

Cancer Patient Experience Survey

2023 Results

NHS Lincolnshire Integrated Care Board

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Cancer Patient Experience Survey 2023 NHS Lincolnshire Integrated Care Board

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Executive summary

Questions above expected range

NHS Lincolnshire Integrated Care Board has no scores above expected range.

Questions below expected range

	Case	mix adjusted s	cores	
	2023 score	Lower expected range	Upper expected range	England score
Q3. Referral for diagnosis was explained in a way the patient could completely understand	61%	62%	71%	67%
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	83%	88%	86%
Q17. Patient had a main point of contact within the care team	87%	89%	94%	91%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	66%	66%	75%	70%
Q37. Patient was always treated with respect and dignity while in hospital	84%	84%	90%	87%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	44%	46%	59%	52%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	24%	26%	39%	32%
Q57. Administration of care was very good or good	84%	84%	90%	87%

Introduction

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

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

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

Methodology

Eligibility, fieldwork and survey methods

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

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

Note on question comparability

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

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

How alliance and ICB results are generated

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

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

Case-mix adjustment

Both unadjusted and adjusted scores are presented in this report. Case-mix adjusted scores allow us to account for the impact that differing patient populations might have on results. By using the case-mix adjusted estimates we can obtain a greater understanding of how an ICB is performing given their patient population. The factors taken into account in this case-mix adjustment are Male/Female/Non-binary/Other, age, ethnicity, deprivation, and cancer type.

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

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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

1,099 patients responded out of a total of 1,922 patients, resulting in a response rate of 57%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	2,053	1,922	1,099	57%
National	129,231	121,121	63,438	52%

Respondents by survey type

	Number of respondents
Paper	901
Online	197
Phone	1
Translation service	0
Total	1,099

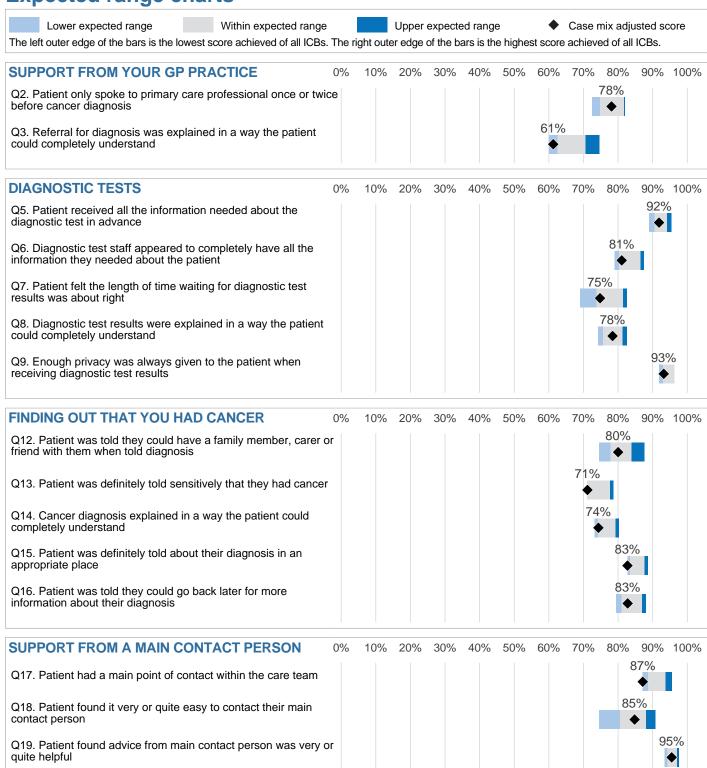
Respondents by tumour group

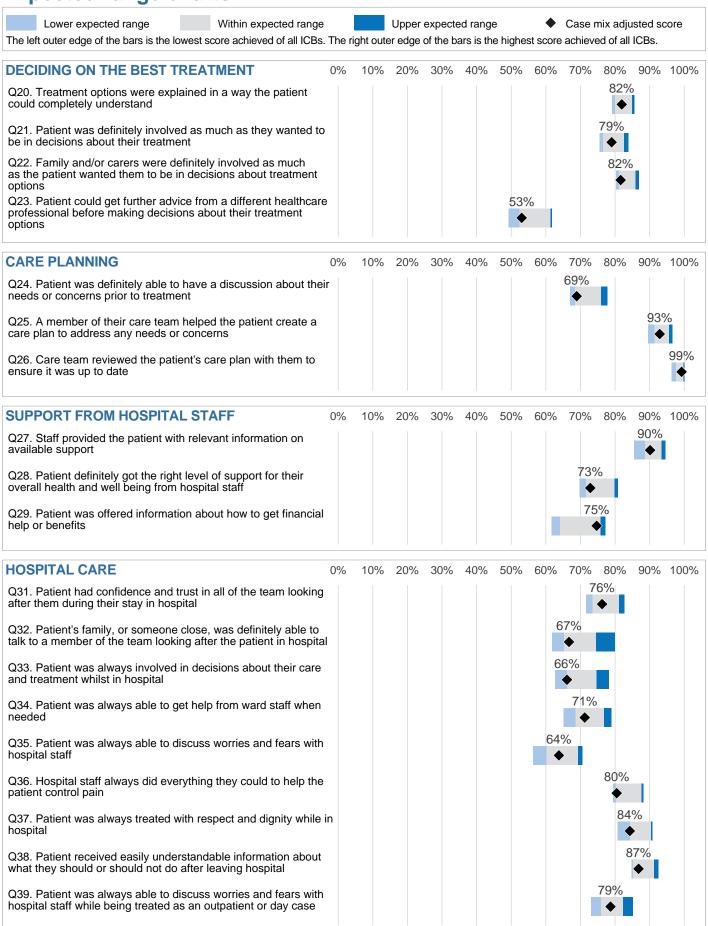
	Number of respondents
Brain / CNS	3
Breast	215
Colorectal / LGT	148
Gynaecological	51
Haematological	144
Head and neck	17
Lung	49
Prostate	197
Sarcoma	6
Skin	30
Upper gastro	45
Urological	88
Other	106
Total	1,099

