

# **Cancer Patient Experience Survey**

2023 Results

# NHS Nottingham and Nottinghamshire Integrated Care Board

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# **Executive summary**

#### **Questions above expected range**

	Case	mix adjusted s	cores		
	2023 score	Lower expected range	Upper expected range	England score	
Q17. Patient had a main point of contact within the care team	94%	88%	94%	91%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	76%	83%	80%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	85%	93%	89%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	81%	90%	85%	

#### **Questions below expected range**

	Case	mix adjusted s	cores	
	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	56%	56%	67%	62%

#### 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.

#### **NHS Nottingham and Nottinghamshire Integrated Care Board**

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

#### Scoring methodology

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

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

#### Statistical significance

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

#### **Suppression**

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

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

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

#### **Additional suppression**

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

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

#### **Understanding the results**

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

#### **Expected range charts**

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

ICBs whose score is above the upper limit of the expected range (in the dark blue) are positive outliers, with a score statistically significantly higher than the national mean. This indicates that the ICB performs better than what ICBs of the same size and demographics are expected to perform. The opposite is true if the score is below the lower limit of the expected range (in the light blue); these are negative outliers. For scores within the expected range (in the grey), the score is what we would expect given the ICB's size and demographics.

#### **Comparability tables**

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

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

#### Sub-group breakdowns

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

#### **Tumour group tables**

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

#### Age group tables

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

#### Male/Female/Non-binary/Other tables

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

#### **Ethnicity tables**

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

#### Long-term condition status tables

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

#### IMD quintile tables

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

#### Year on year charts

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

## National level and England level data

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

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

#### **Further information**

This research was carried out in accordance with the international standard for organisations conducting market and social research (accreditation to ISO20252:2019; certificate number

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 <a href="mailto:regulation@statistics.gov.uk">regulation@statistics.gov.uk</a> 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 <a href="https://www.ncpes.co.uk">www.ncpes.co.uk</a>. For all other outputs at ICB level, please see the Excel tables and dashboards at <a href="https://www.ncpes.co.uk">www.ncpes.co.uk</a>.

## **Response rate**

#### **Overall response rate**

831 patients responded out of a total of 1,504 patients, resulting in a response rate of 55%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	1,586	1,504	831	55%
National	129,231	121,121	63,438	52%

## Respondents by survey type

	Number of respondents
Paper	660
Online	171
Phone	0
Translation service	0
Total	831

#### Respondents by tumour group

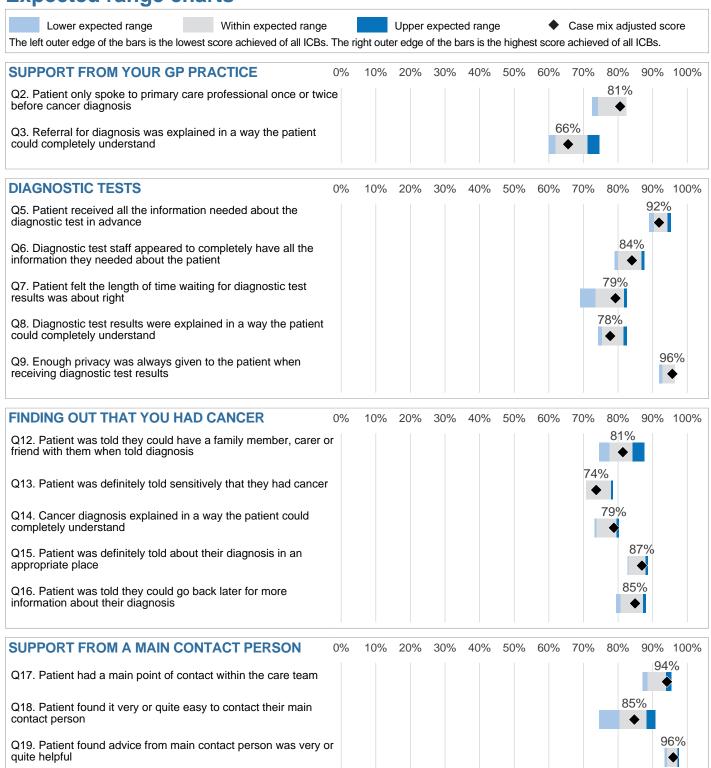
	Number of respondents
Brain / CNS	*
Breast	192
Colorectal / LGT	124
Gynaecological	49
Haematological	100
Head and neck	28
Lung	57
Prostate	90
Sarcoma	*
Skin	48
Upper gastro	39
Urological	70
Other	23
Total	831

## Respondents by ethnicity

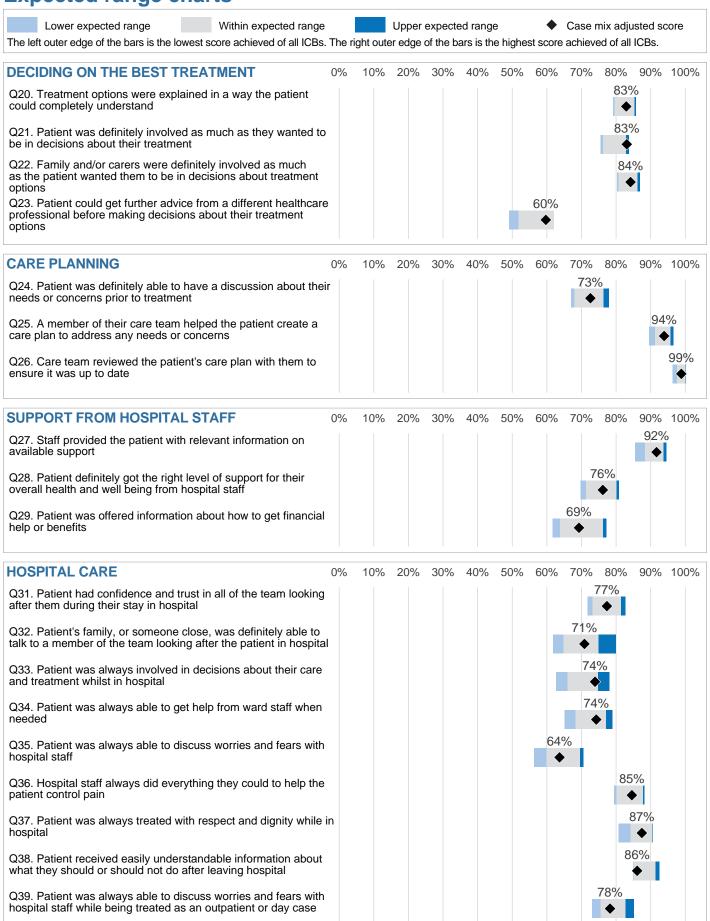
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	733
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	12
Mixed / Multiple Ethnic Groups	I
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	I
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	<u> </u>
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	*
Any other ethnic group	*
Not given	·
Not given	60
Total	831

