

Cancer Patient Experience Survey

2022 Results

Humber and North Yorkshire Cancer Alliance

Published July 2023

Executive Summary

Questions Above Expected Range

	Case	Mix Adjusted S	Scores	
	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	85%	74%	84%	79%

Questions Below Expected Range

	Case	Mix Adjusted S	cores	
	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q14. Cancer diagnosis explained in a way the patient could completely understand	74%	74%	78%	76%
Q17. Patient had a main point of contact within the care team	89%	89%	94%	92%

Introduction

The National Cancer Patient Experience Survey 2022 is the 12th 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 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 2022 survey involved 133 NHS Trusts. Out of 115,662 people, 61,268 people responded to the survey, yielding a response rate of 53%.

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 2022. The fieldwork for the survey was undertaken between November 2022 and February 2023.

As in the previous seven 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.

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 Alliance is performing given their patient population. The factors taken into account in this case-mix adjustment are Male/Female/Non-binary/Other, age, ethnicity, deprivation, and cancer type.

Unadjusted data should be used to see the actual responses from patients relating to the Alliance. Case-mix 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%.

Please note that 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.

Statistical significance

In the reporting of 2022 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 Alliance, the results are not shown for that question for that Alliance.

For Alliances 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** Alliance has a score suppressed. If this happens, we will suppress another Alliance's results (both the Alliance level and subgroup 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 Alliance.

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

Alliances 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 Alliance performs better than what Alliances 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 Alliance's size and demographics.

Comparability tables

The comparability tables show the 2021 and 2022 unadjusted scores for this Alliance for each scored question. If there is a statistically significant change from 2021 an arrow will be presented for the direction of change.

The adjusted 2022 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 type, Male/Female/Non-binary/Other, age, IMD quintile, long-term condition status and ethnicity breakdowns. Unadjusted scores for the same sub-group across different Alliances may not be comparable, as they do not account for the impact that differing patient populations might have on results.

Tumour type tables

The tumour type 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.

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 two columns representing the unadjusted scores of the last two years (2021 and 2022) for each scored question.

Trust Expected Range Summary

The number of scored questions that fell below, within and above the expected range for each Trust within the Alliance.

ICB Expected Range Summary

The number of scored questions that fell below, within and above the expected range for each ICB within the Alliance.

Further information

This research was carried out in accordance with the international standard for organisations conducting social research (accreditation to ISO20252:2012; certificate number GB08/74322). The 2022 survey data has been produced and published in line with the Code of Practice for Official Statistics.

For more information on the methodology, please see the Technical Document. It can be viewed along with the 2022 questionnaire and survey guidance on the website at www.ncpes.co.uk. For all other outputs at Alliance level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response Rate

Overall Response Rate

1,994 patients responded out of a total of 3,476 patients, resulting in a response rate of 57%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	3,759	3,476	1,994	57%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

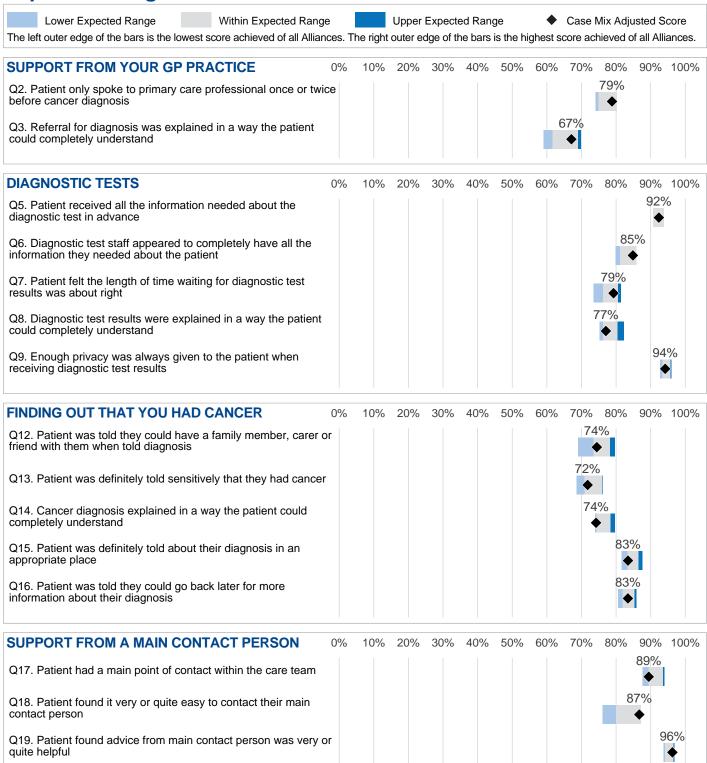
	Number of Respondents
Paper	1,701
Online	291
Phone	2
Translation Service	0
Total	1,994

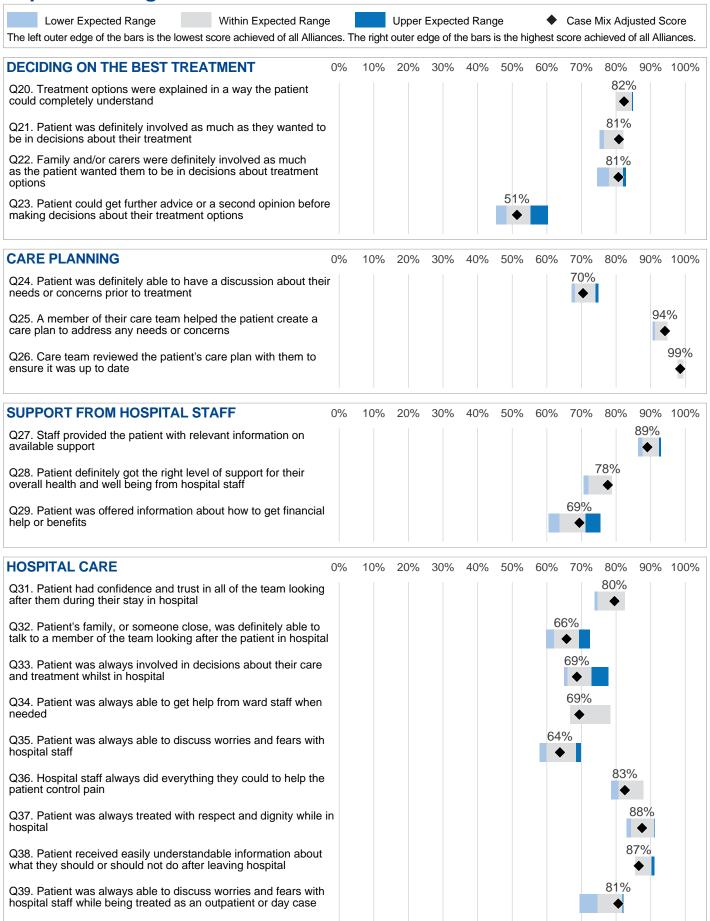
Respondents by Tumour Group

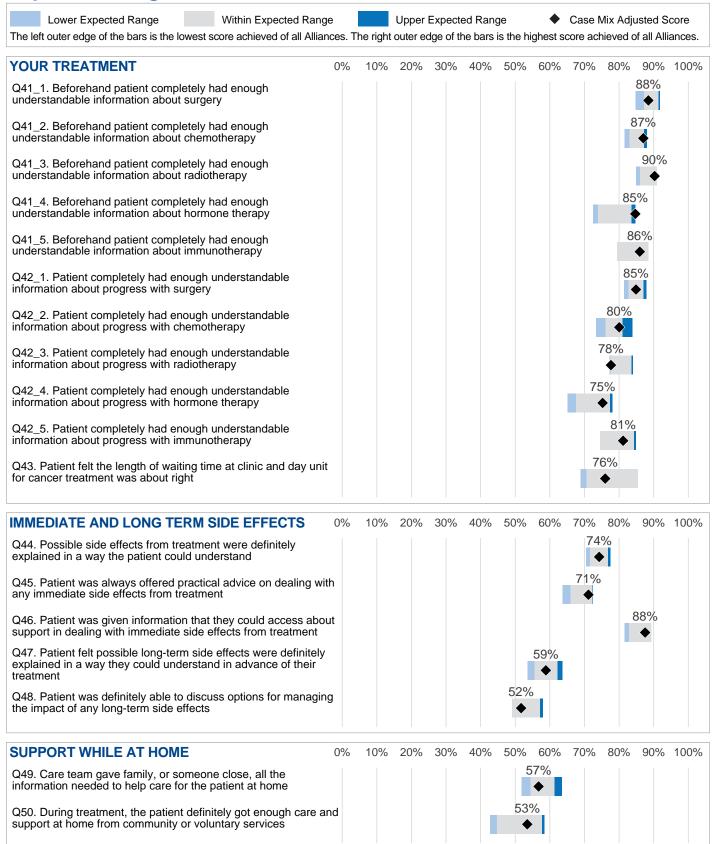
	Number of Respondents
Brain / CNS	5
Breast	457
Colorectal / LGT	268
Gynaecological	87
Haematological	266
Head and Neck	58
Lung	143
Prostate	126
Sarcoma	25
Skin	60
Upper Gastro	109
Urological	114
Other	276
Total	1,994

