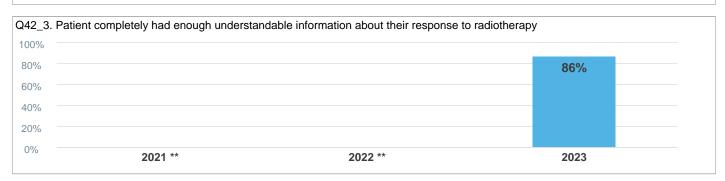


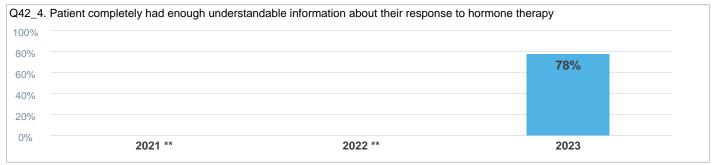


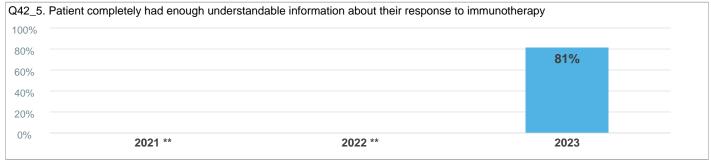


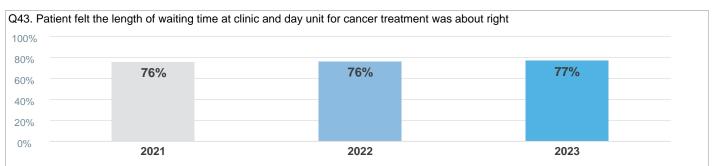


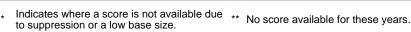


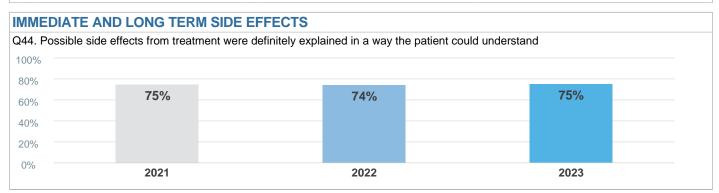


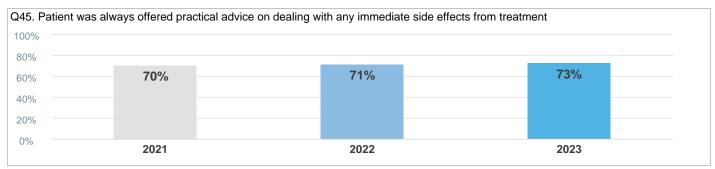


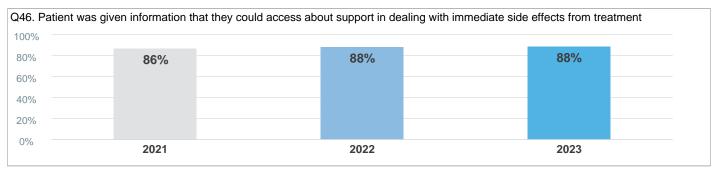


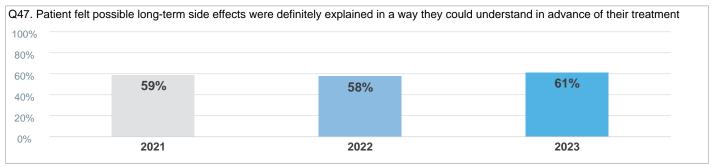


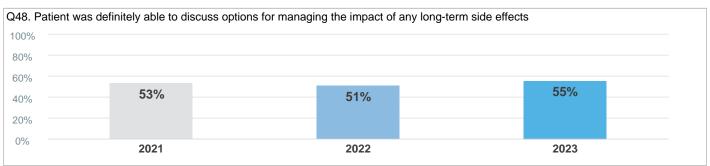


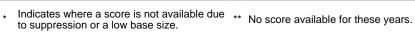


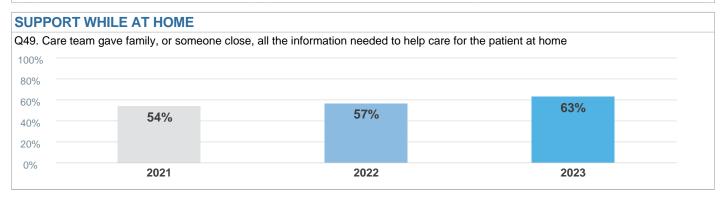