<sup>\*</sup> indicates the count is not shown due to suppression

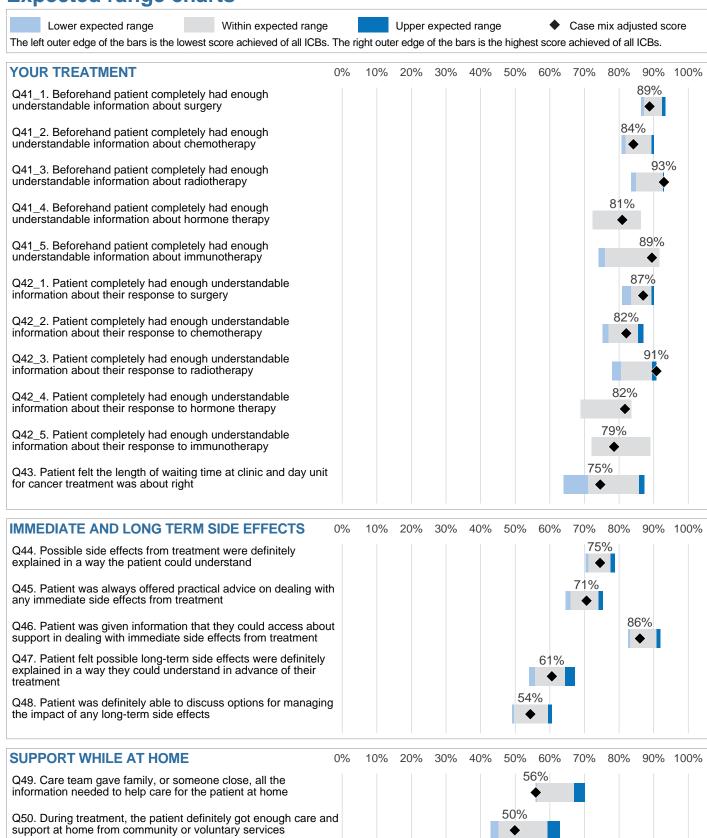




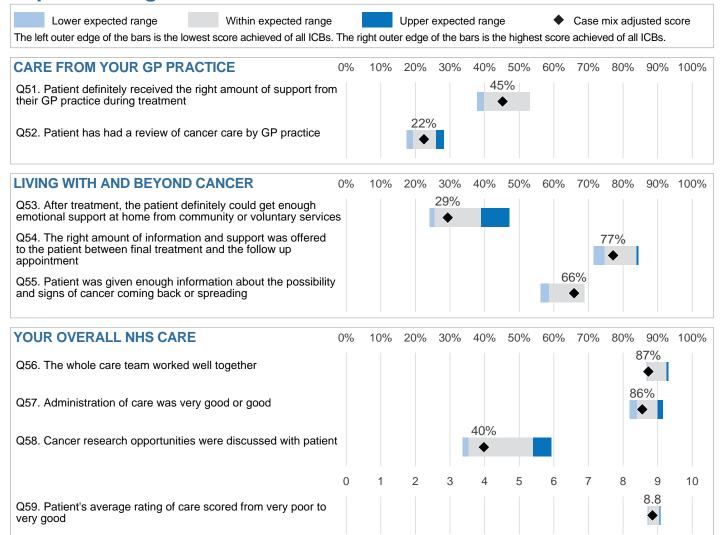
#### **Expected range charts**



#### **Expected range charts**



## **Expected range charts**



## **Comparability tables**

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

▲ or ▼

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

Adjusted score below lower expected range

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

** No sco	ore available	for 2022.
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	Unadjusted scores						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	315	83%	389	82%			81%	74%	82%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	442	63%	531	66%			66%	62%	71%	67%

	Unadjusted scores							Case mix adjusted scores			
DIAGNOSTIC TESTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q5. Patient received all the information needed about the diagnostic test in advance	566	91%	693	92%			92%	90%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	588	85%	738	84%			84%	80%	87%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	582	79%	733	79%			79%	74%	82%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	588	79%	739	78%			78%	75%	82%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	590	96%	739	96%			96%	93%	96%	95%	

	Unadjusted scores							Case mix adjusted scores			
FINDING OUT THAT YOU HAD CANCER	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	629	77%	778	82%		<b>A</b>	81%	78%	84%	81%	
Q13. Patient was definitely told sensitively that they had cancer	659	73%	820	74%			74%	71%	78%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	661	80%	821	80%			79%	74%	80%	77%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	659	86%	820	87%			87%	83%	88%	86%	
Q16. Patient was told they could go back later for more information about their diagnosis	594	86%	737	85%			85%	81%	87%	84%	

	Unadjusted scores							Case mix adjusted scores			
SUPPORT FROM A MAIN CONTACT PERSON	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score	
Q17. Patient had a main point of contact within the care team	634	95%	793	94%			94%	88%	94%	91%	
Q18. Patient found it very or quite easy to contact their main contact person	537	83%	660	85%			85%	80%	88%	84%	
Q19. Patient found advice from main contact person was very or quite helpful	567	95%	699	96%			96%	94%	97%	96%	

## **Comparability tables**

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

▲ or ▼

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

Adjusted score below lower expected range

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

**	No score	available	for 2022.
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			Unadjust	ted score	s		Case n			
DECIDING ON THE BEST TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q20. Treatment options were explained in a way the patient could completely understand	630	84%	765	84%			83%	80%	85%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	651	82%	801	84%			83%	76%	83%	80%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	530	85%	694	84%		<b>A</b>	84%	81%	86%	83%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	**	**	445	61%			60%	52%	62%	57%

			Unadjus	ted score	es .		Case n			
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	586	73%	737	73%			73%	68%	76%	72%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	352	92%	455	94%			94%	91%	96%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	273	98%	359	99%			99%	98%	100%	99%

			Unadjust	ted score	Case n					
SUPPORT FROM HOSPITAL STAFF	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q27. Staff provided the patient with relevant information on available support	548	93%	693	92%			92%	88%	94%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	652	79%	805	77%			76%	71%	80%	76%
Q29. Patient was offered information about how to get financial help or benefits	370	74%	467	70%			69%	64%	76%	70%

## **Comparability tables**

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

\*\* No score available for 2022.

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

overall: Indicates significant change overall	lower expected ranges
022, and 2023).	Adjusted score above upper
	expected range

			Unadjus	ted score	es		Case n			
HOSPITAL CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	337	82%	407	78%			77%	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	264	67%	323	71%			71%	65%	75%	70%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	330	72%	403	74%			74%	66%	75%	70%
Q34. Patient was always able to get help from ward staff when needed	329	75%	398	74%			74%	68%	77%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	319	66%	388	64%			64%	60%	70%	65%
Q36. Hospital staff always did everything they could to help the patient control pain	302	84%	359	85%			85%	80%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	334	86%	408	88%			87%	84%	91%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	328	88%	400	87%			86%	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	568	79%	699	79%			78%	76%	83%	79%

			Unadjus	ted score	S		Case r			
YOUR TREATMENT	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q41_1. Beforehand patient completely had enough understandable information about surgery	478	90%	527	89%			89%	87%	92%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	271	83%	330	84%			84%	82%	89%	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	211	91%	244	93%			93%	85%	93%	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	111	77%	129	81%			81%	72%	86%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	57	89%	85	89%			89%	76%	92%	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	**	**	519	87%			87%	84%	89%	86%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	**	**	326	82%			82%	77%	85%	81%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	**	**	244	91%			91%	81%	90%	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	**	**	130	82%			82%	69%	84%	76%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	**	**	83	80%			79%	72%	89%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	638	79%	782	75%			75%	71%	86%	78%

## **Comparability tables**

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\*\* No score available for 2022.

▲ or ▼

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

Adjusted score below lower expected range

Adjusted score between upper and lower expected ranges

Adjusted score above upper expected range

			Unadjus	ted score	es		Case n			
IMMEDIATE AND LONG TERM SIDE EFFECTS	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	616	74%	751	75%			75%	71%	78%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	586	68%	695	71%			71%	66%	74%	70%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	456	87%	595	86%			86%	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	578	61%	724	62%			61%	56%	64%	60%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	492	54%	621	56%			54%	50%	60%	55%

			Unadjust	ted score	Case n					
SUPPORT WHILE AT HOME	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	443	59%	571	57%			56%	56%	67%	62%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	229	52%	330	50%			50%	45%	59%	52%

			Unadjust	ted score	S		Case n			
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	372	44%	462	46%			45%	40%	53%	46%
Q52. Patient has had a review of cancer care by GP practice	620	22%	768	23%			22%	19%	26%	23%

			Unadjus	ted score	s		Case n			
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	129	30%	188	29%			29%	26%	39%	32%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	314	81%	411	78%			77%	75%	84%	79%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	531	63%	659	67%			66%	59%	69%	64%

			Unadjus	ted score	S		Case n			
YOUR OVERALL NHS CARE	2022 n	2022 score	2023 n	2023 score	Change 2022- 2023	Change overall	2023 score	Lower expected range	Upper expected range	England score
Q56. The whole care team worked well together	623	90%	779	88%		•	87%	87%	93%	90%
Q57. Administration of care was very good or good	645	87%	800	86%			86%	84%	90%	87%
Q58. Cancer research opportunities were discussed with patient	368	45%	425	39%			40%	35%	54%	45%
Q59. Patient's average rating of care scored from very poor to very good	620	8.9	783	8.9			8.8	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	91%	73%	87%	58%	81%	69%	85%	*	93%	82%	94%	60%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	77%	75%	70%	46%	62%	31%	69%	*	71%	56%	68%	71%	66%

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	*	89%	97%	81%	91%	96%	94%	93%	*	89%	92%	93%	100%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	86%	91%	76%	83%	85%	77%	94%	*	79%	71%	83%	75%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	77%	80%	72%	88%	85%	87%	88%	*	68%	71%	78%	65%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	80%	82%	72%	75%	85%	83%	81%	*	68%	70%	80%	75%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	96%	96%	96%	98%	96%	98%	96%	*	93%	91%	95%	95%	96%