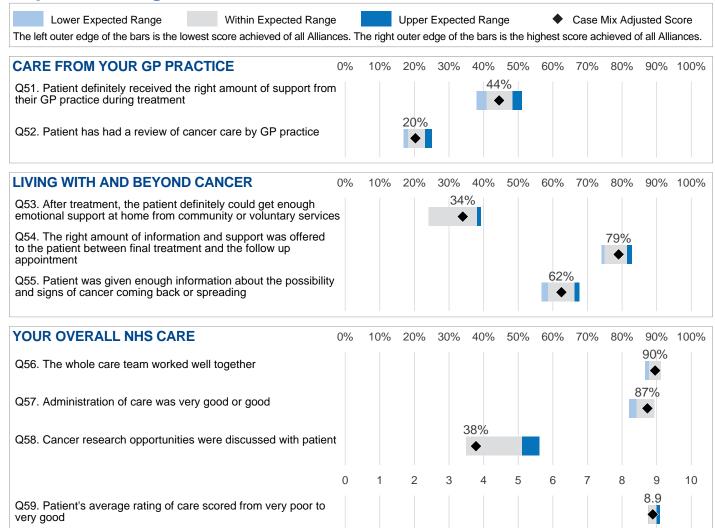
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	1,840
Irish	*
Gypsy or Irish Traveller	*
Any other White background	31
Mixed / Multiple Ethnicity	'
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	'
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnicity	
Arab	6
Any other ethnic group	*
Not given	
Not given	97
Total	1,994









Comparability tables

Indicates where a score is not

Adjusted Score below Lower Expected Range

ore between Upper expected Ranges ore above Upper

ange

available due to suppression or a low base size.	 Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.	Adjusted Score and Lower Exp
** No score available for 2021.		Adjusted Score

	Unadjusted Scores Case Mix Adjust					ix Adjusted	d Scores		
SUPPORT FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	1227	76%	973	79%		79%	75%	80%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	1646	63%	1325	67%		67%	62%	69%	65%

	Unadjusted Scores						Case Mix Adjusted Scores			
DIAGNOSTIC TESTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score	
Q5. Patient received all the information needed about the diagnostic test in advance	1942	92%	1544	93%		92%	91%	94%	92%	
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	2039	85%	1651	85%		85%	81%	86%	83%	
Q7. Patient felt the length of time waiting for diagnostic test results was about right	2049	80%	1648	79%		79%	76%	81%	78%	
Q8. Diagnostic test results were explained in a way the patient could completely understand	2043	79%	1649	78%		77%	76%	80%	78%	
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	2055	94%	1651	94%		94%	94%	96%	95%	

		Una	djusted So	cores	Case M				
FINDING OUT THAT YOU HAD CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	2281	70%	1846	75%	A	74%	73%	78%	76%
Q13. Patient was definitely told sensitively that they had cancer	2408	73%	1965	72%		72%	71%	76%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	2408	76%	1971	74%		74%	74%	78%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	2400	83%	1963	83%		83%	83%	87%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	2141	81%	1755	83%		83%	82%	85%	84%

	Unadjusted Scores					Case M	ix Adjuste	d Scores	
SUPPORT FROM A MAIN CONTACT PERSON	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q17. Patient had a main point of contact within the care team	2332	89%	1902	89%		89%	89%	94%	92%
Q18. Patient found it very or quite easy to contact their main contact person	1900	88%	1565	87%		87%	80%	87%	84%
Q19. Patient found advice from main contact person was very or quite helpful	1975	96%	1631	96%		96%	94%	97%	95%

Comparability tables

Adjusted Score below Lower

* Indicates where a score is not available due to suppression or a low base size. ** No score available for 2021. Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score. Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score. Adjusted Score above Upper Expected Range

	Unadjusted Scores						Case Mix Adjusted Scores			
DECIDING ON THE BEST TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score	
Q20. Treatment options were explained in a way the patient could completely understand	2251	83%	1826	83%		82%	80%	85%	82%	
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	2388	80%	1942	81%		81%	76%	82%	79%	
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	1979	76%	1662	81%	•	81%	78%	82%	80%	
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	1152	50%	903	50%		51%	48%	55%	52%	

	Unadjusted Scores						Case Mix Adjusted Scores			
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	2147	73%	1777	70%		70%	68%	74%	71%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	1227	93%	1017	94%		94%	91%	95%	93%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	956	99%	788	98%		99%	98%	99%	99%	

		Una	djusted So	cores	Case M				
SUPPORT FROM HOSPITAL STAFF	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q27. Staff provided the patient with relevant information on available support	1925	87%	1629	89%		89%	88%	92%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	2392	76%	1960	78%		78%	72%	79%	75%
Q29. Patient was offered information about how to get financial help or benefits	1257	68%	1070	70%		69%	64%	71%	67%

		Una	djusted So	cores	Case M				
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	1117	82%	843	79%		80%	75%	82%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	890	63%	665	66%		66%	62%	69%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	1096	68%	829	69%		69%	66%	73%	69%
Q34. Patient was always able to get help from ward staff when needed	1098	75%	829	69%		69%	67%	78%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	1069	68%	800	64%		64%	60%	68%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	977	87%	724	83%		83%	81%	88%	84%
Q37. Patient was always treated with respect and dignity while in hospital	1113	90%	841	87%		88%	84%	91%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	1085	88%	824	87%		87%	86%	90%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	2129	80%	1728	81%		81%	75%	82%	78%

Comparability tables

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

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Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.

Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges Adjusted Score above Upper Expected Range

**	Nο	score	available	for	2021

		Una	djusted So	cores		Case M			
YOUR TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q41_1. Beforehand patient completely had enough understandable information about surgery	1245	90%	1032	89%		88%	87%	91%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	1297	86%	1087	87%		87%	83%	87%	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	742	89%	659	90%		90%	86%	91%	88%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	407	81%	339	84%		85%	74%	84%	79%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	327	83%	270	86%		86%	80%	88%	84%
Q42_1. Patient completely had enough understandable information about progress with surgery	1236	85%	1027	85%		85%	83%	87%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	1298	80%	1085	80%		80%	76%	81%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	733	82%	652	77%		78%	78%	84%	81%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	402	76%	339	75%		75%	68%	77%	72%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	323	77%	259	81%		81%	75%	84%	79%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	2358	76%	1935	76%		76%	71%	85%	78%

		Una	djusted So	cores	Case M				
IMMEDIATE AND LONG TERM SIDE EFFECTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	2295	75%	1892	74%		74%	72%	77%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	2200	70%	1816	71%		71%	66%	72%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	1755	86%	1426	88%		88%	83%	89%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	2157	59%	1770	58%		59%	56%	62%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	1873	53%	1526	51%		52%	49%	57%	53%

SUPPORT WHILE AT HOME		Una	cores	Case M					
	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	1597	54%	1295	57%		57%	54%	61%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	926	51%	758	54%		53%	45%	58%	51%

Comparability tables

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

▲ or **▼**

Change 2021-2022: Indicates where 2022 score is significantly higher or lower than 2021 score.

