

Cancer Patient Experience Survey

2022 Results

Blackpool Teaching Hospitals NHS Foundation Trust

Published July 2023

Executive Summary

Questions Above Expected Range

	Case	Mix Adjusted S	cores	
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q16. Patient was told they could go back later for more information about their diagnosis	90%	78%	89%	84%
Q17. Patient had a main point of contact within the care team	96%	87%	96%	91%
Q20. Treatment options were explained in a way the patient could completely understand	89%	77%	87%	82%
Q29. Patient was offered information about how to get financial help or benefits	78%	57%	78%	67%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	87%	71%	86%	79%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	91%	72%	89%	81%
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	48%	17%	45%	31%
Q56. The whole care team worked well together	96%	85%	94%	90%
Q59. Patient's average rating of care scored from very poor to very good	9.1	8.7	9.1	8.9

Questions Below Expected Range

	Case			
	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q36. Hospital staff always did everything they could to help the patient control pain	75%	75%	93%	84%

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.

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 a Trust 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 Trust. Casemix adjusted data, together with expected ranges, should be used to understand whether the results are significantly higher or lower than national results taking account of the patient mix.

Scoring methodology

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

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 Trust, the results are not shown for that question for that Trust.

For Trusts 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** Trust has a score suppressed. If this happens, we will suppress another Trust's results (both the Trust 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 Trust.

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

Trusts 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 Trust performs better than what Trusts 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 Trust's size and demographics.

Comparability tables

The comparability tables show the 2021 and 2022 unadjusted scores for this Trust 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 Trusts 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.

Age group tables

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

Male/Female/Non-binary/Other tables

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

Ethnicity tables

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

Long-term condition status tables

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

IMD quintile tables

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

Year on year charts

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

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 Trust level, please see the Excel tables and dashboards at www.ncpes.co.uk.

Response Rate

Overall Response Rate

223 patients responded out of a total of 399 patients, resulting in a response rate of 56%.

	Sample Size	Adjusted Sample	Completed	Response Rate
Overall response rate	417	399	223	56%
National	123,632	115,662	61,268	53%

Respondents by Survey Type

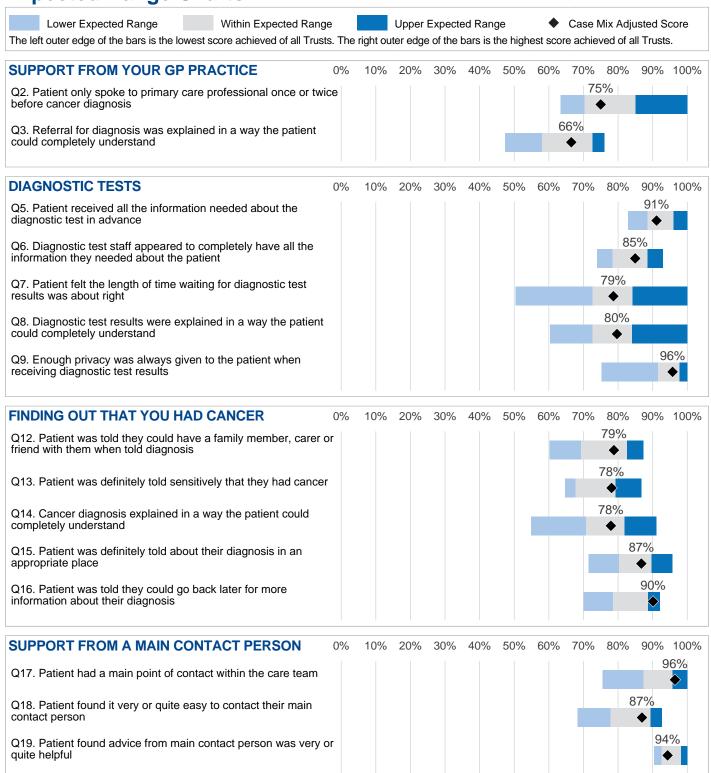
	Number of Respondents
Paper	187
Online	36
Phone	0
Translation Service	0
Total	223