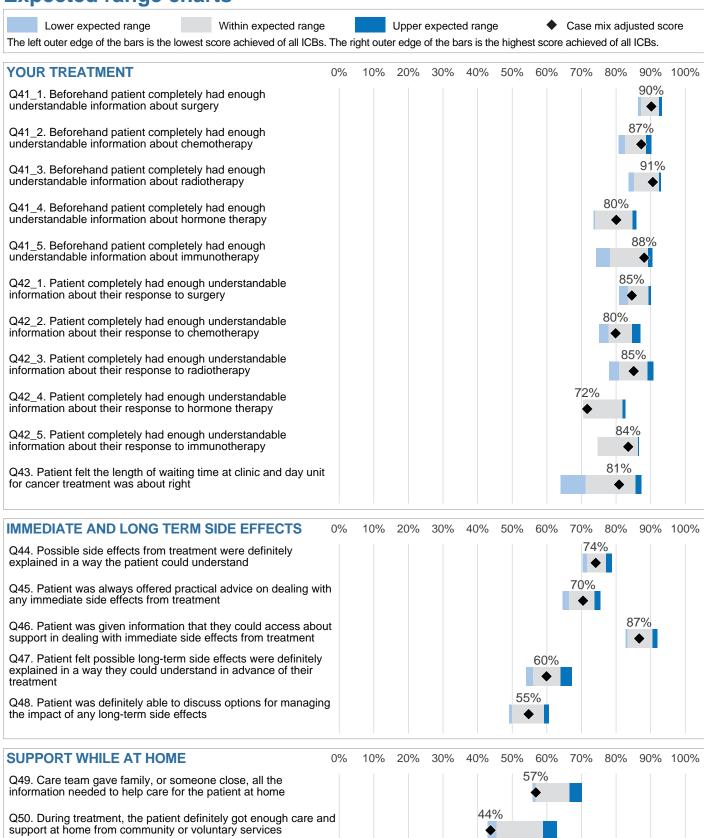
Respondents by ethnicity

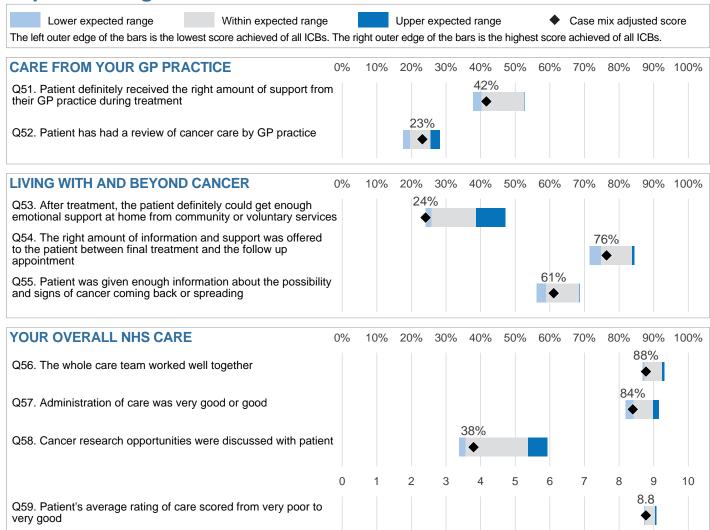
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,009
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	15
Mixed / Multiple Ethnic Groups	I
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	I
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	I
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	I
Arab	*
Any other ethnic group	*
Not given	
Not given	60
Total	1,099

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









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Comparability tables

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

** No score available for 2022.



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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

			Unadjust	ed score	Case n					
SUPPORT FROM YOUR GP PRACTICE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	501	78%	524	79%			78%	75%	82%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	766	64%	742	62%			61%	62%	71%	67%

			Unadjus		Case n					
DIAGNOSTIC TESTS		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	871	89%	875	92%			92%	91%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	913	83%	912	82%			81%	80%	87%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	916	78%	920	76%		•	75%	74%	81%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	913	76%	923	79%			78%	76%	81%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	913	94%	917	94%			93%	93%	96%	95%

			Unadjus	ted score		Case n				
FINDING OUT THAT YOU HAD CANCER		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	1002	71%	1025	80%	A	A	80%	78%	84%	81%
Q13. Patient was definitely told sensitively that they had cancer	1066	72%	1085	71%			71%	71%	78%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	1078	75%	1090	75%			74%	74%	79%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	1072	83%	1085	83%			83%	83%	88%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	955	80%	991	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	1026	89%	1048	87%			87%	89%	94%	91%
Q18. Patient found it very or quite easy to contact their main contact person	810	83%	800	85%			85%	81%	88%	84%
Q19. Patient found advice from main contact person was very or quite helpful	847	96%	840	96%			95%	94%	97%	96%

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Comparability tables

Adjusted score below lower

and

expected range

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

			Unadjust	ted score		Case n				
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	995	82%	1013	82%			82%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	1064	79%	1074	79%			79%	77%	83%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	895	77%	950	82%	A	A	82%	81%	86%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	591	53%			53%	52%	61%	57%

			Unadjust	ted score		Case n	d 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	945	68%	968	69%			69%	68%	76%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	543	93%	540	93%			93%	91%	96%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	423	98%	414	99%			99%	98%	100%	99%

			Unadjust	ted score		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	869	90%	892	90%			90%	89%	93%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	1060	75%	1087	73%			73%	72%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	557	70%	599	74%			75%	64%	76%	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.	A (or	▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	expected range Adjusted score between upper and lower expected ranges Adjusted score above upper expected range

	Unadjusted scores						Case n	d 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	476	82%	461	77%		•	76%	73%	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	382	64%	368	67%			67%	65%	75%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	464	69%	452	67%			66%	66%	75%	70%
Q34. Patient was always able to get help from ward staff when needed	468	72%	448	72%		•	71%	69%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	446	69%	439	64%		•	64%	60%	69%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	395	86%	390	81%		•	80%	80%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	474	89%	458	85%		•	84%	84%	90%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	466	86%	449	87%			87%	85%	91%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	924	80%	938	79%			79%	76%	82%	79%

			Unadjus	ted score	S		Case r	nix adjuste	ed scores	
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	542	88%	515	90%			90%	87%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	519	85%	511	87%			87%	83%	89%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	305	89%	292	91%		A	91%	85%	92%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	201	76%	217	82%			80%	74%	85%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	119	78%	176	88%	A		88%	78%	89%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	511	85%			85%	84%	89%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	510	80%			80%	78%	85%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	296	85%			85%	81%	89%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	219	74%			72%	71%	82%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	174	83%			84%	75%	86%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	1040	81%	1038	82%			81%	71%	86%	78%

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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.	▲ o	r ▼	Change 2022-2023: Indicates where 2023 score is significantly higher or lower than 2022 score. Change overall: Indicates significant change overall (2021, 2022, and 2023).	expected range Adjusted score between upper and lower expected ranges Adjusted score above upper expected range

			Unadjus	ted score		Case n	nix adjuste	d scores		
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	1016	74%	1010	74%			74%	72%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	958	69%	971	71%			70%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	782	87%	750	87%			87%	83%	91%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	934	60%	963	60%			60%	56%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	787	52%	810	55%			55%	50%	59%	55%

			Unadjus	ted score		Case n				
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	670	52%	744	57%			57%	57%	67%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	381	47%	408	44%			44%	46%	59%	52%

			Unadjust	ted score	S		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	646	41%	643	42%			42%	40%	53%	46%
Q52. Patient has had a review of cancer care by GP practice	1023	20%	1044	23%		A	23%	20%	26%	23%

			Unadjus	ted score	s		Case n	nix adjuste	ed 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	210	25%	207	24%			24%	26%	39%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	450	77%	467	77%			76%	75%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	828	61%	844	62%			61%	59%	69%	64%

			Unadjust	ted score		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	1007	90%	1009	88%			88%	87%	92%	90%
Q57. Administration of care was very good or good	1056	85%	1054	84%			84%	84%	90%	87%
Q58. Cancer research opportunities were discussed with patient	609	35%	636	37%			38%	36%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	1033	8.8	1033	8.8			8.8	8.7	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	93%	74%	79%	63%	71%	76%	82%	*	92%	70%	76%	78%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	81%	62%	44%	42%	60%	53%	68%	*	56%	50%	63%	59%	62%