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	*	80%	87%	77%	81%	89%	87%	84%	*	74%	80%	79%	86%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	71%	79%	71%	77%	82%	82%	75%	*	64%	68%	78%	68%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	80%	90%	78%	71%	86%	84%	82%	*	74%	64%	81%	83%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	89%	85%	86%	87%	96%	88%	87%	*	85%	86%	86%	91%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	*	92%	90%	81%	85%	91%	73%	86%	*	90%	73%	77%	86%	85%

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	*	99%	96%	87%	97%	100%	91%	92%	*	85%	92%	91%	95%	94%
Q18. Patient found it very or quite easy to contact their main contact person	*	77%	90%	82%	90%	89%	90%	87%	*	85%	81%	81%	94%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	92%	98%	95%	96%	100%	98%	100%	*	97%	97%	95%	100%	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	*	82%	93%	80%	83%	83%	77%	88%	*	71%	81%	86%	80%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	83%	88%	80%	83%	79%	85%	83%	*	87%	73%	82%	86%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	81%	88%	86%	84%	90%	84%	89%	*	91%	78%	79%	90%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	61%	61%	52%	63%	56%	59%	66%	*	65%	67%	64%	38%	61%

CARE PLANNING							Tumo	ur gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	71%	75%	77%	77%	80%	66%	75%	*	71%	76%	70%	70%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	93%	91%	100%	92%	100%	93%	95%	*	92%	100%	100%	91%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	99%	98%	100%	100%	92%	100%	100%	*	100%	94%	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%	93%	88%	92%	100%	91%	97%	*	95%	94%	84%	88%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	75%	79%	67%	86%	85%	75%	86%	*	78%	59%	67%	73%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	74%	69%	54%	73%	87%	75%	70%	*	75%	74%	50%	43%	70%

HOSPITAL CARE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	80%	80%	81%	73%	73%	87%	76%	*	83%	61%	79%	79%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	74%	77%	74%	71%	86%	59%	67%	*	*	48%	76%	54%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	79%	75%	78%	75%	73%	79%	86%	*	67%	61%	68%	50%	74%
Q34. Patient was always able to get help from ward staff when needed	*	77%	79%	76%	75%	68%	71%	81%	*	91%	48%	73%	79%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	61%	67%	66%	66%	55%	77%	71%	*	80%	55%	62%	36%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	83%	92%	86%	92%	86%	86%	90%	*	91%	57%	82%	85%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	90%	88%	83%	88%	86%	90%	95%	*	92%	83%	86%	86%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	90%	84%	89%	84%	90%	89%	90%	*	83%	74%	91%	71%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	75%	85%	79%	81%	89%	78%	84%	*	83%	67%	66%	89%	79%

YOUR TREATMENT							Tumo	ur gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	90%	93%	90%	*	100%	97%	84%	*	81%	94%	82%	86%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	74%	90%	86%	90%	*	91%	*	*	*	83%	74%	91%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	93%	92%	93%	*	94%	100%	88%	*	*	*	*	*	93%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	77%	*	*	*	*	*	90%	*	*	*	*	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	80%	*	*	95%	*	73%	*	*	92%	*	100%	*	89%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	88%	93%	82%	*	89%	91%	92%	*	74%	94%	82%	73%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	73%	92%	70%	90%	*	86%	*	*	*	86%	63%	75%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	91%	92%	86%	*	94%	92%	88%	*	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	76%	*	*	*	*	*	95%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	71%	*	*	84%	*	69%	*	*	83%	*	91%	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	70%	76%	65%	71%	85%	79%	88%	*	81%	69%	82%	65%	75%

<b>IMMEDIATE AND LONG TERM SIDE EFFEC</b>	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	*	68%	82%	68%	69%	77%	82%	85%	*	73%	74%	79%	86%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	66%	73%	61%	77%	85%	81%	77%	*	76%	63%	69%	57%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	84%	90%	83%	82%	91%	92%	84%	*	84%	89%	87%	94%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	59%	70%	53%	58%	83%	62%	64%	*	67%	49%	58%	59%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	51%	61%	47%	53%	76%	54%	66%	*	56%	45%	55%	47%	56%

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%	60%	56%	55%	85%	58%	55%	*	61%	42%	58%	65%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	41%	52%	45%	58%	45%	36%	62%	*	50%	61%	50%	42%	50%

CARE FROM YOUR GP PRACTICE							Tumo	our gro	up					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	50%	48%	39%	45%	40%	34%	43%	*	48%	29%	55%	57%	46%
Q52. Patient has had a review of cancer care by GP practice	*	25%	22%	16%	17%	25%	18%	21%	*	28%	24%	27%	32%	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	*	32%	25%	35%	28%	*	*	13%	*	*	29%	28%	*	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	74%	78%	76%	63%	95%	86%	80%	*	77%	64%	84%	90%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	63%	66%	51%	76%	79%	51%	75%	*	86%	37%	73%	50%	67%

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	*	84%	89%	93%	92%	88%	90%	88%	*	89%	71%	91%	82%	88%
Q57. Administration of care was very good or good	*	84%	87%	91%	90%	92%	85%	87%	*	79%	67%	88%	86%	86%
Q58. Cancer research opportunities were discussed with patient	*	35%	35%	36%	57%	69%	48%	26%	*	28%	35%	45%	20%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	8.8	9.1	8.7	9.1	9.1	8.9	9.2	*	9.0	7.7	8.7	8.4	8.9

# Age group tables

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	*	*	76%	83%	83%	78%	86%	86%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	71%	79%	67%	65%	65%	46%	66%

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	*	*	93%	85%	94%	93%	92%	89%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	71%	78%	86%	89%	83%	73%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	61%	67%	76%	83%	82%	91%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	52%	65%	80%	84%	80%	76%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	86%	95%	96%	98%	96%	97%	96%

FINDING OUT THAT YOU HAD CANCER					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	63%	63%	82%	86%	82%	85%	82%
Q13. Patient was definitely told sensitively that they had cancer	*	*	61%	68%	66%	78%	79%	92%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	61%	75%	76%	83%	81%	89%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	71%	80%	84%	91%	89%	97%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	87%	86%	87%	85%	85%	83%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N				Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q17. Patient had a main point of contact within the care team	*	*	96%	97%	96%	93%	93%	95%	94%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	78%	74%	86%	86%	89%	82%	85%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	92%	86%	96%	97%	98%	97%	96%

DECIDING ON THE BEST TREATMENT					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	71%	76%	85%	86%	88%	73%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	63%	78%	82%	87%	87%	83%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	65%	78%	85%	87%	86%	91%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	58%	61%	61%	62%	61%	50%	61%

# Age group tables

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	*	*	54%	67%	72%	74%	79%	76%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	95%	91%	90%	94%	97%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	92%	96%	97%	100%	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	*	*	79%	88%	95%	94%	92%	83%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	40%	69%	73%	81%	82%	81%	77%
Q29. Patient was offered information about how to get financial help or benefits	*	*	70%	70%	73%	65%	74%	*	70%

HOSPITAL CARE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	55%	75%	74%	81%	82%	89%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	36%	75%	70%	68%	80%	88%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	55%	60%	75%	77%	75%	83%	74%
Q34. Patient was always able to get help from ward staff when needed	*	*	45%	90%	68%	74%	83%	89%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	25%	63%	65%	70%	63%	65%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	50%	90%	83%	88%	89%	93%	85%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	70%	90%	87%	88%	90%	95%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	65%	90%	88%	86%	89%	95%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	50%	72%	81%	80%	82%	85%	79%

# Age group tables

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	*	*	68%	83%	90%	95%	91%	77%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	70%	74%	86%	89%	88%	*	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	85%	91%	94%	98%	*	93%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	75%	81%	84%	86%	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	100%	91%	93%	*	89%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	75%	79%	89%	92%	88%	75%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	71%	73%	86%	82%	88%	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	88%	93%	88%	98%	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	83%	75%	84%	93%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	93%	81%	77%	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	48%	69%	72%	80%	77%	88%	75%