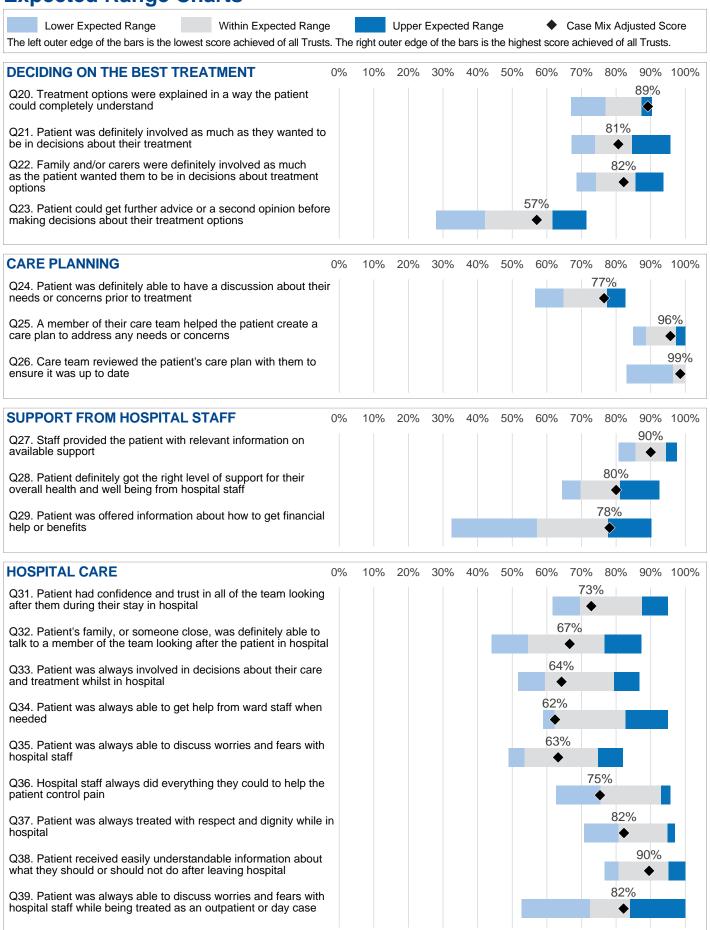
Respondents by Tumour Group

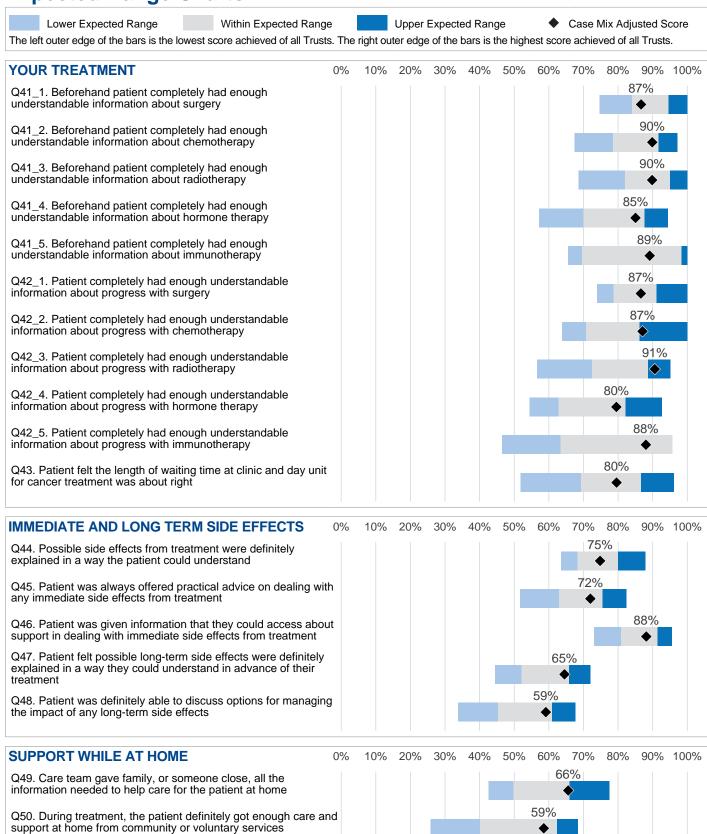
	Number of Respondents
Brain / CNS	0
Breast	90
Colorectal / LGT	0
Gynaecological	14
Haematological	28
Head and Neck	0
Lung	*
Prostate	49
Sarcoma	0
Skin	*
Upper Gastro	0
Urological	22
Other	13
Total	223