DIAGNOSTIC TESTS							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	94%	93%	83%	93%	86%	92%	90%	*	100%	84%	91%	96%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	87%	78%	80%	81%	57%	84%	85%	*	88%	82%	77%	80%	82%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	82%	75%	70%	78%	64%	78%	78%	*	68%	62%	78%	67%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	84%	82%	70%	77%	71%	70%	82%	*	83%	67%	80%	80%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	97%	91%	88%	93%	93%	90%	96%	*	92%	90%	90%	98%	94%

FINDING OUT THAT YOU HAD CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	90%	82%	57%	74%	82%	79%	83%	*	89%	74%	73%	79%	80%
Q13. Patient was definitely told sensitively that they had cancer	*	76%	72%	58%	70%	59%	69%	74%	*	80%	56%	71%	71%	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	81%	78%	67%	70%	65%	67%	74%	*	87%	62%	77%	74%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	94%	75%	67%	80%	76%	76%	87%	*	97%	67%	81%	83%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	*	94%	78%	79%	79%	87%	80%	84%	*	93%	67%	83%	72%	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	*	87%	91%	88%	91%	100%	71%	91%	*	86%	81%	81%	76%	87%
Q18. Patient found it very or quite easy to contact their main contact person	*	83%	86%	80%	90%	93%	82%	85%	*	100%	81%	73%	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	92%	95%	95%	99%	100%	100%	94%	*	100%	97%	95%	97%	96%

DECIDING ON THE BEST TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q20. Treatment options were explained in a way the patient could completely understand	*	83%	77%	83%	82%	75%	93%	80%	*	93%	79%	81%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	79%	75%	92%	75%	82%	85%	82%	*	76%	71%	84%	79%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	81%	84%	72%	81%	73%	86%	86%	*	96%	73%	82%	79%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	54%	48%	54%	49%	73%	63%	56%	*	71%	40%	45%	51%	53%

CARE PLANNING							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	71%	65%	64%	73%	63%	72%	67%	*	83%	53%	78%	65%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	91%	92%	91%	97%	90%	95%	91%	*	100%	94%	100%	88%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	99%	100%	98%	*	100%	98%	*	100%	100%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q27. Staff provided the patient with relevant information on available support	*	91%	94%	80%	91%	88%	93%	91%	*	95%	89%	88%	83%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	73%	75%	62%	79%	71%	76%	76%	*	80%	57%	74%	68%	73%
Q29. Patient was offered information about how to get financial help or benefits	*	81%	70%	48%	78%	67%	94%	65%	*	60%	86%	51%	82%	74%

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	*	76%	73%	76%	81%	83%	76%	79%	*	*	71%	92%	61%	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	*	75%	60%	56%	77%	70%	68%	66%	*	*	65%	71%	53%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	68%	61%	66%	66%	83%	71%	59%	*	*	60%	72%	77%	67%
Q34. Patient was always able to get help from ward staff when needed	*	74%	73%	76%	73%	75%	76%	65%	*	*	70%	75%	58%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	64%	60%	63%	74%	50%	76%	60%	*	*	60%	74%	57%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	81%	82%	73%	86%	67%	69%	87%	*	*	89%	85%	67%	81%
Q37. Patient was always treated with respect and dignity while in hospital	*	84%	80%	80%	94%	75%	81%	94%	*	*	75%	93%	77%	85%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	88%	88%	86%	90%	83%	90%	88%	*	*	80%	87%	86%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	74%	81%	86%	81%	85%	80%	84%	*	83%	72%	80%	77%	79%

YOUR TREATMENT							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	94%	90%	93%	57%	91%	93%	91%	*	100%	84%	86%	96%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	89%	80%	96%	88%	*	96%	80%	*	*	93%	94%	87%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	95%	83%	93%	*	75%	*	93%	*	*	*	*	89%	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	79%	*	*	*	*	*	84%	*	*	*	*	75%	82%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	91%	*	*	83%	*	92%	*	*	80%	*	94%	94%	88%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	87%	80%	88%	54%	82%	93%	82%	*	100%	89%	81%	100%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	77%	70%	83%	85%	*	86%	77%	*	*	87%	94%	80%	80%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	86%	86%	93%	*	67%	*	87%	*	*	*	*	79%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	68%	*	*	*	*	*	77%	*	*	*	*	76%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	85%	*	*	86%	*	84%	*	*	94%	*	83%	88%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	76%	90%	74%	74%	94%	81%	92%	*	80%	81%	81%	81%	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	71%	72%	70%	76%	76%	80%	74%	*	83%	71%	77%	76%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	67%	69%	76%	73%	71%	74%	74%	*	74%	62%	71%	71%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	84%	88%	86%	89%	79%	89%	90%	*	89%	90%	82%	87%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	65%	66%	44%	53%	50%	60%	63%	*	77%	42%	62%	55%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	54%	56%	55%	46%	47%	63%	59%	*	67%	48%	61%	53%	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	*	53%	63%	64%	58%	69%	63%	55%	*	68%	50%	58%	47%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	36%	46%	40%	39%	*	60%	38%	*	*	44%	44%	52%	44%

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	*	47%	49%	40%	42%	27%	36%	43%	*	27%	54%	28%	34%	42%
Q52. Patient has had a review of cancer care by GP practice	*	27%	20%	18%	19%	29%	33%	25%	*	14%	27%	20%	18%	23%

LIVING WITH AND BEYOND CANCER							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	16%	26%	21%	19%	*	18%	23%	*	*	*	38%	21%	24%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	79%	79%	74%	75%	54%	92%	80%	*	*	77%	70%	68%	77%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	58%	64%	54%	73%	53%	50%	56%	*	89%	48%	63%	63%	62%

YOUR OVERALL NHS CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q56. The whole care team worked well together	*	88%	90%	80%	90%	75%	81%	90%	*	100%	79%	89%	85%	88%
Q57. Administration of care was very good or good	*	87%	80%	80%	86%	65%	87%	83%	*	100%	78%	84%	80%	84%
Q58. Cancer research opportunities were discussed with patient	*	25%	45%	38%	49%	21%	40%	34%	*	65%	38%	29%	37%	37%
Q59. Patient's average rating of care scored from very poor to very good	*	8.8	8.6	8.5	9.1	8.8	8.9	8.8	*	9.1	8.3	8.9	8.7	8.8

SUPPORT FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	83%	78%	72%	80%	82%	83%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	63%	84%	68%	57%	62%	54%	62%

DIAGNOSTIC TESTS					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	92%	85%	92%	93%	93%	90%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	69%	77%	81%	81%	86%	80%	82%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	69%	63%	71%	76%	79%	93%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	62%	71%	78%	79%	82%	81%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	77%	88%	93%	94%	95%	95%	94%