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	*	*	63%	73%	77%	78%	74%	73%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	50%	70%	70%	73%	76%	65%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	74%	84%	90%	88%	88%	63%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	39%	56%	64%	65%	59%	69%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	32%	46%	56%	63%	53%	58%	56%

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	*	*	35%	44%	55%	61%	58%	68%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	39%	30%	51%	49%	57%	46%	50%

CARE FROM YOUR GP PRACTICE					Age				
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	38%	47%	42%	50%	46%	41%	46%
Q52. Patient has had a review of cancer care by GP practice	*	*	7%	26%	24%	26%	21%	6%	23%

# Age group tables

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	*	*	21%	31%	35%	27%	24%	*	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	31%	74%	78%	85%	76%	75%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	33%	68%	65%	67%	71%	75%	67%

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	*	*	83%	79%	87%	88%	89%	100%	88%
Q57. Administration of care was very good or good	*	*	71%	83%	85%	86%	88%	92%	86%
Q58. Cancer research opportunities were discussed with patient	*	*	29%	34%	42%	38%	42%	40%	39%
Q59. Patient's average rating of care scored from very poor to very good	*	*	7.7	8.3	8.8	9.1	9.0	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	83%	80%	*	*	*	78%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	63%	*	*	*	61%	66%

DIAGNOSTIC TESTS			Male/Fema	le/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	94%	*	*	*	91%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	82%	86%	*	*	*	83%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	82%	*	*	*	86%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	81%	*	*	*	78%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	96%	*	*	*	92%	96%

FINDING OUT THAT YOU HAD CANCER			Male/Fema	le/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	80%	83%	*	*	*	79%	82%
Q13. Patient was definitely told sensitively that they had cancer	73%	78%	*	*	*	62%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	78%	81%	*	*	*	81%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	85%	90%	*	*	*	85%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	85%	*	*	*	81%	85%

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	95%	94%	*	*	*	82%	94%	
Q18. Patient found it very or quite easy to contact their main contact person	82%	89%	*	*	*	72%	85%	
Q19. Patient found advice from main contact person was very or quite helpful	94%	98%	*	*	*	93%	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	82%	85%	*	*	*	81%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	83%	85%	*	*	*	76%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	87%	*	*	*	78%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	61%	62%	*	*	*	47%	61%

CARE PLANNING		Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	71%	75%	*	*	*	87%	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	94%	*	*	*	100%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	*	*	*	100%	99%		

SUPPORT FROM HOSPITAL STAFF			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q27. Staff provided the patient with relevant information on available support	90%	94%	*	*	*	93%	92%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	80%	*	*	*	78%	77%		
Q29. Patient was offered information about how to get financial help or benefits	69%	72%	*	*	*	57%	70%		

HOSPITAL CARE			Male/Fema	ale/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	75%	81%	*	*	*	81%	78%
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%	75%	*	*	*	69%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	73%	76%	*	*	*	69%	74%
Q34. Patient was always able to get help from ward staff when needed	69%	81%	*	*	*	69%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	58%	71%	*	*	*	67%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	81%	89%	*	*	*	93%	85%
Q37. Patient was always treated with respect and dignity while in hospital	83%	95%	*	*	*	69%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	83%	91%	*	*	*	81%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	77%	81%	*	*	*	69%	79%

YOUR TREATMENT			Male/Fema	ile/Non-bina	ry/Other		
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	89%	*	*	*	91%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	79%	91%	*	*	*	79%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	93%	*	*	*	*	93%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	77%	88%	*	*	*	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	89%	90%	*	*	*	*	89%
Q42_1. Patient completely had enough understandable information about their response to surgery	85%	89%	*	*	*	95%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	75%	90%	*	*	*	92%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	90%	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	75%	93%	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	73%	83%	*	*	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	70%	81%	*	*	*	71%	75%

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	72%	78%	*	*	*	84%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	67%	75%	*	*	*	79%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	87%	*	*	*	83%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	65%	*	*	*	63%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	60%	*	*	*	62%	56%

SUPPORT WHILE AT HOME	ME Male/Female/Non-binary/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	53%	59%	*	*	*	70%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	41%	56%	*	*	*	69%	50%

CARE FROM YOUR GP PRACTICE	ICE Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	48%	*	*	*	38%	46%
Q52. Patient has had a review of cancer care by GP practice	24%	21%	*	*	*	24%	23%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	27%	32%	*	*	*	*	29%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	81%	*	*	*	85%	78%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	70%	*	*	*	73%	67%	

# Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	86%	89%	*	*	*	82%	88%
Q57. Administration of care was very good or good	84%	88%	*	*	*	77%	86%
Q58. Cancer research opportunities were discussed with patient	36%	42%	*	*	*	37%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.0	*	*	*	8.4	8.9

# **Ethnicity tables**

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	82%	*	*	*	*	80%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	66%	*	*	*	*	56%	66%

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%	*	*	*	*	92%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	*	*	*	*	84%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	*	*	*	*	86%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	*	*	*	*	75%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	90%	96%

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	82%	*	*	*	*	79%	82%	
Q13. Patient was definitely told sensitively that they had cancer	75%	*	*	*	*	62%	74%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	*	*	*	*	77%	80%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	87%	*	*	*	*	84%	87%	
Q16. Patient was told they could go back later for more information about their diagnosis	85%	*	*	*	*	82%	85%	

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	95%	*	*	*	*	85%	94%
Q18. Patient found it very or quite easy to contact their main contact person	85%	*	*	*	*	81%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	*	*	*	*	95%	96%

DECIDING ON THE BEST TREATMENT				Ethnicity				
	White	Mixed	Asian	Black	Other	Not given	All	
Q20. Treatment options were explained in a way the patient could completely understand	84%	*	*	*	*	79%	84%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	*	*	*	*	75%	84%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	85%	*	*	*	*	80%	84%	
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	61%	*	*	*	*	50%	61%	

# **Ethnicity tables**

CARE PLANNING	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	72%	*	*	*	*	82%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	*	*	*	96%	94%
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	92%	*	*	*	*	91%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	*	*	*	*	78%	77%
Q29. Patient was offered information about how to get financial help or benefits	70%	*	*	*	*	63%	70%

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	79%	*	*	*	*	61%	78%			
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	72%	*	*	*	*	62%	71%			
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	75%	*	*	*	*	71%	74%			
Q34. Patient was always able to get help from ward staff when needed	75%	*	*	*	*	61%	74%			
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	*	*	*	*	57%	64%			
Q36. Hospital staff always did everything they could to help the patient control pain	85%	*	*	*	*	80%	85%			
Q37. Patient was always treated with respect and dignity while in hospital	89%	*	*	*	*	67%	88%			
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	*	*	*	*	78%	87%			
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	79%	*	*	*	*	70%	79%			

# **Ethnicity tables**

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	*	*	*	*	88%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	*	*	*	*	71%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	*	*	*	*	93%	93%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	81%	*	*	*	*	90%	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	91%	*	*	*	*	*	89%
Q42_1. Patient completely had enough understandable information about their response to surgery	87%	*	*	*	*	91%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	82%	*	*	*	*	78%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	*	*	*	*	92%	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	81%	*	*	*	*	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	79%	*	*	*	*	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	*	*	*	*	73%	75%

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	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	76%	*	*	*	*	71%	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	*	*	*	*	72%	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	*	*	*	*	79%	86%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	62%	*	*	*	*	54%	62%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	56%	*	*	*	*	48%	56%	

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	56%	*	*	*	*	64%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	48%	*	*	*	*	68%	50%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not given						
Q51. Patient definitely received the right amount of support from their GP practice during treatment	46%	*	*	*	*	40%	46%
Q52. Patient has had a review of cancer care by GP practice	22%	*	*	*	*	22%	23%

# **Ethnicity tables**

LIVING WITH AND BEYOND CANCER		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	28%	*	*	*	*	29%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	78%	*	*	*	*	71%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	*	*	*	*	67%	67%

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	88%	*	*	*	*	82%	88%
Q57. Administration of care was very good or good	86%	*	*	*	*	80%	86%
Q58. Cancer research opportunities were discussed with patient	38%	*	*	*	*	43%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.9	*	*	*	*	8.7	8.9

# **IMD** quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	81%	80%	87%	80%	80%	82%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	66%	65%	66%	63%	69%	66%

DIAGNOSTIC TESTS			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q5. Patient received all the information needed about the diagnostic test in advance	93%	91%	91%	95%	89%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	84%	88%	81%	84%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	78%	80%	83%	75%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	73%	78%	83%	77%	80%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	94%	96%	95%	96%	96%