Adjusted Score below Lower Expected Range

Adjusted Score between Upper and Lower Expected Ranges Adjusted Score above Upper Expected Range

**	Νo	score	available	for	2021.
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CARE FROM YOUR GP PRACTICE	Unadjusted Scores						Case Mix Adjusted Scores			
	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	1370	41%	1143	44%		44%	41%	48%	45%	
Q52. Patient has had a review of cancer care by GP practice	2317	17%	1885	20%		20%	18%	23%	21%	

	Unadjusted Scores						Case Mix Adjusted Scores			
LIVING WITH AND BEYOND CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 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	536	35%	440	35%		34%	24%	38%	31%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	1087	77%	925	80%		79%	75%	81%	78%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	1877	64%	1564	62%		62%	59%	66%	62%	

		Una	djusted So	cores		Case M			
YOUR OVERALL NHS CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	England Score
Q56. The whole care team worked well together	2297	91%	1869	89%		90%	88%	91%	90%
Q57. Administration of care was very good or good	2379	88%	1945	87%		87%	84%	89%	87%
Q58. Cancer research opportunities were discussed with patient	1372	37%	1145	37%		38%	35%	51%	43%
Q59. Patient's average rating of care scored from very poor to very good	2301	8.9	1907	8.9		8.9	8.8	9.0	8.9

SUPPORT FROM YOUR GP PRACTICE							Tumo	our Ty	ре					
	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	*	94%	76%	83%	67%	89%	62%	84%	79%	87%	68%	73%	76%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	82%	64%	75%	55%	57%	55%	69%	56%	76%	55%	63%	69%	67%

DIAGNOSTIC TESTS							Tumo	ur Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	93%	95%	93%	91%	96%	92%	93%	88%	88%	94%	91%	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	86%	87%	84%	85%	89%	79%	87%	83%	88%	77%	89%	84%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	78%	87%	67%	90%	78%	71%	82%	89%	71%	75%	85%	74%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	81%	80%	76%	78%	83%	70%	78%	61%	70%	70%	84%	76%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	97%	94%	89%	94%	87%	94%	96%	94%	96%	89%	91%	98%	94%

FINDING OUT THAT YOU HAD CANCER							Tumo	our Ty _l	ре					
	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	*	70%	83%	71%	73%	77%	74%	78%	91%	63%	76%	66%	80%	75%
Q13. Patient was definitely told sensitively that they had cancer	*	74%	77%	69%	69%	69%	69%	73%	83%	75%	62%	68%	74%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	77%	81%	73%	65%	81%	72%	73%	61%	78%	71%	80%	73%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	87%	86%	76%	83%	83%	80%	81%	88%	85%	81%	79%	83%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	*	90%	81%	85%	82%	88%	74%	92%	78%	92%	67%	75%	81%	83%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	ur Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q17. Patient had a main point of contact within the care team	*	87%	91%	94%	89%	89%	91%	91%	96%	89%	88%	84%	92%	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	90%	87%	90%	86%	85%	87%	84%	91%	85%	80%	86%	88%	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	96%	97%	96%	98%	95%	96%	95%	100%	93%	98%	97%	96%

DECIDING ON THE BEST TREATMENT							Tumo	our Ty _l	ре					
	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%	85%	86%	83%	81%	84%	83%	80%	83%	86%	75%	81%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	83%	83%	72%	80%	84%	80%	85%	70%	84%	78%	80%	81%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	77%	85%	81%	78%	87%	87%	85%	82%	85%	84%	78%	82%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	51%	56%	40%	61%	42%	40%	52%	50%	38%	43%	58%	45%	50%

CARE PLANNING							Tumo	our Ty	ре					
	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	*	73%	74%	76%	66%	73%	67%	73%	74%	68%	60%	64%	72%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	95%	96%	92%	96%	97%	93%	94%	83%	89%	92%	93%	93%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	97%	100%	91%	100%	100%	98%	98%	100%	100%	100%	100%	98%	98%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Ty	ре					
	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%	92%	91%	90%	90%	82%	96%	89%	93%	81%	81%	85%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	76%	81%	75%	80%	83%	78%	80%	74%	83%	69%	75%	77%	78%
Q29. Patient was offered information about how to get financial help or benefits	*	69%	63%	80%	71%	63%	84%	67%	79%	76%	56%	62%	70%	70%

HOSPITAL CARE							Tumo	ur Ty	ре					
	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%	78%	75%	81%	73%	78%	79%	87%	73%	79%	89%	80%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	62%	71%	58%	76%	58%	60%	58%	60%	*	76%	66%	63%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	71%	70%	64%	66%	73%	69%	72%	60%	64%	68%	69%	66%	69%
Q34. Patient was always able to get help from ward staff when needed	*	71%	67%	74%	70%	71%	72%	76%	64%	55%	61%	77%	63%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	63%	70%	68%	68%	55%	58%	59%	64%	36%	56%	70%	61%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	85%	83%	85%	86%	86%	79%	78%	71%	80%	77%	81%	85%	83%
Q37. Patient was always treated with respect and dignity while in hospital	*	89%	83%	83%	91%	90%	88%	93%	73%	91%	85%	92%	87%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	86%	90%	81%	91%	87%	90%	93%	93%	73%	76%	89%	84%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	79%	87%	80%	81%	87%	79%	78%	84%	81%	80%	81%	80%	81%

YOUR TREATMENT							Tumo	ur Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	88%	89%	85%	89%	80%	86%	87%	100%	91%	100%	91%	87%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	87%	90%	94%	85%	76%	82%	94%	94%	*	84%	98%	84%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	90%	87%	95%	90%	83%	89%	95%	*	*	93%	100%	89%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	82%	*	*	*	*	*	92%	*	*	*	*	81%	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	91%	*	*	83%	*	88%	*	*	84%	71%	89%	88%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	86%	86%	85%	85%	85%	81%	77%	93%	88%	86%	81%	85%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	82%	79%	81%	82%	65%	76%	73%	88%	*	77%	87%	79%	80%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	84%	69%	90%	79%	68%	78%	67%	*	*	55%	69%	85%	77%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	76%	*	*	*	*	*	72%	*	*	*	*	75%	75%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	88%	*	*	76%	*	80%	*	*	83%	59%	85%	85%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	71%	77%	78%	75%	77%	76%	92%	74%	75%	64%	84%	79%	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our Ty	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	74%	76%	84%	69%	78%	74%	76%	74%	81%	69%	78%	71%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	71%	73%	74%	68%	74%	74%	69%	83%	72%	60%	76%	73%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	92%	85%	85%	87%	88%	90%	87%	94%	85%	80%	84%	88%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	57%	63%	55%	56%	65%	56%	64%	76%	63%	52%	57%	54%	58%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	47%	60%	53%	56%	54%	52%	44%	55%	50%	53%	56%	44%	51%

SUPPORT WHILE AT HOME							Tumo	ur Ty	ре					
	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	*	51%	57%	59%	63%	74%	52%	52%	89%	38%	66%	59%	55%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	55%	52%	53%	56%	36%	58%	50%	60%	47%	73%	57%	47%	54%

CARE FROM YOUR GP PRACTICE							Tumo	our Typ	ре					
	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	*	44%	47%	55%	39%	43%	38%	51%	27%	42%	42%	42%	45%	44%
Q52. Patient has had a review of cancer care by GP practice	*	18%	20%	29%	14%	13%	19%	23%	17%	14%	29%	20%	22%	20%

LIVING WITH AND BEYOND CANCER							Tumo	our Ty _l	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	29%	41%	38%	31%	38%	33%	25%	*	30%	48%	27%	36%	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	85%	73%	80%	84%	89%	67%	76%	*	80%	69%	87%	75%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	59%	59%	67%	76%	64%	58%	54%	75%	72%	55%	69%	59%	62%

YOUR OVERALL NHS CARE							Tumo	our Ty _l	ре					
	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	*	91%	88%	90%	90%	93%	88%	89%	78%	83%	86%	93%	89%	89%
Q57. Administration of care was very good or good	*	89%	87%	84%	90%	91%	87%	86%	87%	82%	84%	86%	85%	87%
Q58. Cancer research opportunities were discussed with patient	*	22%	48%	25%	59%	27%	32%	34%	45%	43%	41%	32%	37%	37%
Q59. Patient's average rating of care scored from very poor to very good	*	9.0	8.8	9.0	9.0	9.1	8.8	8.9	8.4	9.0	8.6	8.8	8.8	8.9

SUPPORT FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	79%	78%	76%	79%	80%	87%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	73%	76%	73%	64%	67%	44%	67%

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	*	*	89%	91%	93%	94%	91%	94%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	80%	83%	88%	85%	85%	79%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	53%	71%	74%	79%	85%	89%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	54%	72%	78%	79%	79%	76%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	93%	94%	95%	95%	95%	90%	94%