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	*	*	73%	82%	77%	79%	84%	79%	80%
Q13. Patient was definitely told sensitively that they had cancer	*	*	65%	67%	67%	70%	76%	82%	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	71%	70%	75%	75%	76%	75%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	71%	81%	80%	82%	87%	86%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	79%	88%	81%	85%	81%	76%	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	*	*	82%	75%	91%	86%	89%	78%	87%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	77%	85%	82%	85%	85%	94%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	100%	93%	92%	96%	98%	95%	96%

DECIDING ON THE BEST TREATMENT			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	63%	82%	81%	83%	84%	80%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	65%	65%	77%	82%	81%	82%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	77%	69%	77%	81%	90%	79%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	55%	50%	51%	56%	52%	46%	53%

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	*	*	65%	61%	69%	71%	70%	61%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	90%	88%	93%	96%	96%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	95%	99%	99%	100%	100%	99%

SUPPORT FROM HOSPITAL STAFF			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	*	94%	87%	90%	90%	92%	90%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	53%	68%	67%	73%	79%	71%	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	86%	69%	74%	73%	78%	63%	74%

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	*	*	70%	72%	67%	80%	80%	86%	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	*	*	*	81%	56%	69%	69%	76%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	60%	69%	56%	72%	69%	50%	67%
Q34. Patient was always able to get help from ward staff when needed	*	*	70%	77%	56%	74%	81%	65%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	30%	71%	51%	72%	68%	63%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	60%	72%	76%	86%	84%	75%	81%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	90%	81%	69%	92%	90%	79%	85%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	90%	83%	84%	89%	90%	74%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	63%	74%	78%	80%	84%	69%	79%

YOUR TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	75%	85%	86%	93%	92%	90%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	83%	93%	82%	88%	90%	94%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	100%	89%	94%	88%	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	83%	82%	79%	83%	*	82%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	89%	85%	88%	91%	*	88%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	92%	80%	83%	86%	86%	85%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	75%	79%	73%	85%	79%	94%	80%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	92%	82%	86%	85%	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	78%	66%	71%	76%	*	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	79%	79%	87%	86%	*	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	65%	76%	75%	85%	84%	82%	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	82%	80%	75%	75%	73%	67%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	65%	71%	66%	72%	73%	68%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	93%	84%	85%	89%	85%	88%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	56%	64%	61%	61%	60%	50%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	50%	59%	52%	56%	57%	45%	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	*	*	47%	59%	50%	61%	57%	53%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	50%	59%	41%	43%	45%	33%	44%

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	*	*	36%	48%	40%	39%	45%	41%	42%
Q52. Patient has had a review of cancer care by GP practice	*	*	12%	39%	23%	22%	20%	29%	23%

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	*	*	*	25%	36%	23%	22%	*	24%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	64%	75%	81%	78%	68%	77%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	46%	62%	57%	61%	64%	73%	62%

YOUR OVERALL NHS CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	94%	89%	83%	86%	93%	88%	88%
Q57. Administration of care was very good or good	*	*	76%	77%	82%	83%	87%	86%	84%
Q58. Cancer research opportunities were discussed with patient	*	*	20%	34%	32%	37%	45%	*	37%
Q59. Patient's average rating of care scored from very poor to very good	*	*	8.5	8.5	8.6	8.8	9.0	8.9	8.8

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	82%	78%	*	*	*	70%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	65%	59%	*	*	*	67%	62%

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%	92%	*	*	*	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	81%	*	*	*	76%	82%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	76%	*	*	*	81%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	79%	*	*	*	70%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	94%	*	*	*	92%	94%

FINDING OUT THAT YOU HAD CANCER			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	81%	80%	*	*	*	74%	80%
Q13. Patient was definitely told sensitively that they had cancer	70%	73%	*	*	*	66%	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	76%	*	*	*	71%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	83%	*	*	*	80%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	83%	*	*	*	80%	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	85%	89%	*	*	*	84%	87%
Q18. Patient found it very or quite easy to contact their main contact person	84%	86%	*	*	*	83%	85%
Q19. Patient found advice from main contact person was very or quite helpful	94%	97%	*	*	*	97%	96%

DECIDING ON THE BEST TREATMENT			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	84%	82%	*	*	*	67%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	80%	*	*	*	80%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	84%	*	*	*	79%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	52%	56%	*	*	*	38%	53%

CARE PLANNING			Male/Fema	le/Non-bina	ry/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	69%	69%	*	*	*	70%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	95%	*	*	*	84%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	99%	*	*	*	100%	99%

SUPPORT FROM HOSPITAL STAFF			Male/Fema	le/Non-bina	ry/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	88%	93%	*	*	*	89%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	69%	78%	*	*	*	73%	73%
Q29. Patient was offered information about how to get financial help or benefits	74%	74%	*	*	*	68%	74%

HOSPITAL CARE	Female Male Non-binary brefer to self-describe rot to say Not given All confidence and trust in all of the team of during their stay in hospital mily, or someone close, was definitely number of the team looking after the all salways involved in decisions about atment whilst in hospital as always able to get help from ward 73% 73% 73% 73% 73% 73% 73% 73% 73% 73%											
	Female	Male		to self-		Not given	All					
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	72%	81%	*	*	*	79%	77%					
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	67%	69%	*	*	*	45%	67%					
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	66%	*	*	*	46%	67%					
Q34. Patient was always able to get help from ward staff when needed	73%	72%	*	*	*	42%	72%					
Q35. Patient was always able to discuss worries and fears with hospital staff	59%	71%	*	*	*	50%	64%					
Q36. Hospital staff always did everything they could to help the patient control pain	77%	85%	*	*	*	*	81%					
Q37. Patient was always treated with respect and dignity while in hospital	80%	90%	*	*	*	83%	85%					
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	90%	*	*	*	69%	87%					
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	82%	*	*	*	77%	79%					

YOUR TREATMENT			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	90%	*	*	*	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	89%	84%	*	*	*	94%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	90%	*	*	*	*	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	82%	*	*	*	82%	82%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	90%	87%	*	*	*	*	88%
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	84%	*	*	*	92%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	79%	81%	*	*	*	82%	80%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	87%	*	*	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	68%	76%	*	*	*	91%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	85%	84%	*	*	*	*	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	87%	*	*	*	83%	82%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	76%	*	*	*	67%	74%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	73%	*	*	*	73%	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	90%	*	*	*	82%	87%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	62%	*	*	*	43%	60%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	53%	57%	*	*	*	55%	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	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	52%	63%	*	*	*	53%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	38%	50%	*	*	*	45%	44%

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	42%	42%	*	*	*	33%	42%
Q52. Patient has had a review of cancer care by GP practice	23%	23%	*	*	*	16%	23%

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	21%	30%	*	*	*	12%	24%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	75%	79%	*	*	*	74%	77%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	59%	66%	*	*	*	46%	62%

YOUR OVERALL NHS CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	86%	90%	*	*	*	84%	88%
Q57. Administration of care was very good or good	84%	84%	*	*	*	83%	84%
Q58. Cancer research opportunities were discussed with patient	34%	42%	*	*	*	28%	37%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	*	*	*	8.5	8.8

SUPPORT FROM YOUR GP PRACTICE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	*	*	*	*	78%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	62%	*	*	*	*	65%	62%