FINDING OUT THAT YOU HAD CANCER			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	82%	82%	82%	81%	81%	82%
Q13. Patient was definitely told sensitively that they had cancer	75%	76%	77%	74%	70%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	77%	79%	81%	79%	81%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	91%	90%	88%	85%	84%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	88%	86%	82%	86%	85%

SUPPORT FROM A MAIN CONTACT PERSON			IMD q			
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q17. Patient had a main point of contact within the care team	95%	89%	96%	96%	95%	94%
Q18. Patient found it very or quite easy to contact their main contact person	83%	86%	84%	91%	81%	85%
Q19. Patient found advice from main contact person was very or quite helpful	98%	97%	95%	97%	94%	96%

## **IMD** quintile tables

DECIDING ON THE BEST TREATMENT		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q20. Treatment options were explained in a way the patient could completely understand	83%	85%	84%	81%	85%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	82%	83%	80%	88%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	86%	81%	83%	88%	84%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	66%	62%	61%	57%	56%	61%

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	75%	79%	69%	75%	72%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	85%	97%	97%	95%	96%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	99%	98%	100%	99%

SUPPORT FROM HOSPITAL STAFF	IMD quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q27. Staff provided the patient with relevant information on available support	92%	93%	91%	94%	92%	92%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	79%	80%	74%	72%	77%	
Q29. Patient was offered information about how to get financial help or benefits	67%	80%	73%	59%	70%	70%	

HOSPITAL CARE			IMD q	uintile		
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	88%	71%	81%	72%	76%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	73%	72%	70%	67%	74%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	82%	65%	73%	73%	77%	74%
Q34. Patient was always able to get help from ward staff when needed	89%	68%	73%	69%	72%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	76%	66%	65%	57%	56%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	85%	83%	90%	87%	78%	85%
Q37. Patient was always treated with respect and dignity while in hospital	93%	79%	88%	92%	86%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	93%	85%	89%	82%	83%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	81%	80%	77%	77%	79%

## **IMD** quintile tables

YOUR TREATMENT		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	92%	86%	91%	86%	89%	89%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	80%	90%	89%	78%	84%	84%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	97%	92%	91%	96%	93%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	71%	86%	87%	84%	79%	81%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	86%	*	95%	85%	90%	89%	
Q42_1. Patient completely had enough understandable information about their response to surgery	90%	82%	89%	86%	87%	87%	
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	83%	88%	83%	76%	82%	82%	
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	85%	95%	88%	93%	96%	91%	
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	75%	86%	84%	88%	79%	82%	
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	79%	*	90%	78%	76%	80%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	79%	72%	75%	83%	68%	75%	

<b>IMMEDIATE AND LONG TERM SIDE EFFECT</b>	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	78%	76%	74%	73%	77%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	72%	71%	68%	73%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	85%	88%	83%	88%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	65%	64%	69%	55%	56%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	59%	61%	51%	48%	56%

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	66%	58%	54%	54%	52%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	55%	56%	50%	42%	43%	50%

CARE FROM YOUR GP PRACTICE		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	47%	43%	47%	48%	43%	46%	
Q52. Patient has had a review of cancer care by GP practice	28%	24%	24%	20%	19%	23%	

# Cancer Patient Experience Survey 2023 NHS Nottingham and Nottinghamshire Integrated Care Board

## **IMD** quintile tables

LIVING WITH AND BEYOND CANCER			IMD q	uintile		
	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	38%	38%	25%	27%	20%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	84%	76%	75%	76%	78%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	72%	67%	66%	66%	63%	67%

YOUR OVERALL NHS CARE		IMD quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	All
Q56. The whole care team worked well together	90%	87%	89%	87%	85%	88%
Q57. Administration of care was very good or good	90%	89%	84%	84%	83%	86%
Q58. Cancer research opportunities were discussed with patient	44%	39%	37%	43%	34%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.9	8.8	9.0	8.8	8.9

SUPPORT FROM YOUR GP PRACTICE	Long-term condition status						
	Yes No Not given						
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	81%	83%	79%	82%			
Q3. Referral for diagnosis was explained in a way the patient could completely understand	63%	72%	67%	66%			

DIAGNOSTIC TESTS		Long-term con	dition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	91%	93%	94%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	85%	83%	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	80%	77%	86%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	79%	72%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	96%	95%	96%

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	83%	81%	75%	82%
Q13. Patient was definitely told sensitively that they had cancer	76%	73%	63%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	79%	81%	78%	80%
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	87%	86%	87%
Q16. Patient was told they could go back later for more information about their diagnosis	86%	85%	83%	85%

<b>SUPPORT FROM A MAIN CONTACT PERSO</b>	N Long-term condition status			
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	95%	96%	82%	94%
Q18. Patient found it very or quite easy to contact their main contact person	85%	86%	78%	85%
Q19. Patient found advice from main contact person was very or quite helpful	96%	96%	95%	96%

DECIDING ON THE BEST TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	83%	84%	83%	84%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	84%	84%	79%	84%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	83%	89%	76%	84%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	61%	62%	52%	61%

CARE PLANNING	Long-term condition status					
	Yes No Not given A					
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	71%	76%	82%	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	96%	96%	94%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	100%	100%	99%		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status			
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	91%	95%	91%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	80%	69%	77%
Q29. Patient was offered information about how to get financial help or benefits	69%	75%	58%	70%

HOSPITAL CARE		Long-term co	ondition 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	78%	78%	70%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	71%	72%	67%	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	73%	76%	76%	74%
Q34. Patient was always able to get help from ward staff when needed	74%	76%	62%	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	65%	70%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	90%	89%	85%
Q37. Patient was always treated with respect and dignity while in hospital	87%	93%	67%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	90%	81%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	78%	82%	67%	79%

YOUR TREATMENT		Long-term cor	ndition status	
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	88%	90%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	86%	74%	84%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	94%	92%	87%	93%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	85%	71%	*	81%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	91%	87%	*	89%
Q42_1. Patient completely had enough understandable information about their response to surgery	86%	90%	88%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	84%	80%	79%	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	91%	91%	93%	91%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	82%	79%	*	82%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	77%	82%	*	80%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	77%	73%	71%	75%

<b>IMMEDIATE AND LONG TERM SIDE EFFECTS</b>		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	74%	79%	75%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	72%	70%	72%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	90%	78%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	61%	65%	56%	62%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	54%	59%	56%	56%

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	55%	60%	57%	57%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	44%	69%	50%	50%	

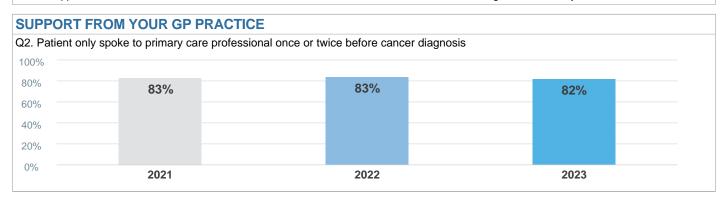
CARE FROM YOUR GP PRACTICE	Long-term condition status			
	Yes No Not given Al			
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	51%	41%	46%
Q52. Patient has had a review of cancer care by GP practice	23%	24%	18%	23%

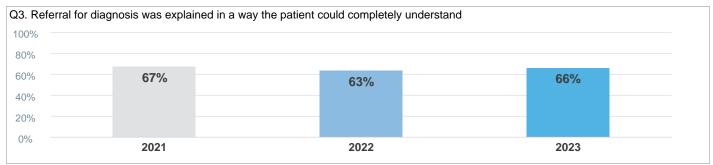
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	27%	38%	25%	29%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	74%	85%	77%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	66%	68%	69%	67%

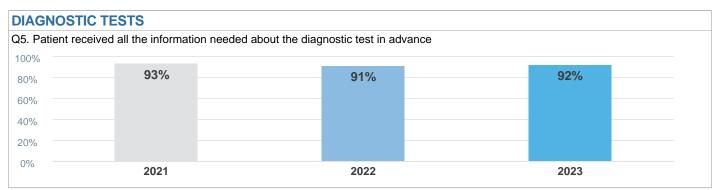
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	87%	90%	82%	88%
Q57. Administration of care was very good or good	86%	86%	80%	86%
Q58. Cancer research opportunities were discussed with patient	37%	44%	40%	39%
Q59. Patient's average rating of care scored from very poor to very good	8.9	8.9	8.7	8.9