FINDING OUT THAT YOU HAD CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	67%	66%	73%	69%	78%	77%	76%	75%
Q13. Patient was definitely told sensitively that they had cancer	*	75%	55%	62%	70%	72%	77%	76%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	75%	42%	68%	73%	76%	78%	76%	74%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	83%	74%	78%	83%	84%	85%	87%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	*	100%	88%	86%	87%	83%	80%	76%	83%

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	*	100%	89%	84%	89%	91%	89%	89%	89%
Q18. Patient found it very or quite easy to contact their main contact person	*	91%	85%	84%	85%	88%	88%	87%	87%
Q19. Patient found advice from main contact person was very or quite helpful	*	100%	95%	96%	96%	96%	97%	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	*	82%	63%	77%	82%	86%	84%	75%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	67%	58%	77%	82%	82%	82%	78%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	73%	54%	73%	80%	82%	85%	78%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	52%	45%	45%	50%	52%	67%	50%

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	*	75%	57%	69%	71%	73%	70%	66%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	89%	99%	93%	94%	94%	91%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	76%	95%	99%	100%	100%	100%	98%

SUPPORT FROM HOSPITAL STAFF				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q27. Staff provided the patient with relevant information on available support	*	100%	77%	89%	89%	89%	90%	87%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	75%	52%	67%	75%	81%	81%	72%	78%
Q29. Patient was offered information about how to get financial help or benefits	*	90%	65%	73%	70%	71%	65%	72%	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	*	*	60%	74%	76%	80%	85%	89%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	45%	63%	59%	68%	72%	64%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	48%	64%	66%	72%	70%	77%	69%
Q34. Patient was always able to get help from ward staff when needed	*	*	52%	70%	62%	70%	75%	62%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	50%	65%	62%	63%	67%	70%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	64%	76%	82%	83%	87%	91%	83%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	76%	81%	81%	88%	94%	88%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	75%	91%	86%	87%	88%	88%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	90%	60%	80%	78%	84%	81%	77%	81%

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	72%	85%	85%	91%	92%	92%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	73%	90%	87%	88%	86%	85%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	68%	90%	90%	92%	91%	87%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	53%	67%	87%	89%	88%	*	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	93%	91%	83%	84%	*	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	64%	86%	84%	86%	87%	89%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	62%	77%	81%	80%	81%	88%	80%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	74%	82%	79%	80%	71%	71%	77%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	43%	56%	83%	78%	75%	*	75%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	83%	83%	78%	81%	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	75%	56%	73%	73%	77%	81%	73%	76%

IMMEDIATE AND LONG TERM SIDE EFFEC	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	*	83%	54%	78%	77%	76%	72%	63%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	67%	46%	72%	73%	74%	70%	66%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	75%	90%	88%	89%	86%	88%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	83%	42%	55%	59%	63%	54%	51%	58%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	73%	33%	48%	52%	55%	48%	38%	51%

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	*	45%	36%	48%	57%	59%	58%	56%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	17%	64%	56%	53%	53%	53%	54%

CARE FROM YOUR GP PRACTICE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	70%	38%	42%	50%	47%	39%	31%	44%
Q52. Patient has had a review of cancer care by GP practice	*	17%	23%	21%	22%	20%	18%	16%	20%

LIVING WITH AND BEYOND CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	23%	39%	32%	32%	37%	29%	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	57%	76%	78%	81%	82%	84%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	55%	37%	51%	62%	65%	64%	67%	62%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	100%	78%	89%	88%	89%	91%	92%	89%
Q57. Administration of care was very good or good	*	92%	75%	87%	87%	87%	89%	89%	87%
Q58. Cancer research opportunities were discussed with patient	*	*	26%	24%	40%	38%	38%	29%	37%
Q59. Patient's average rating of care scored from very poor to very good	*	9.5	8.1	8.7	8.9	9.0	9.0	8.7	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	81%	77%	*	*	*	71%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	72%	60%	*	*	*	67%	67%

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	92%	93%	*	*	*	93%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	84%	86%	*	*	*	81%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	77%	82%	*	*	*	80%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	77%	80%	*	*	*	64%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	94%	*	*	*	95%	94%

FINDING OUT THAT YOU HAD CANCER			Male/Female/Non-binary/Other							
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All			
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	72%	79%	*	*	*	73%	75%			
Q13. Patient was definitely told sensitively that they had cancer	72%	72%	*	*	*	73%	72%			
Q14. Cancer diagnosis explained in a way the patient could completely understand	73%	76%	*	*	*	71%	74%			
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	84%	*	*	*	88%	83%			
Q16. Patient was told they could go back later for more information about their diagnosis	83%	83%	*	*	*	78%	83%			

SUPPORT FROM A MAIN CONTACT PERSO	N		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q17. Patient had a main point of contact within the care team	88%	92%	*	*	*	79%	89%	
Q18. Patient found it very or quite easy to contact their main contact person	87%	88%	*	*	*	80%	87%	
Q19. Patient found advice from main contact person was very or quite helpful	95%	98%	*	*	*	94%	96%	

DECIDING ON THE BEST TREATMENT				Male/Fema	ale/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	83%	83%	*	*	*	75%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	80%	82%	*	*	*	72%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	85%	*	*	*	67%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	48%	53%	*	*	*	41%	50%

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	70%	72%	*	*	*	60%	70%			
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	92%	96%	*	*	*	95%	94%			
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	99%	*	*	*	100%	98%			

SUPPORT FROM HOSPITAL STAFF				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q27. Staff provided the patient with relevant information on available support	87%	92%	*	*	*	78%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	74%	83%	*	*	*	64%	78%
Q29. Patient was offered information about how to get financial help or benefits	72%	68%	*	*	*	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	77%	85%	*	*	*	59%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	62%	72%	*	*	*	53%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	68%	73%	*	*	*	46%	69%
Q34. Patient was always able to get help from ward staff when needed	66%	74%	*	*	*	51%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	61%	69%	*	*	*	48%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	85%	*	*	*	75%	83%
Q37. Patient was always treated with respect and dignity while in hospital	85%	92%	*	*	*	73%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	85%	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	78%	86%	*	*	*	65%	81%

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	88%	90%	*	*	*	82%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	88%	*	*	*	83%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	89%	*	*	*	82%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	90%	*	*	*	*	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	83%	88%	*	*	*	92%	86%
Q42_1. Patient completely had enough understandable nformation about progress with surgery	85%	87%	*	*	*	72%	85%
Q42_2. Patient completely had enough understandable nformation about progress with chemotherapy	79%	81%	*	*	*	77%	80%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	82%	72%	*	*	*	52%	77%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	76%	72%	*	*	*	90%	75%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	79%	84%	*	*	*	77%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	73%	81%	*	*	*	68%	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS			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	74%	75%	*	*	*	65%	74%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	74%	*	*	*	66%	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	89%	*	*	*	90%	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	56%	61%	*	*	*	49%	58%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	49%	54%	*	*	*	38%	51%	

SUPPORT WHILE AT HOME		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	52%	64%	*	*	*	42%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	57%	*	*	*	61%	54%

CARE FROM YOUR GP PRACTICE	Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	45%	*	*	*	35%	44%
Q52. Patient has had a review of cancer care by GP practice	20%	20%	*	*	*	22%	20%

LIVING WITH AND BEYOND CANCER			Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	36%	*	*	*	46%	35%	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	80%	*	*	*	67%	80%	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	61%	66%	*	*	*	47%	62%	

YOUR OVERALL NHS CARE			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q56. The whole care team worked well together	89%	91%	*	*	*	83%	89%		
Q57. Administration of care was very good or good	87%	88%	*	*	*	79%	87%		
Q58. Cancer research opportunities were discussed with patient	31%	45%	*	*	*	41%	37%		
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	*	*	*	8.4	8.9		

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian				Other	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	*	*	*	*	79%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	67%	*	*	*	*	67%	67%

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%	*	*	*	*	93%	93%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	*	*	*	*	84%	85%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	*	*	*	*	81%	79%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	*	*	*	*	64%	78%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	*	*	*	*	94%	94%		

FINDING OUT THAT YOU HAD CANCER		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	75%	*	*	*	*	74%	75%		
Q13. Patient was definitely told sensitively that they had cancer	72%	*	*	*	*	74%	72%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	*	*	*	*	70%	74%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	83%	*	*	*	*	86%	83%		
Q16. Patient was told they could go back later for more information about their diagnosis	83%	*	*	*	*	77%	83%		