DIAGNOSTIC TESTS	Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All	
Q5. Patient received all the information needed about the diagnostic test in advance	92%	*	*	*	*	90%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	*	*	*	*	75%	82%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	*	*	*	*	81%	76%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	*	*	*	*	66%	79%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	*	*	*	*	91%	94%	

FINDING OUT THAT YOU HAD CANCER		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	81%	*	*	*	*	72%	80%	
Q13. Patient was definitely told sensitively that they had cancer	71%	*	*	*	*	67%	71%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	76%	*	*	*	*	66%	75%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	*	*	*	*	82%	83%	
Q16. Patient was told they could go back later for more information about their diagnosis	83%	*	*	*	*	80%	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	87%	*	*	*	*	82%	87%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	*	*	*	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	*	*	*	*	93%	96%

DECIDING ON THE BEST TREATMENT		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	83%	*	*	*	*	67%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	*	*	*	*	76%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	*	*	*	*	77%	82%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	54%	*	*	*	*	44%	53%	

CARE PLANNING	ARE PLANNING						
	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	69%	*	*	*	*	63%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	*	*	*	*	85%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	*	*	*	*	100%	99%

SUPPORT FROM HOSPITAL STAFF				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	90%	*	*	*	*	81%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	*	*	*	*	74%	73%
Q29. Patient was offered information about how to get financial help or benefits	74%	*	*	*	*	71%	74%

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%	*	*	*	*	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	68%	*	*	*	*	38%	67%		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	*	*	*	*	40%	67%		
Q34. Patient was always able to get help from ward staff when needed	73%	*	*	*	*	43%	72%		
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	*	*	*	*	50%	64%		
Q36. Hospital staff always did everything they could to help the patient control pain	81%	*	*	*	*	70%	81%		
Q37. Patient was always treated with respect and dignity while in hospital	85%	*	*	*	*	86%	85%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	*	*	*	*	71%	87%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	*	*	*	*	79%	79%		

YOUR TREATMENT	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	91%	*	*	*	*	93%	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	*	*	*	94%	87%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	*	*	*	*	100%	91%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	*	*	*	*	79%	82%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	89%	*	*	*	*	*	88%		
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	*	*	*	*	87%	85%		
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	80%	*	*	*	*	83%	80%		
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	85%	*	*	*	*	91%	85%		
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	73%	*	*	*	*	86%	74%		
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	84%	*	*	*	*	*	83%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	82%	*	*	*	*	83%	82%		

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%	*	*	*	*	65%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	*	*	*	*	74%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	*	*	*	*	82%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	*	*	*	*	43%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	55%	*	*	*	*	53%	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	57%	*	*	*	*	51%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	44%	*	*	*	*	42%	44%

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	42%	*	*	*	*	34%	42%
Q52. Patient has had a review of cancer care by GP practice	23%	*	*	*	*	21%	23%

LIVING WITH AND BEYOND CANCER				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	25%	*	*	*	*	6%	24%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	77%	*	*	*	*	71%	77%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	*	*	*	*	43%	62%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	88%	*	*	*	*	85%	88%
Q57. Administration of care was very good or good	84%	*	*	*	*	83%	84%
Q58. Cancer research opportunities were discussed with patient	38%	*	*	*	*	22%	37%
Q59. Patient's average rating of care scored from very poor to very good	8.8	*	*	*	*	8.4	8.8

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	89%	76%	75%	79%	82%	79%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	63%	63%	63%	61%	60%	62%	

DIAGNOSTIC TESTS		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q5. Patient received all the information needed about the diagnostic test in advance	86%	95%	93%	90%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	78%	79%	85%	82%	84%	82%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	78%	73%	77%	73%	76%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	76%	81%	76%	82%	80%	79%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	92%	94%	95%	93%	93%	94%	

FINDING OUT THAT YOU HAD CANCER						
	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	80%	75%	80%	83%	82%	80%
Q13. Patient was definitely told sensitively that they had cancer	68%	72%	71%	71%	74%	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	70%	75%	72%	78%	77%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	82%	83%	82%	84%	83%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	84%	84%	86%	80%	80%	83%

SUPPORT FROM A MAIN CONTACT PERSON				IMD quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q17. Patient had a main point of contact within the care team	90%	86%	82%	89%	89%	87%	
Q18. Patient found it very or quite easy to contact their main contact person	84%	91%	88%	84%	78%	85%	
Q19. Patient found advice from main contact person was very or quite helpful	94%	97%	97%	96%	94%	96%	

IMD quintile tables

DECIDING ON THE BEST TREATMENT			IMD q	quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All			
Q20. Treatment options were explained in a way the patient could completely understand	80%	82%	84%	80%	83%	82%			
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	77%	81%	79%	77%	82%	79%			
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	79%	83%	83%	84%	82%			
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	64%	57%	49%	50%	50%	53%			

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	73%	68%	71%	65%	70%	69%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	100%	94%	94%	87%	93%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	100%	99%	98%	100%	99%

SUPPORT FROM HOSPITAL STAFF			IMD q	uintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All				
Q27. Staff provided the patient with relevant information on available support	89%	86%	91%	91%	92%	90%				
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	74%	72%	72%	73%	73%				
Q29. Patient was offered information about how to get financial help or benefits	67%	76%	78%	77%	68%	74%				

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	76%	75%	71%	85%	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	76%	70%	61%	70%	64%	67%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	67%	59%	69%	70%	67%	
Q34. Patient was always able to get help from ward staff when needed	82%	73%	65%	70%	74%	72%	
Q35. Patient was always able to discuss worries and fears with hospital staff	72%	65%	60%	66%	63%	64%	
Q36. Hospital staff always did everything they could to help the patient control pain	90%	74%	83%	82%	80%	81%	
Q37. Patient was always treated with respect and dignity while in hospital	88%	88%	81%	85%	85%	85%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	89%	86%	89%	85%	87%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	75%	78%	82%	81%	79%	

IMD quintile tables

YOUR TREATMENT			IMD q	uintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	90%	91%	90%	92%	88%	90%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	89%	88%	82%	90%	89%	87%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	98%	86%	89%	96%	91%	91%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	78%	81%	82%	81%	83%	82%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	84%	91%	84%	89%	90%	88%		
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	86%	78%	88%	85%	85%		
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	89%	84%	70%	79%	82%	80%		
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	93%	84%	83%	88%	83%	85%		
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	80%	74%	72%	74%	72%	74%		
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	79%	82%	82%	84%	87%	83%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	78%	85%	79%	83%	82%	82%		

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS	IMD quintile				
	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	79%	74%	74%	73%	73%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	70%	71%	70%	71%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	87%	89%	84%	88%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	64%	62%	63%	58%	56%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	60%	59%	54%	54%	52%	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	53%	54%	60%	62%	53%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	49%	43%	43%	36%	50%	44%

CARE FROM YOUR GP PRACTICE			IMD q	quintile			
	1 (most deprived)			4	5 (least deprived)	All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	31%	44%	41%	45%	42%	42%	
Q52. Patient has had a review of cancer care by GP practice	21%	26%	19%	24%	23%	23%	