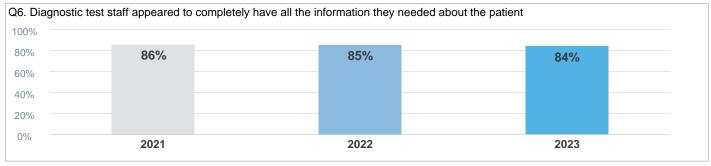


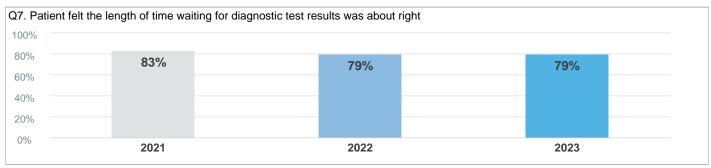
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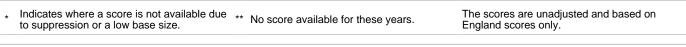


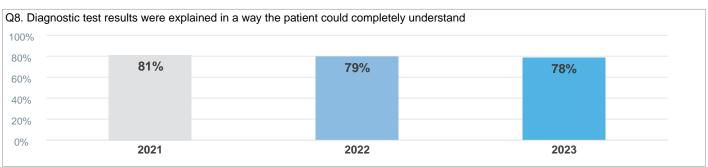


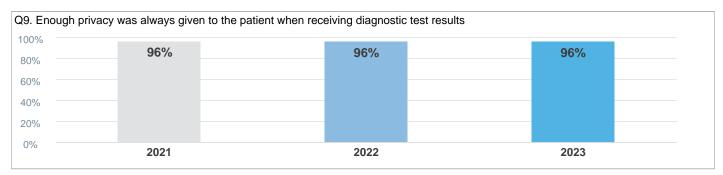


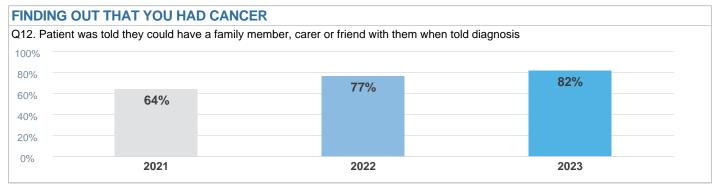


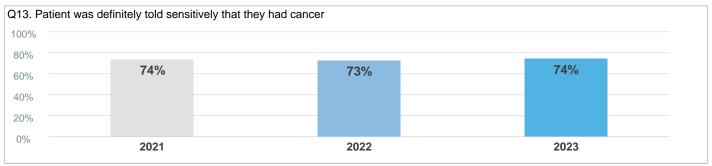


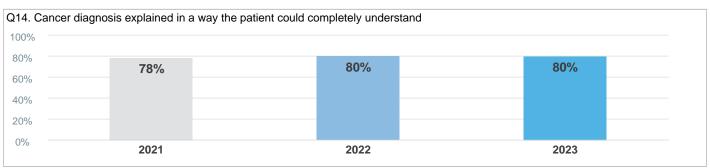


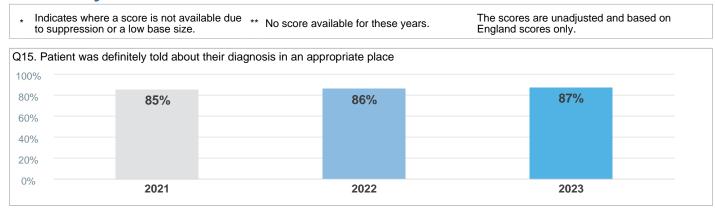


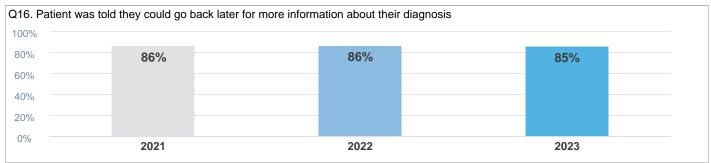


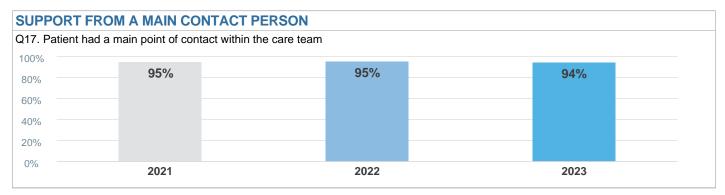


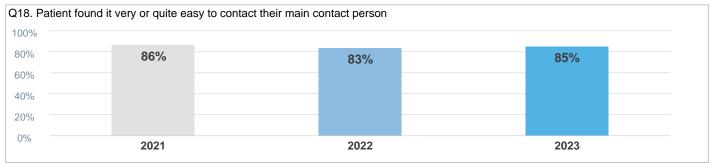


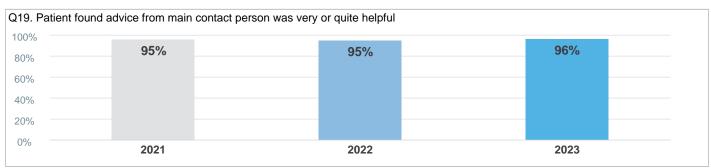




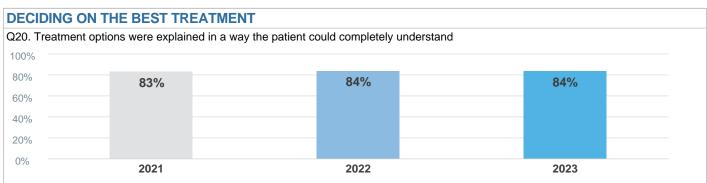


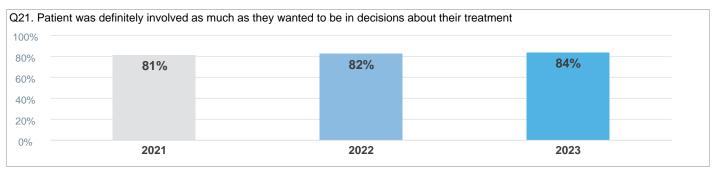


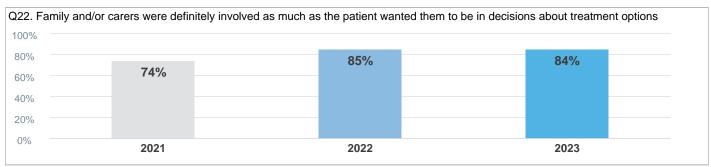


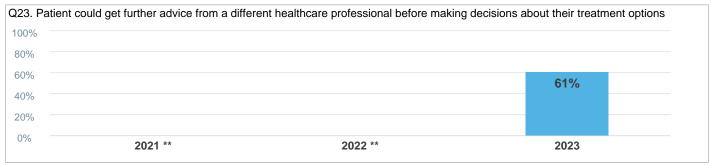


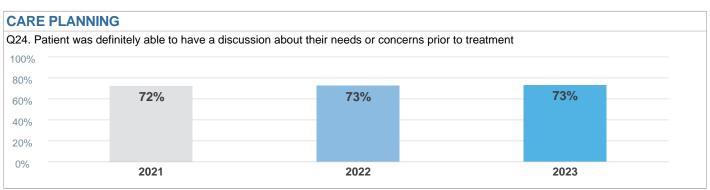


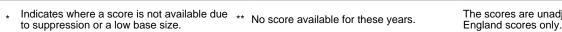




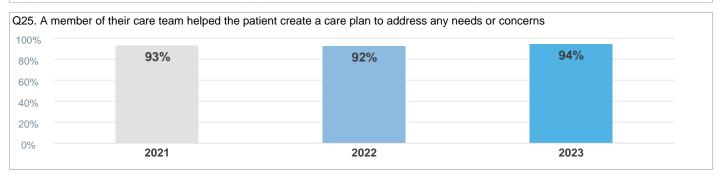


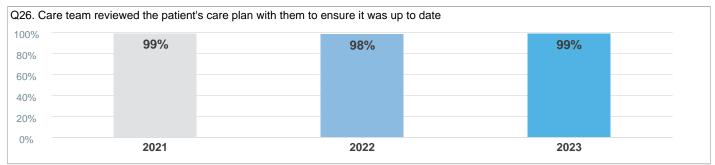


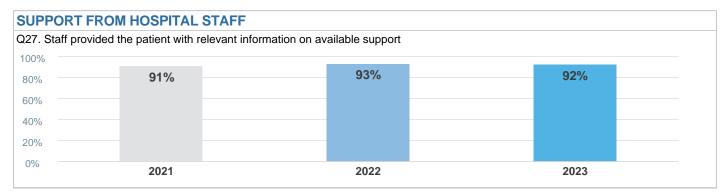