SUPPORT FROM A MAIN CONTACT PERSO	SON Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	90%	*	*	*	*	81%	89%
Q18. Patient found it very or quite easy to contact their main contact person	87%	*	*	*	*	85%	87%
Q19. Patient found advice from main contact person was very or quite helpful	96%	*	*	*	*	96%	96%

DECIDING ON THE BEST TREATMENT		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q20. Treatment options were explained in a way the patient could completely understand	83%	*	*	*	*	77%	83%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	82%	*	*	*	*	72%	81%		
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	*	*	*	*	73%	81%		
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	50%	*	*	*	*	47%	50%		

CARE PLANNING				Ethr	nicity		
	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	71%	*	*	*	*	63%	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	*	*	*	*	93%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	*	*	*	*	100%	98%

SUPPORT FROM HOSPITAL STAFF	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q27. Staff provided the patient with relevant information on available support	89%	*	*	*	*	81%	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	*	*	*	*	71%	78%
Q29. Patient was offered information about how to get financial help or benefits	70%	*	*	*	*	63%	70%

HOSPITAL CARE				Ethi	nicity		
	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	80%	*	*	*	*	61%	79%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	66%	*	*	*	*	53%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	70%	*	*	*	*	49%	69%
Q34. Patient was always able to get help from ward staff when needed	70%	*	*	*	*	49%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	*	*	*	*	54%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	83%	*	*	*	*	78%	83%
Q37. Patient was always treated with respect and dignity while in hospital	88%	*	*	*	*	76%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	87%	*	*	*	*	76%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	*	*	*	*	71%	81%

YOUR TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	89%	*	*	*	*	86%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	87%	*	*	*	*	86%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	90%	*	*	*	*	79%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	84%	*	*	*	*	92%	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	85%	*	*	*	*	88%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	85%	*	*	*	*	84%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	80%	*	*	*	*	82%	80%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	78%	*	*	*	*	67%	77%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	74%	*	*	*	*	85%	75%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	81%	*	*	*	*	80%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	*	*	*	*	73%	76%

IMMEDIATE AND LONG TERM SIDE EFFECT	S	Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	*	*	*	*	69%	74%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	*	*	*	*	67%	71%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	88%	*	*	*	*	87%	88%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	58%	*	*	*	*	54%	58%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	51%	*	*	*	*	39%	51%		

SUPPORT WHILE AT HOME	Ethnicity						
	White Mixed Asian Black Other Not give						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	57%	*	*	*	*	54%	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	*	*	*	*	60%	54%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other N					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	*	*	*	*	38%	44%
Q52. Patient has had a review of cancer care by GP practice	20%	*	*	*	*	24%	20%

LIVING WITH AND BEYOND CANCER		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	34%	*	*	*	*	42%	35%		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	80%	*	*	*	*	68%	80%		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	63%	*	*	*	*	53%	62%		

YOUR OVERALL NHS CARE		Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	90%	*	*	*	*	86%	89%
Q57. Administration of care was very good or good	87%	*	*	*	*	84%	87%
Q58. Cancer research opportunities were discussed with patient	37%	*	*	*	*	41%	37%
Q59. Patient's average rating of care scored from very poor to very good	8.9	*	*	*	*	8.6	8.9

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD Quintile						
	1 (most deprived) 2 3 4 5 (least deprived)					Non- England	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	74%	79%	77%	81%	79%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	58%	65%	68%	71%	65%	*	67%

DIAGNOSTIC TESTS				IMD Quint	ile		
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q5. Patient received all the information needed about the diagnostic test in advance	91%	94%	94%	93%	92%	*	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	77%	81%	88%	86%	86%	*	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	76%	77%	83%	81%	77%	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	82%	77%	77%	79%	76%	*	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	93%	95%	96%	94%	94%	*	94%

FINDING OUT THAT YOU HAD CANCER		IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	78%	76%	74%	77%	72%	*	75%	
Q13. Patient was definitely told sensitively that they had cancer	71%	70%	74%	73%	71%	*	72%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	71%	74%	75%	74%	75%	*	74%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	81%	84%	84%	82%	84%	*	83%	
Q16. Patient was told they could go back later for more information about their diagnosis	83%	83%	83%	83%	84%	*	83%	

SUPPORT FROM A MAIN CONTACT PERSO	N			IMD Quinti			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q17. Patient had a main point of contact within the care team	87%	89%	93%	90%	88%	*	89%
Q18. Patient found it very or quite easy to contact their main contact person	87%	89%	86%	88%	87%	*	87%
Q19. Patient found advice from main contact person was very or quite helpful	98%	96%	95%	96%	97%	*	96%

IMD quintile tables

DECIDING ON THE BEST TREATMENT	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q20. Treatment options were explained in a way the patient could completely understand	83%	81%	82%	82%	84%	*	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	75%	82%	82%	83%	80%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	76%	81%	81%	84%	80%	*	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	56%	54%	51%	52%	45%	*	50%

CARE PLANNING				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	76%	73%	71%	68%	70%	*	70%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	96%	91%	93%	96%	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	99%	99%	98%	98%	*	98%

SUPPORT FROM HOSPITAL STAFF				IMD Quinti			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q27. Staff provided the patient with relevant information on available support	88%	89%	88%	88%	90%	*	89%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	73%	77%	81%	78%	77%	*	78%
Q29. Patient was offered information about how to get financial help or benefits	64%	72%	73%	67%	71%	*	70%

HOSPITAL CARE	IMD Quintile							
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	76%	82%	84%	78%	78%	*	79%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	65%	72%	71%	66%	60%	*	66%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	73%	73%	67%	68%	*	69%	
Q34. Patient was always able to get help from ward staff when needed	77%	78%	77%	66%	61%	*	69%	
Q35. Patient was always able to discuss worries and fears with hospital staff	68%	71%	70%	62%	58%	*	64%	
Q36. Hospital staff always did everything they could to help the patient control pain	85%	88%	85%	78%	84%	*	83%	
Q37. Patient was always treated with respect and dignity while in hospital	88%	89%	90%	85%	87%	*	87%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	85%	89%	87%	86%	*	87%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	81%	81%	84%	79%	81%	*	81%	

IMD quintile tables

YOUR TREATMENT	IMD Quintile								
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q41_1. Beforehand patient completely had enough understandable information about surgery	83%	89%	93%	89%	87%	*	89%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	88%	87%	85%	88%	*	87%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	96%	87%	93%	86%	92%	*	90%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	77%	86%	81%	89%	*	84%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	73%	93%	84%	87%	88%	*	86%		
Q42_1. Patient completely had enough understandable information about progress with surgery	84%	83%	86%	85%	86%	*	85%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	81%	83%	78%	80%	*	80%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	76%	70%	83%	76%	78%	*	77%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	60%	72%	79%	66%	81%	*	75%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	71%	86%	79%	82%	83%	*	81%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	69%	71%	78%	77%	77%	*	76%		

IMMEDIATE AND LONG TERM SIDE EFFECTS					IMD Quintile				
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	79%	77%	73%	73%	74%	*	74%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	76%	72%	74%	71%	68%	*	71%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	84%	89%	88%	86%	91%	*	88%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	66%	62%	59%	56%	55%	*	58%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	64%	59%	53%	48%	47%	*	51%		

SUPPORT WHILE AT HOME	IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	63%	63%	58%	57%	52%	*	57%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	53%	54%	51%	57%	*	54%

CARE FROM YOUR GP PRACTICE				IMD Quintil			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	43%	40%	52%	44%	41%	*	44%
Q52. Patient has had a review of cancer care by GP practice	23%	18%	21%	19%	20%	*	20%

IMD quintile tables

LIVING WITH AND BEYOND CANCER	NG WITH AND BEYOND CANCER			IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	33%	24%	42%	36%	33%	*	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	78%	80%	78%	82%	*	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	63%	63%	63%	60%	*	62%

YOUR OVERALL NHS CARE				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q56. The whole care team worked well together	92%	91%	90%	88%	89%	*	89%
Q57. Administration of care was very good or good	84%	91%	89%	86%	87%	*	87%
Q58. Cancer research opportunities were discussed with patient	31%	38%	38%	37%	38%	*	37%
Q59. Patient's average rating of care scored from very poor to very good	8.9	9.0	8.9	8.8	8.9	*	8.9