IMD quintile tables

LIVING WITH AND BEYOND CANCER			IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	19%	23%	26%	23%	26%	24%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	70%	79%	79%	77%	77%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	73%	60%	62%	60%	58%	62%	

YOUR OVERALL NHS CARE			IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All		
Q56. The whole care team worked well together	92%	86%	86%	89%	88%	88%		
Q57. Administration of care was very good or good	87%	83%	82%	86%	81%	84%		
Q58. Cancer research opportunities were discussed with patient	39%	41%	32%	36%	40%	37%		
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.8	8.7	8.8	8.8	8.8		

SUPPORT FROM YOUR GP PRACTICE		Long-term con	dition status			
	Yes	All				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	80% 79% 80%				
Q3. Referral for diagnosis was explained in a way the patient could completely understand	60% 67% 61%					

DIAGNOSTIC TESTS		Long-term cond	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	94%	89%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	86%	78%	82%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	75%	75%	81%	76%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	82%	68%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	94%	90%	94%

FINDING OUT THAT YOU HAD CANCER		Long-term con	dition status	
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	80%	81%	79%	80%
Q13. Patient was definitely told sensitively that they had cancer	70%	74%	69%	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	79%	70%	75%
Q15. Patient was definitely told about their diagnosis in an appropriate place	82%	85%	87%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	81%	87%	80%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	87%	88%	79%	87%
Q18. Patient found it very or quite easy to contact their main contact person	86%	82%	85%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	94%	96%	96%

DECIDING ON THE BEST TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	85%	71%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	78%	81%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	86%	84%	82%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	52%	58%	41%	53%

CARE PLANNING	Long-term condition status					
	Yes No Not given All					
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	66%	76%	66%	69%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	94%	88%	93%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	100%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes No Not given				
Q27. Staff provided the patient with relevant information on available support	90%	90%	88%	90%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	72%	77%	73%	73%	
Q29. Patient was offered information about how to get financial help or benefits	71%	81%	76%	74%	

HOSPITAL CARE		Long-term co	ndition status	
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	76%	81%	71%	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%	69%	44%	67%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	66%	70%	52%	67%
Q34. Patient was always able to get help from ward staff when needed	71%	76%	55%	72%
Q35. Patient was always able to discuss worries and fears with hospital staff	65%	66%	50%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	80%	86%	72%	81%
Q37. Patient was always treated with respect and dignity while in hospital	84%	88%	82%	85%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	93%	61%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	81%	75%	79%

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%	86%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	88%	85%	92%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	90%	100%	91%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	79%	88%	86%	82%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	88%	89%	82%	88%
Q42_1. Patient completely had enough understandable information about their response to surgery	84%	87%	85%	85%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	79%	82%	84%	80%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	84%	88%	92%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	68%	83%	93%	74%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	83%	89%	73%	83%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	82%	83%	80%	82%

IMMEDIATE AND LONG TERM SIDE EFFECTS		Long-term con	dition status	
	Yes	No	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	73%	79%	65%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	68%	76%	72%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	92%	86%	87%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	69%	41%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	65%	52%	55%

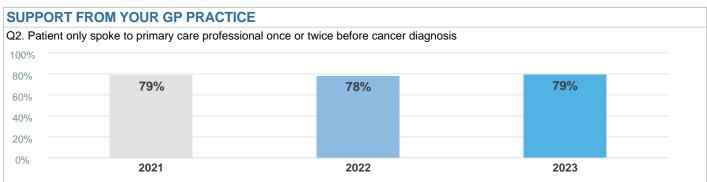
SUPPORT WHILE AT HOME	Long-term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	54%	64%	57%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	43%	48%	44%	44%

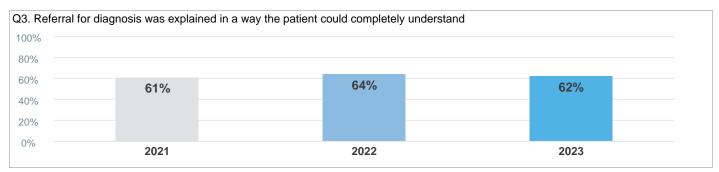
CARE FROM YOUR GP PRACTICE	Long-term condition status				
	Yes No Not given All				
Q51. Patient definitely received the right amount of support from their GP practice during treatment	39%	49%	40%	42%	
Q52. Patient has had a review of cancer care by GP practice	24%	20%	20%	23%	

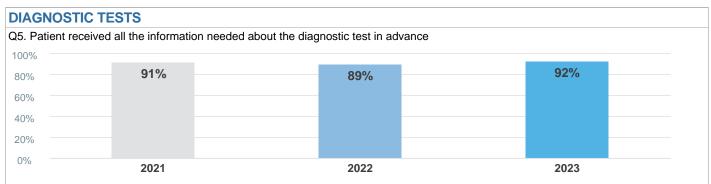
LIVING WITH AND BEYOND CANCER		Long-term con		
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	23%	36%	6%	24%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	84%	74%	77%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	65%	53%	62%

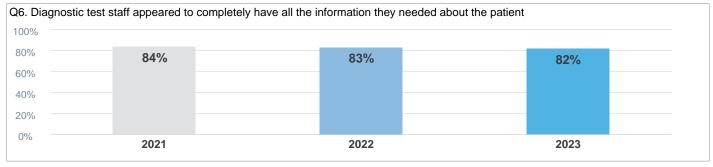
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	All		
Q56. The whole care team worked well together	88%	87%	85%	88%
Q57. Administration of care was very good or good	84%	83%	85%	84%
Q58. Cancer research opportunities were discussed with patient	40%	33%	23%	37%
Q59. Patient's average rating of care scored from very poor to very good	8.8	8.9	8.6	8.8