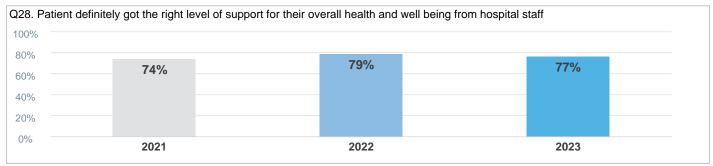


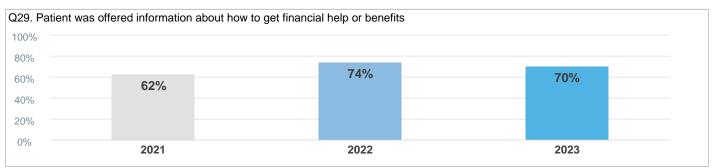
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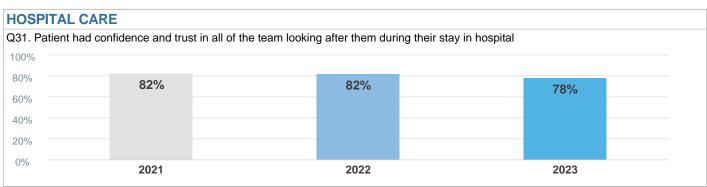


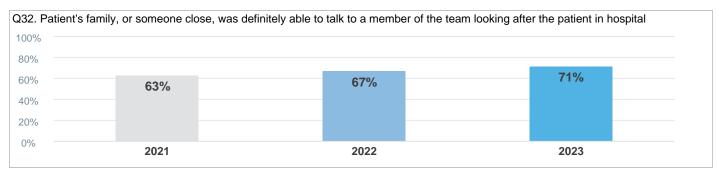


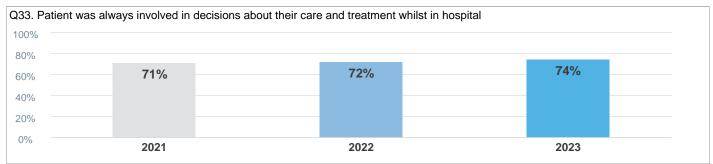


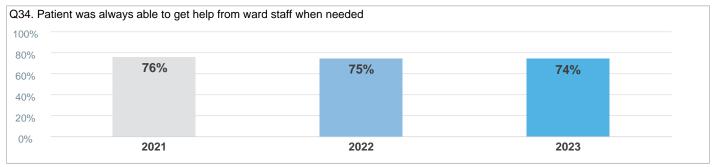


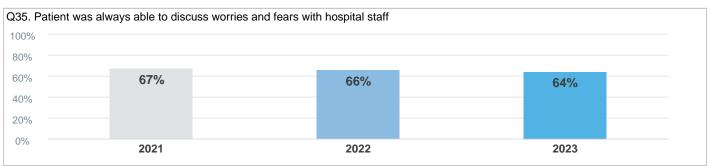


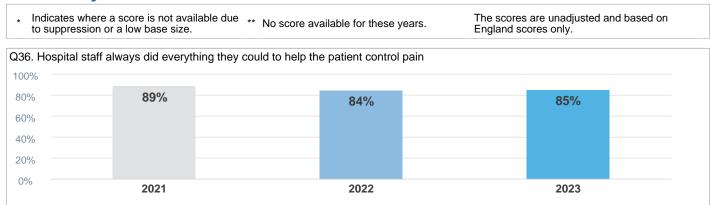


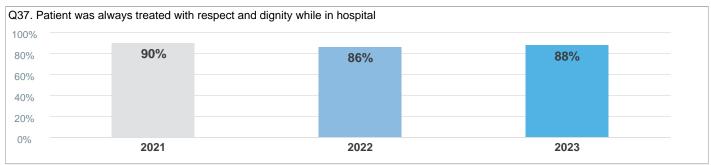


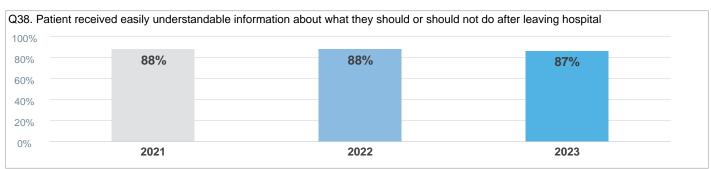


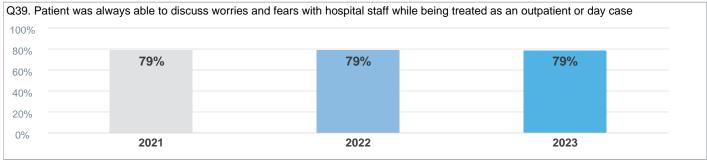


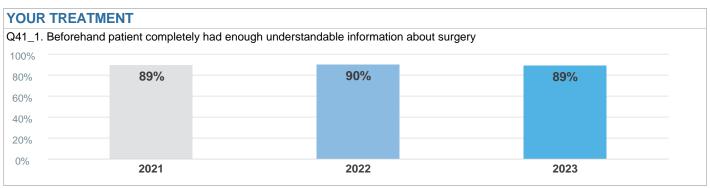




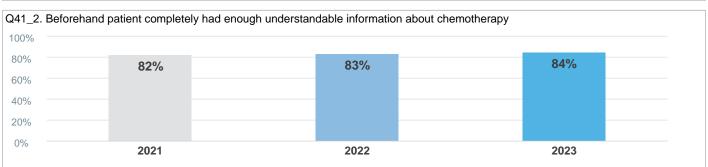


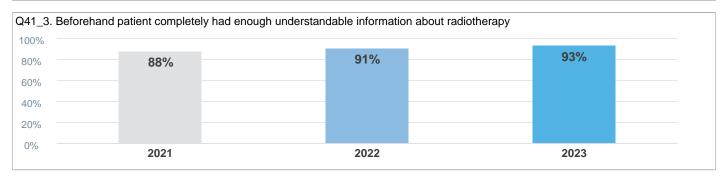


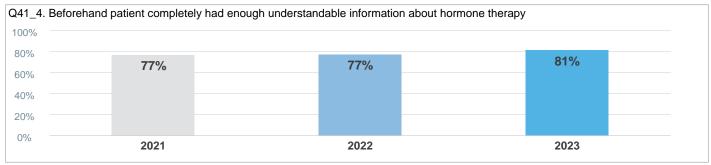


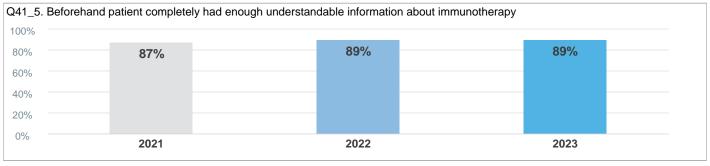


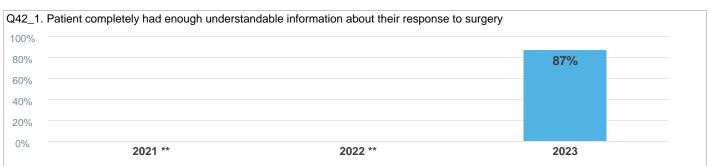








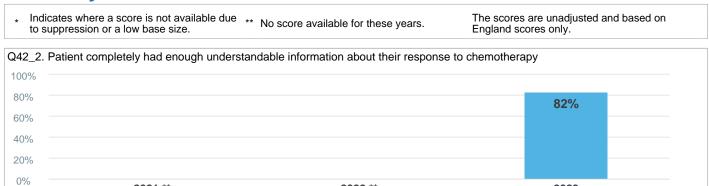




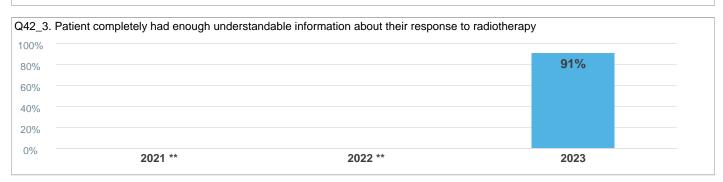
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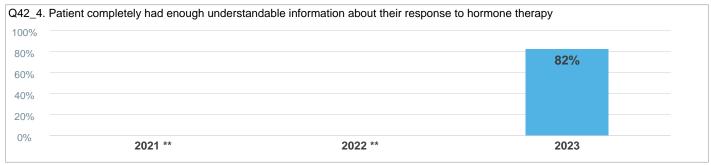
#### Year on year charts