SUPPORT FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	77%	82%	80%	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	63%	73%	65%	67%

DIAGNOSTIC TESTS				
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	92%	93%	96%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	83%	89%	83%	85%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	79%	80%	81%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	78%	78%	68%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	94%	96%	92%	94%

FINDING OUT THAT YOU HAD CANCER		Long term condition status		
	Yes	No	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	76%	74%	70%	75%
Q13. Patient was definitely told sensitively that they had cancer	71%	73%	73%	72%
Q14. Cancer diagnosis explained in a way the patient could completely understand	75%	73%	73%	74%
Q15. Patient was definitely told about their diagnosis in appropriate place	83%	84%	82%	83%
Q16. Patient was told they could go back later for more information about their diagnosis	83%	84%	78%	83%

SUPPORT FROM A MAIN CONTACT PERSO	Long term condition status				
	Yes	No	Not given	All	
Q17. Patient had a main point of contact within the care team	90%	90%	81%	89%	
Q18. Patient found it very or quite easy to contact their main contact person	86%	89%	88%	87%	
Q19. Patient found advice from main contact person was very or quite helpful	96%	97%	96%	96%	

DECIDING ON THE BEST TREATMENT		Long term condition status		
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	82%	85%	79%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	82%	77%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	81%	70%	81%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	50%	49%	53%	50%

CARE PLANNING	Long term condition status				
	Yes	No	Not given	All	
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	68%	76%	67%	70%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	93%	96%	95%	94%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99%	98%	100%	98%	

SUPPORT FROM HOSPITAL STAFF	Long term condition status				
	Yes	No	Not given	All	
Q27. Staff provided the patient with relevant information on available support	88%	91%	86%	89%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	77%	79%	74%	78%	
Q29. Patient was offered information about how to get financial help or benefits	68%	75%	61%	70%	

HOSPITAL CARE	Long term condition status			
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	80%	81%	68%	79%
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%	66%	51%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	69%	73%	48%	69%
Q34. Patient was always able to get help from ward staff when needed	67%	74%	60%	69%
Q35. Patient was always able to discuss worries and fears with hospital staff	63%	68%	50%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	82%	86%	76%	83%
Q37. Patient was always treated with respect and dignity while in hospital	88%	88%	76%	87%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	86%	90%	75%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	84%	72%	81%

YOUR TREATMENT	n status			
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	87%	91%	88%	89%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	85%	90%	87%	87%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	92%	89%	81%	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	83%	86%	86%	84%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	86%	86%	86%	86%
Q42_1. Patient completely had enough understandable information about progress with surgery	82%	91%	83%	85%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	78%	83%	81%	80%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	76%	83%	59%	77%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	73%	76%	87%	75%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	80%	84%	79%	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	76%	77%	71%	76%

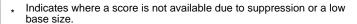
IMMEDIATE AND LONG TERM SIDE EFFECTS Long term condition status					
	Yes	No	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	74%	76%	67%	74%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	69%	75%	68%	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	86%	91%	88%	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	56%	61%	55%	58%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	49%	55%	46%	51%	

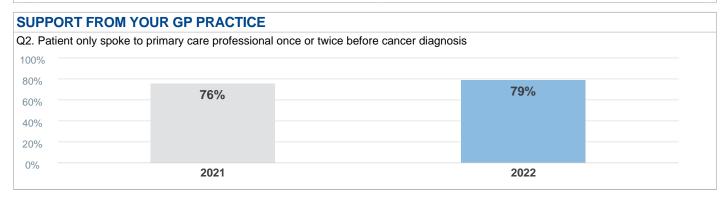
SUPPORT WHILE AT HOME		Long term condition	status		
	Yes	No	Not given	All	
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	57%	57%	51%	57%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	51%	58%	64%	54%	

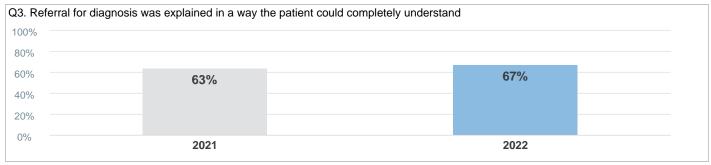
CARE FROM YOUR GP PRACTICE	Long term condition status				
	Yes	No	Not given	All	
Q51. Patient definitely received the right amount of support from their GP practice during treatment	41%	51%	39%	44%	
Q52. Patient has had a review of cancer care by GP practice	19%	20%	22%	20%	

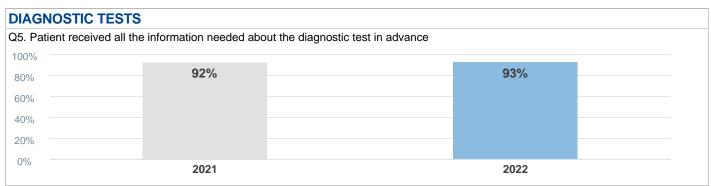
LIVING WITH AND BEYOND CANCER	Long term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	31%	45%	32%	35%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	76%	87%	69%	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	62%	65%	51%	62%

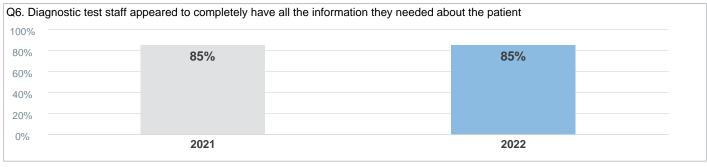
YOUR OVERALL NHS CARE				
	Yes	No	Not given	All
Q56. The whole care team worked well together	88%	91%	89%	89%
Q57. Administration of care was very good or good	87%	89%	86%	87%
Q58. Cancer research opportunities were discussed with patient	36%	39%	38%	37%
Q59. Patient's average rating of care scored from very poor to very good	8.8	9.1	8.7	8.9