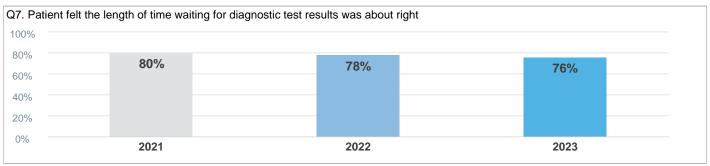


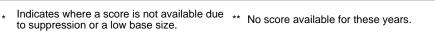


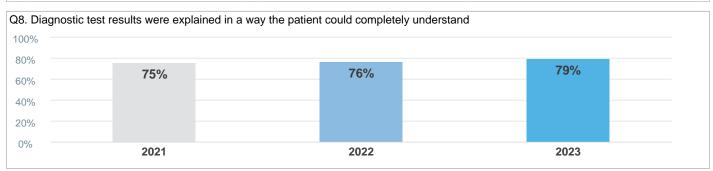


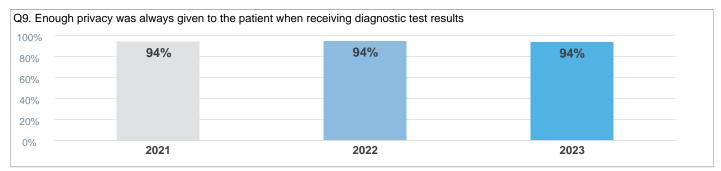


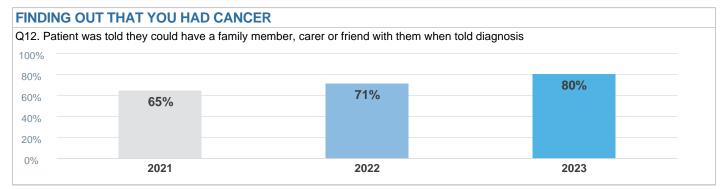


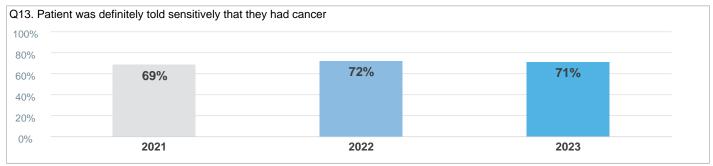


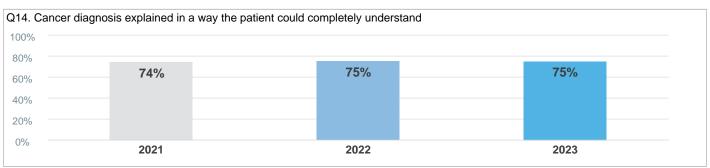


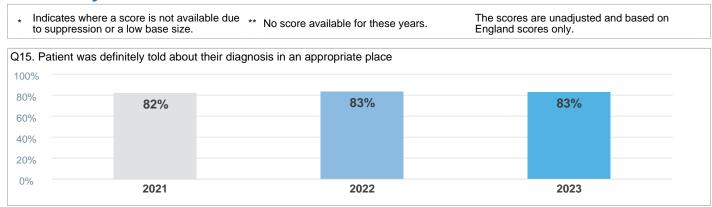


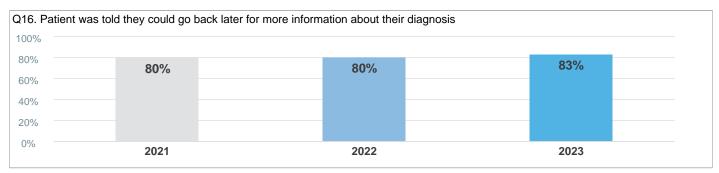


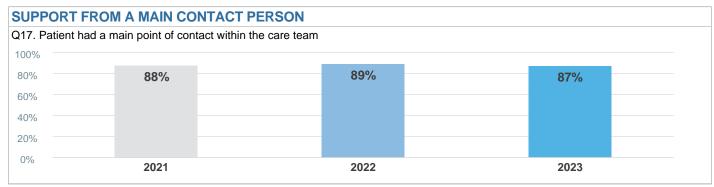


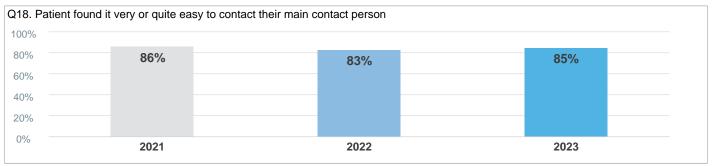


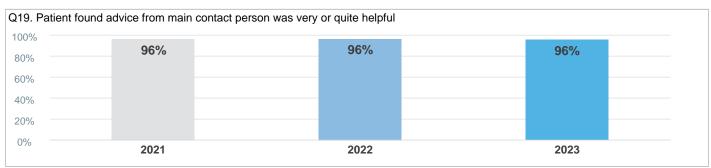




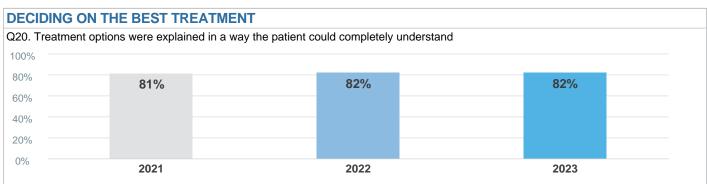


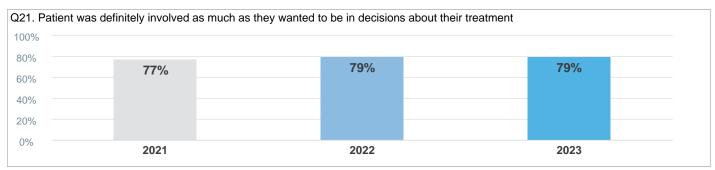


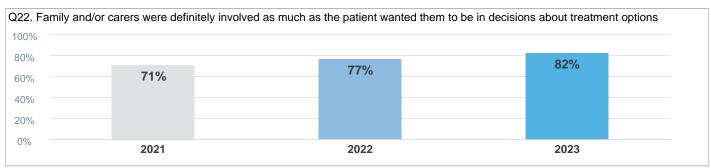


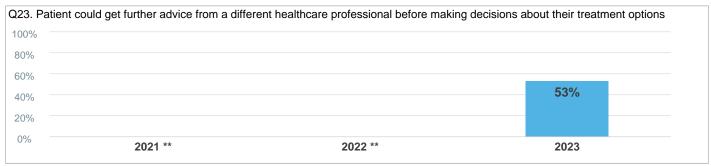


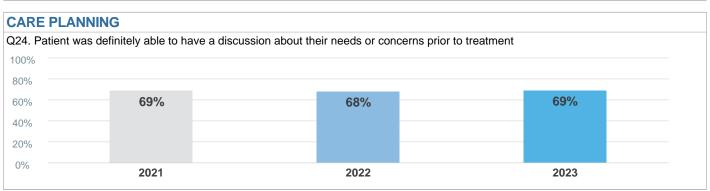




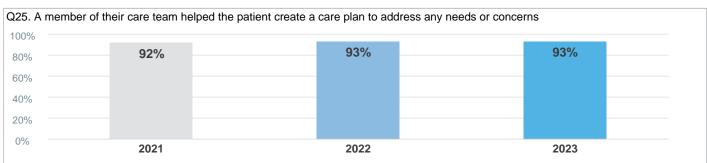


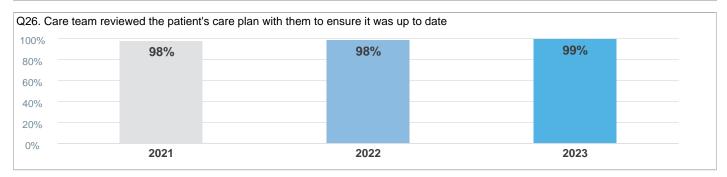


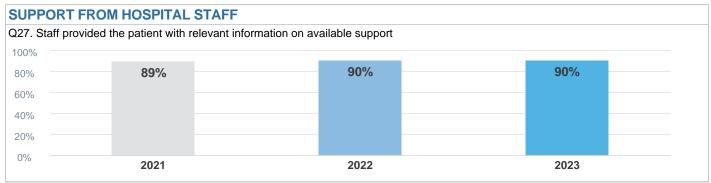