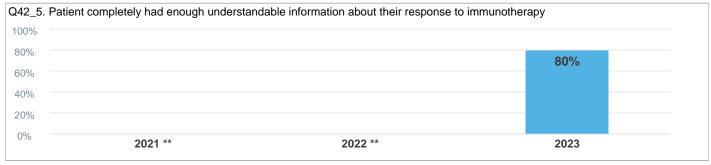
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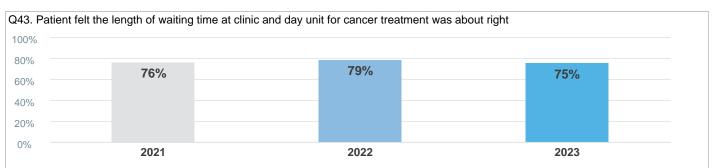


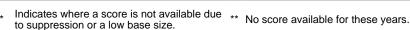
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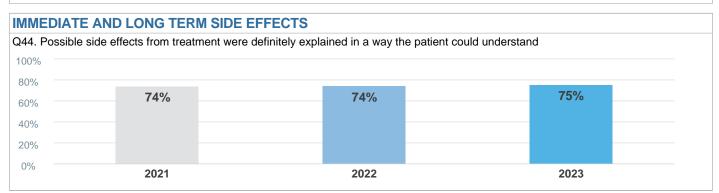


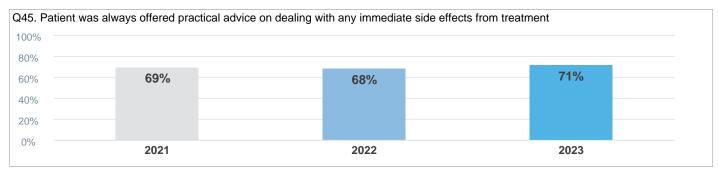


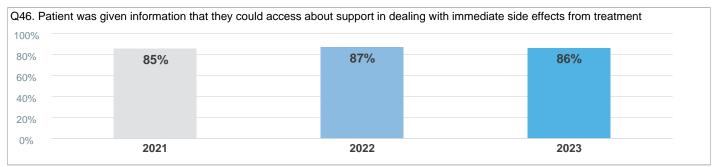


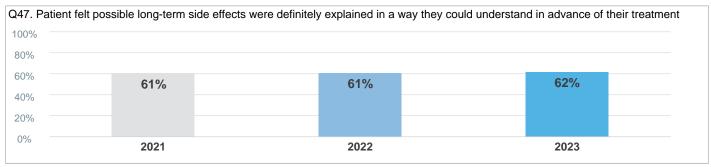


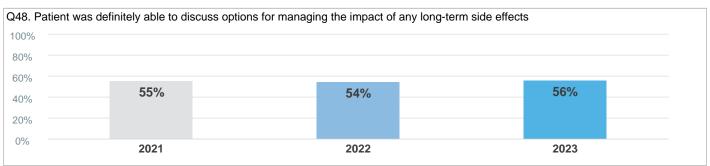
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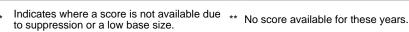




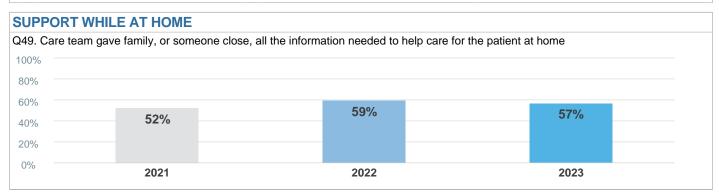


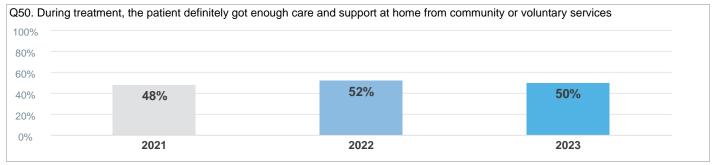


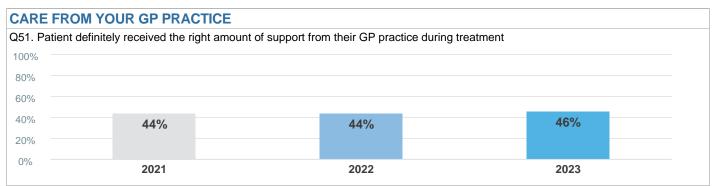


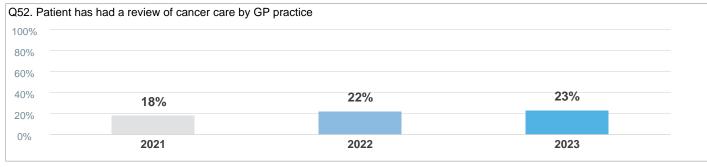


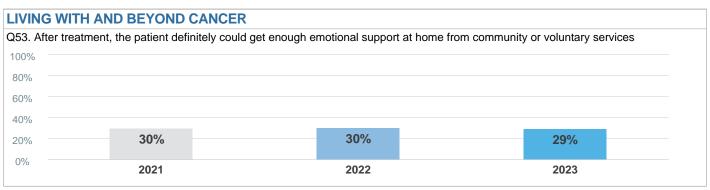
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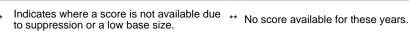




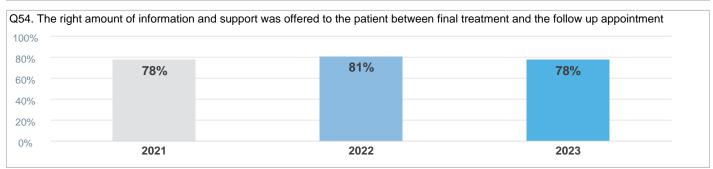


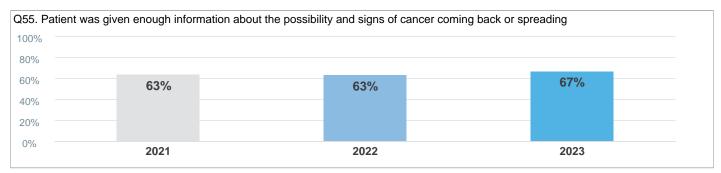


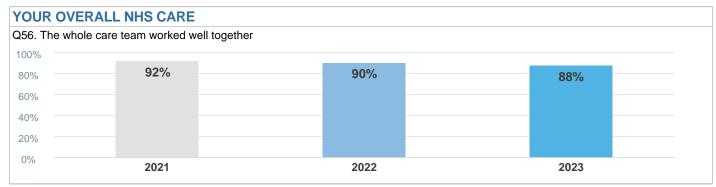


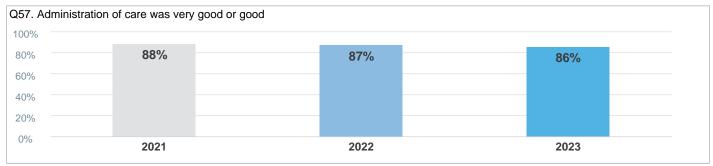


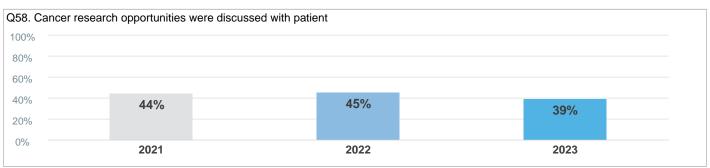
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## Cancer Patient Experience Survey 2023 NHS Nottingham and Nottinghamshire Integrated Care Board