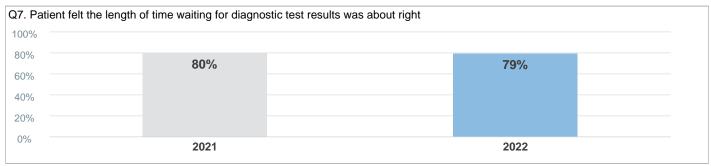


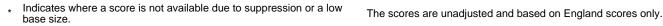


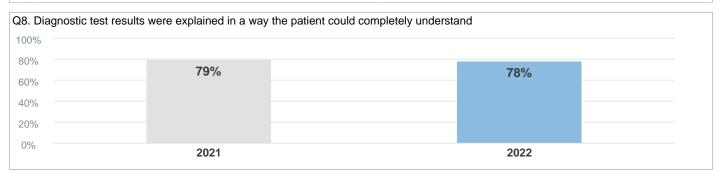


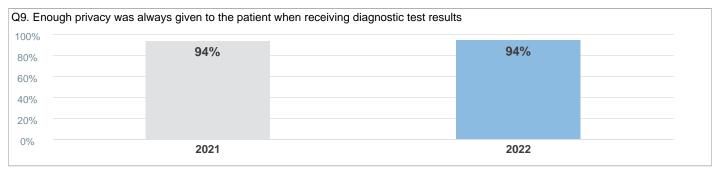




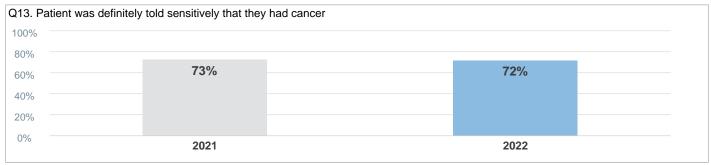




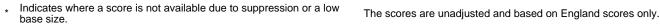




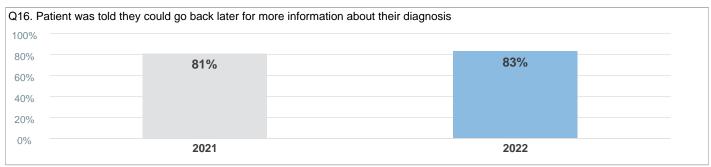


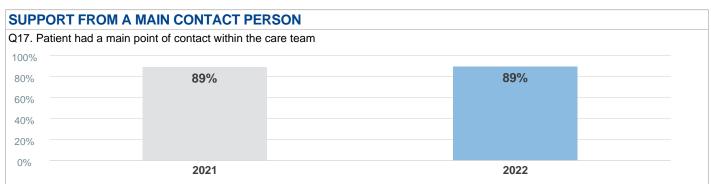






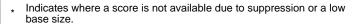


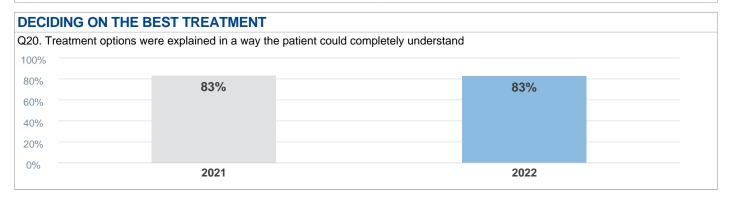




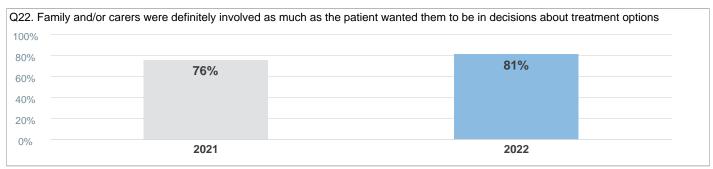




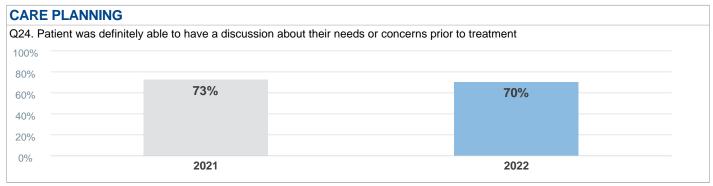


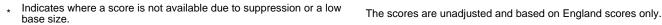






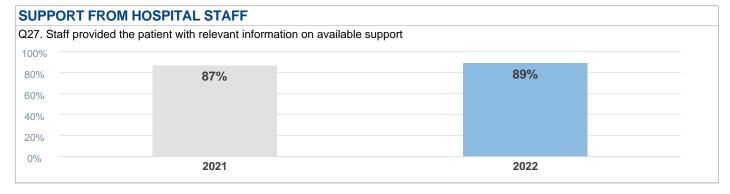


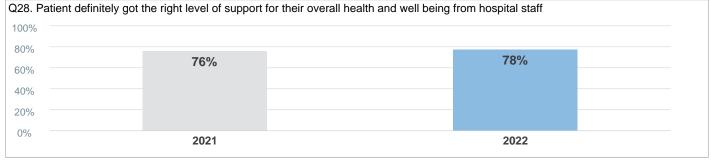






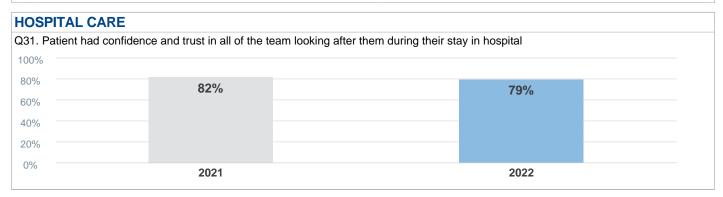




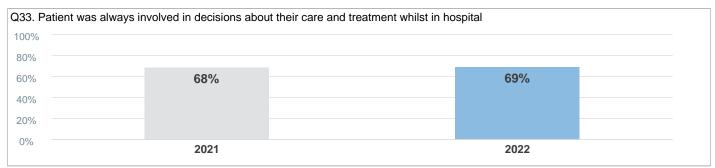




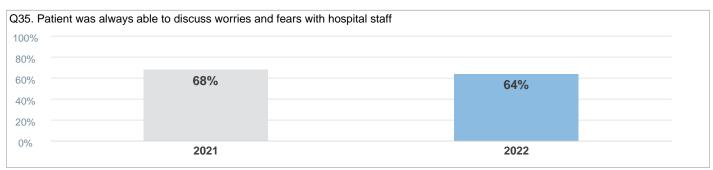


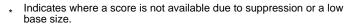


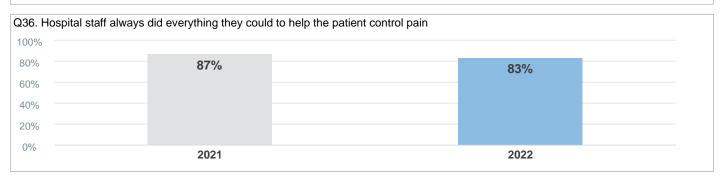


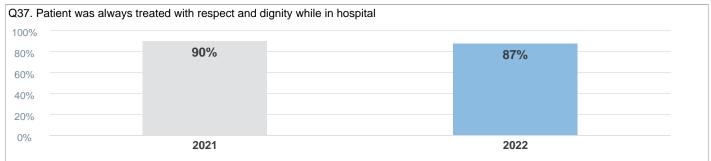


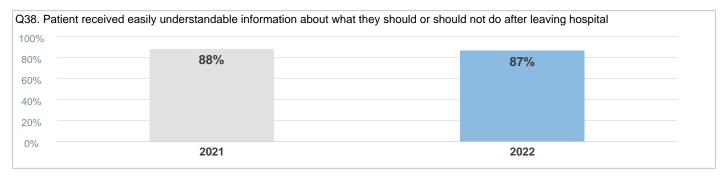


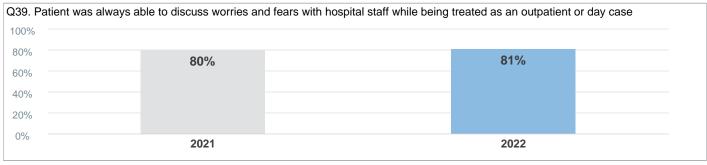


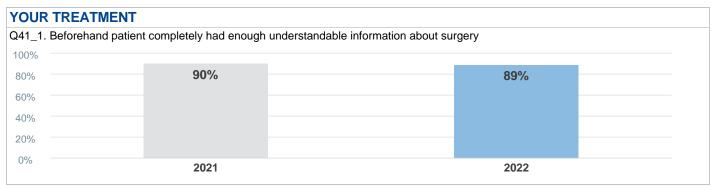


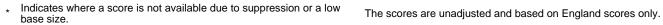


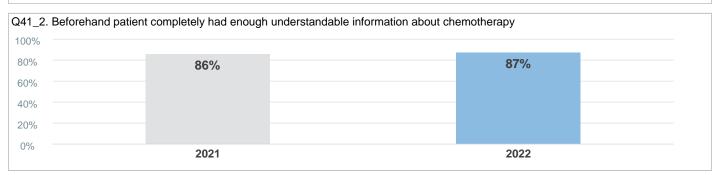


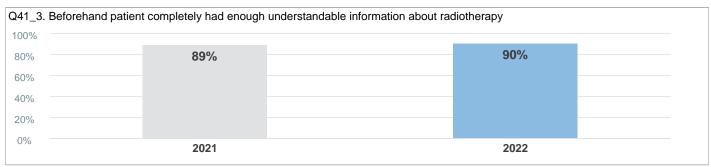


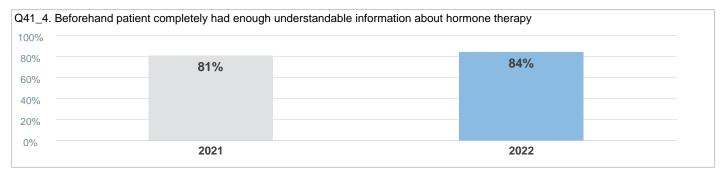


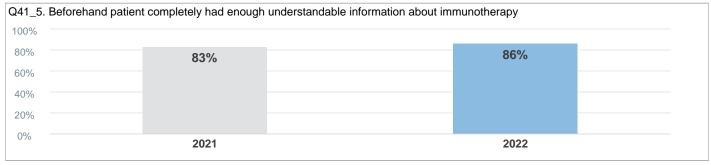




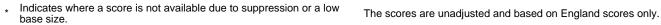


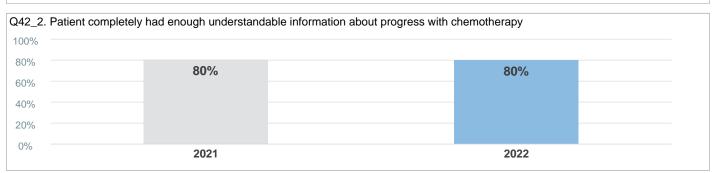


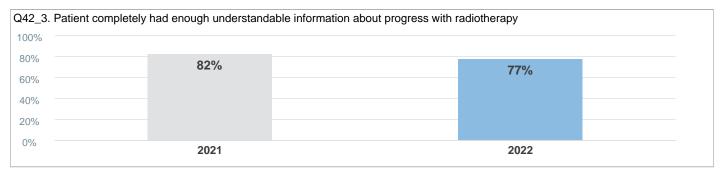


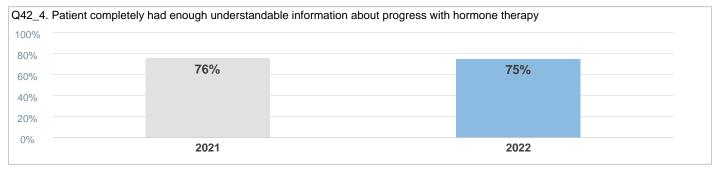


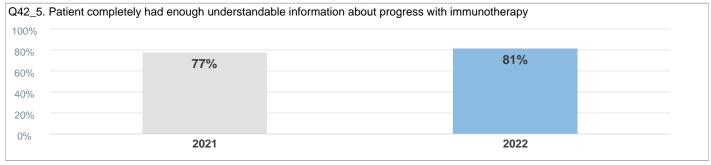


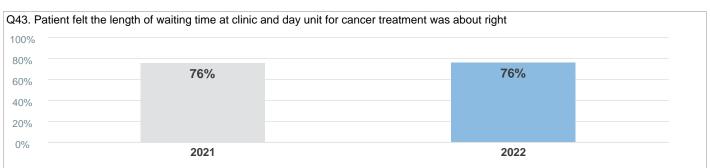


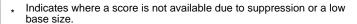


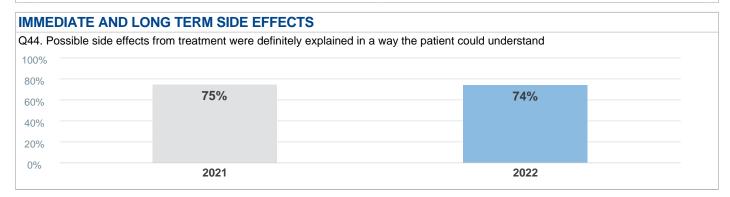