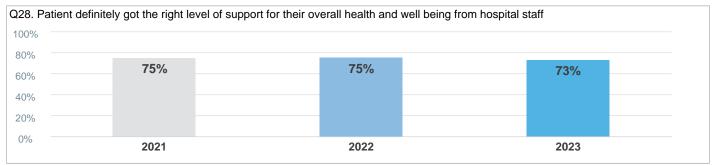


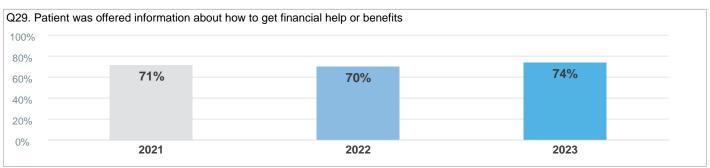


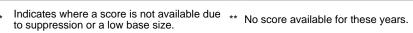


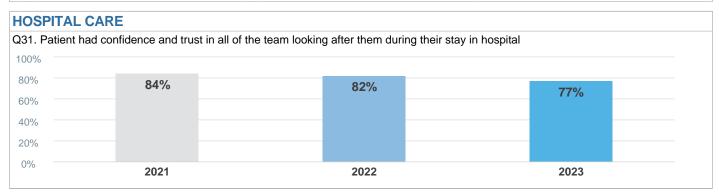


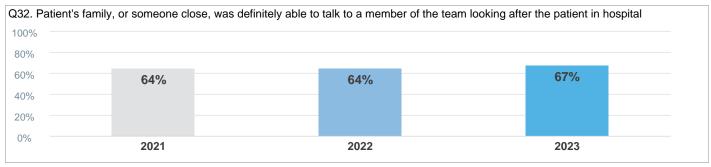


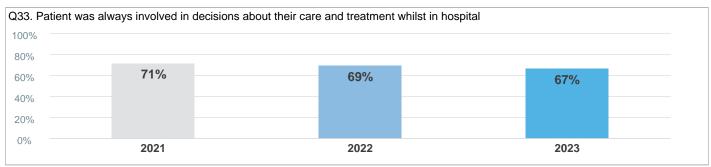


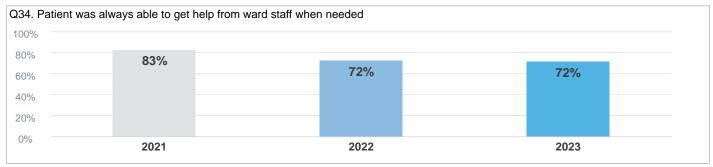


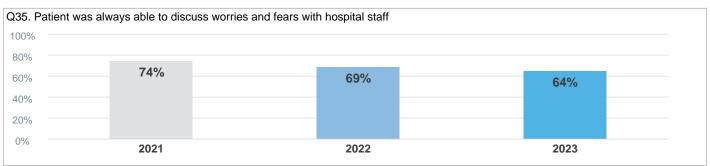


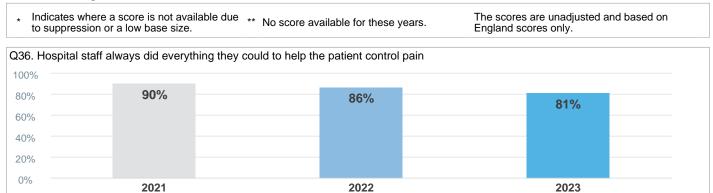


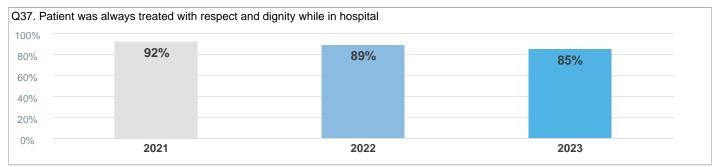


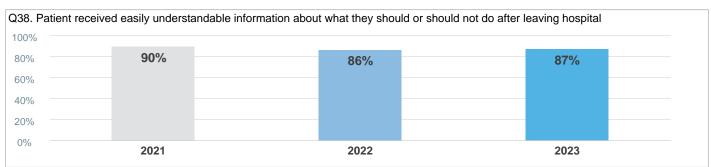


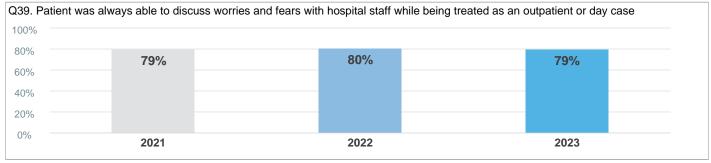


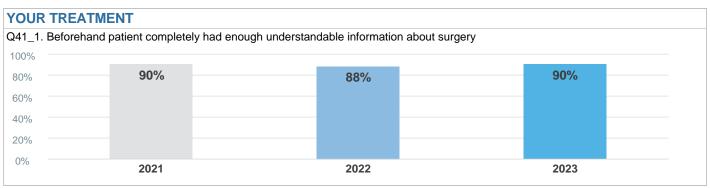




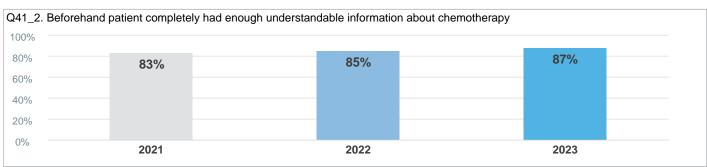


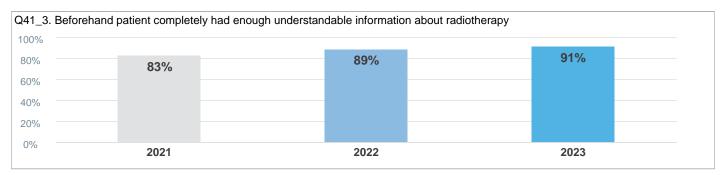


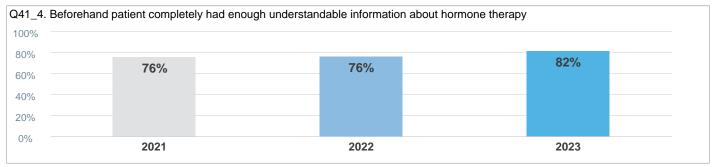


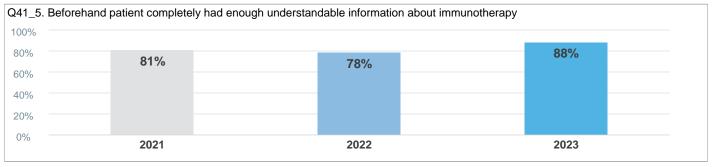


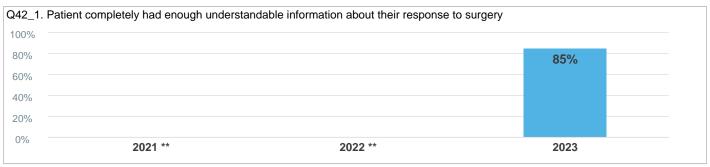












100%

60% 40% 20% 0%



81%

2022

Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right

79%

2021

82%

2023