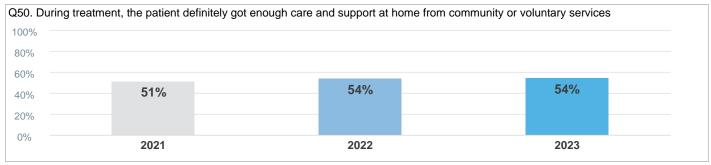


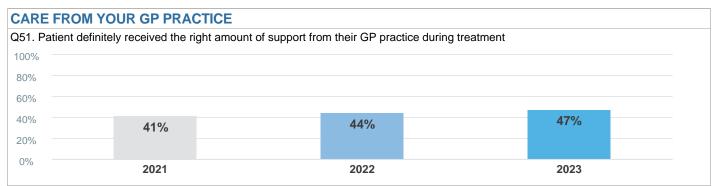


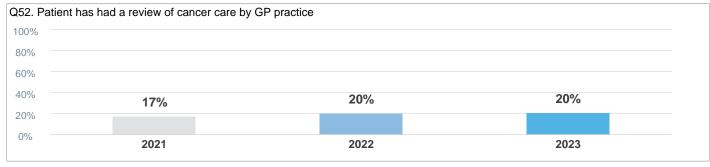


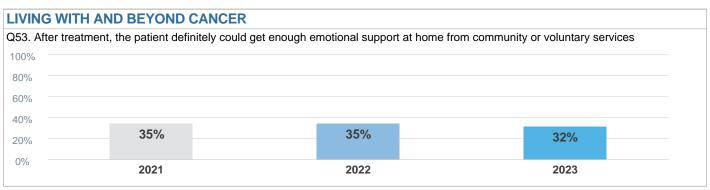




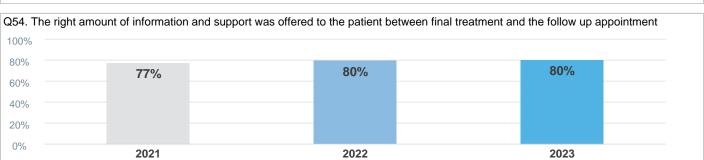


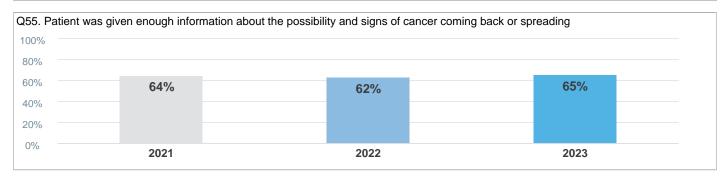


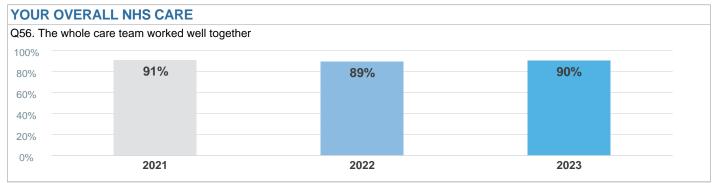


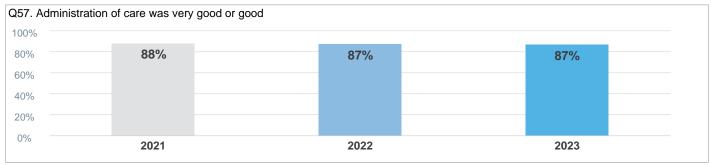


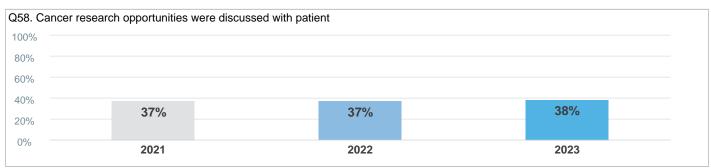












Cancer Patient Experience Survey 2023 NHS Humber and North Yorkshire Integrated Care Board