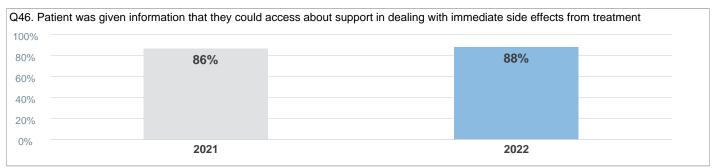


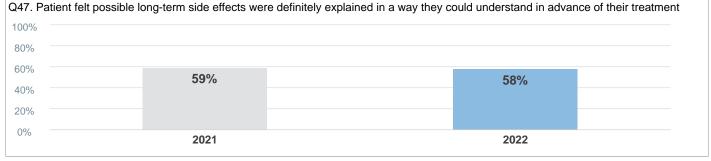




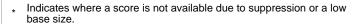


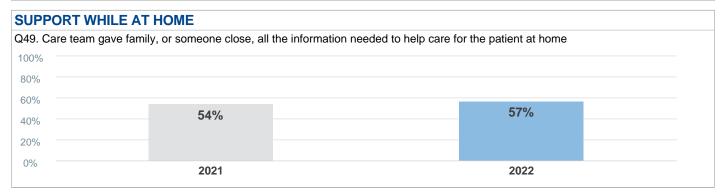


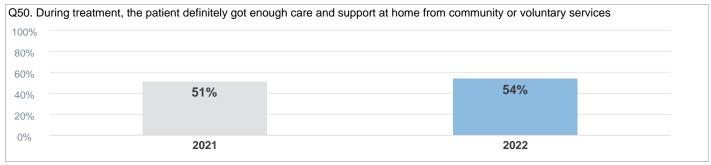


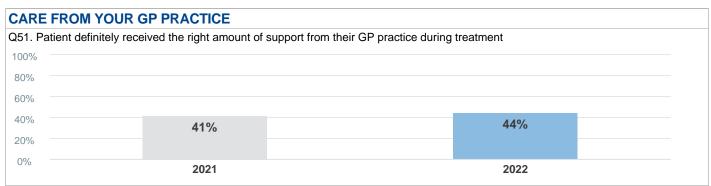


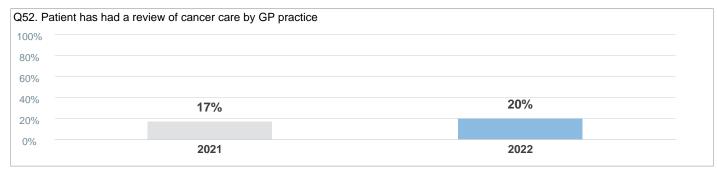


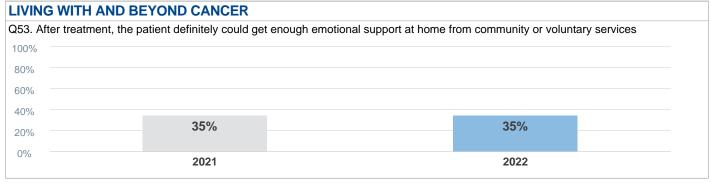


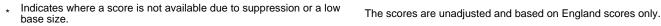


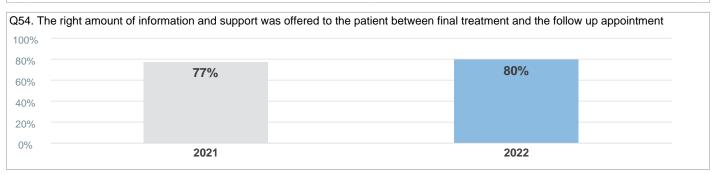


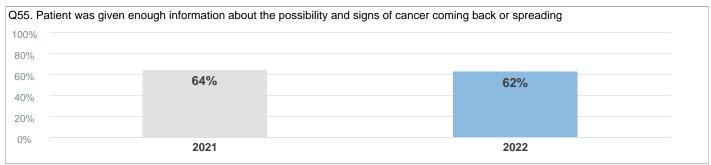


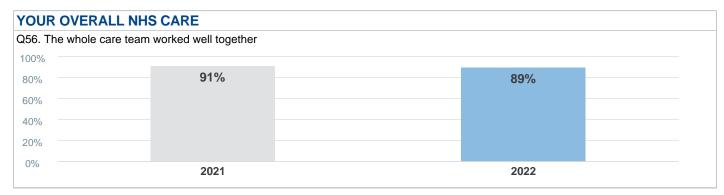




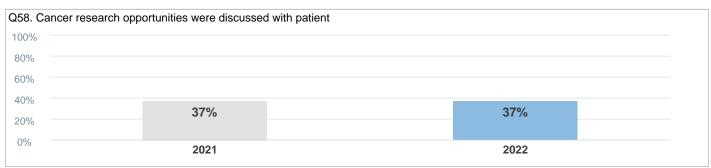


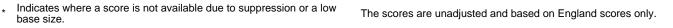














Cancer Patient Experience Survey 2022 Humber and North Yorkshire Cancer Alliance

Trust Expected Range Summary

Data labels relate to the number of scores that fell below, within and above the expected range					Lower Expected Range
		Number of scores between the Upper and Lower Expected Ranges Number of scores above the Upper Expected Range			
Trust		Expected Range Classification			
RJL Northern Lincolnshire and Goole NHS Foundation Trust			2	57 2	
RCB York and Scarborough Teaching Hospitals NHS Foundation Trust			7	49 5	
RWA Hull University Teaching Hospitals NHS Trust		7		54	

Cancer Patient Experience Survey 2022 Humber and North Yorkshire Cancer Alliance

ICB Expected Range Summary

	labels relate to the number of scores that fell below, n and above the expected range	Number of scores below the Lower Expected Range Number of scores between the Upper and Lower Expected Ranges Number of scores above the Upper Expected Range
ICB		Expected Range Classification
QOQ NHS Humber and North Yorkshire Integrated Care Board		d 59 1