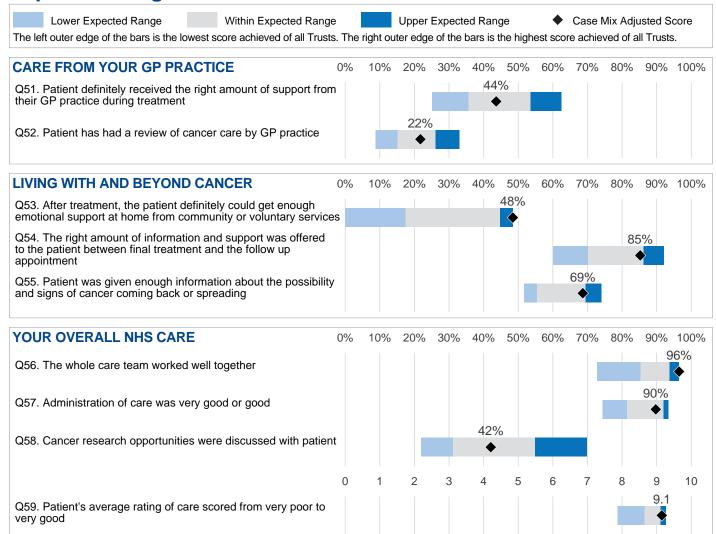
Respondents by Ethnicity

	Number of Respondents
White	
English / Welsh / Scottish / Northern Irish / British	202
Irish	*
Gypsy or Irish Traveller	*
Any other White background	*
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	*
Any other ethnic group	*
Not given	
Not given	9
Total	223









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

**	No score	available	for 2021.

		Una	djusted So	cores	Case M				
SUPPORT FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	125	78%	124	79%		75%	70%	85%	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	162	63%	163	70%		66%	58%	73%	65%

		Una	djusted So	cores	Case M				
DIAGNOSTIC TESTS	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q5. Patient received all the information needed about the diagnostic test in advance	191	92%	195	91%		91%	88%	96%	92%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	203	85%	204	86%		85%	78%	89%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	207	82%	205	79%		79%	73%	84%	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	206	80%	207	80%		80%	73%	84%	78%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	208	97%	207	96%		96%	92%	98%	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	National Score
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	215	73%	218	78%		79%	69%	83%	76%
Q13. Patient was definitely told sensitively that they had cancer	223	74%	222	79%		78%	68%	79%	74%
Q14. Cancer diagnosis explained in a way the patient could completely understand	225	81%	221	79%		78%	71%	82%	76%
Q15. Patient was definitely told about their diagnosis in an appropriate place	224	86%	223	88%		87%	80%	90%	85%
Q16. Patient was told they could go back later for more information about their diagnosis	201	86%	201	91%		90%	78%	89%	84%

	Unadjusted Scores Case Mix Adjusted 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	National Score
Q17. Patient had a main point of contact within the care team	220	96%	220	96%		96%	87%	96%	91%
Q18. Patient found it very or quite easy to contact their main contact person	185	89%	204	86%		87%	78%	89%	84%
Q19. Patient found advice from main contact person was very or quite helpful	200	98%	206	94%		94%	93%	98%	95%

Comparability tables

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

Change 2021-2022: Indicates where 2022 score is

Adjusted Score below Lower Expected Range

Adjusted Score between Upper

** No score available for 2021.	or lower	than 202	1 score.			Adjuste	•	cted Ranç above Up e	•
		Una	djusted So	cores		Case M	ix Adjuste	d 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	National Score
Q20. Treatment options were explained in a way the patient could completely understand	210	86%	208	89%		89%	77%	87%	82%
O21 Patient was definitely involved as much as they wented to									

Q20. Treatment options were explained in a way the patient could completely understand	210	86%	208	89%	89%	77%	87%	82%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	222	82%	222	81%	81%	74%	85%	79%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	193	79%	200	82%	82%	74%	86%	80%
Q23. Patient could get further advice or a second opinion before	97	49%	104	58%	57%	42%	62%	52%

		Una	djusted So		Case M	d Scores			
CARE PLANNING	2021 n	2021 Score	2022 n	2022 Score	Change 2021-2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	198	75%	202	77%		77%	65%	77%	71%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	125	94%	132	95%		96%	89%	97%	93%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	99	99%	109	98%		99%	96%	100%	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	National Score
Q27. Staff provided the patient with relevant information on available support	177	90%	191	91%		90%	86%	94%	90%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	223	83%	223	80%		80%	70%	81%	76%
Q29. Patient was offered information about how to get financial help or benefits	118	75%	128	77%		78%	57%	78%	67%

		Una	djusted So	cores		Case M	d Scores		
HOSPITAL CARE	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	105	84%	83	73%		73%	70%	88%	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	84	64%	71	65%		67%	55%	77%	66%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	101	71%	82	65%		64%	59%	79%	70%
Q34. Patient was always able to get help from ward staff when needed	104	78%	80	64%		62%	62%	83%	73%
Q35. Patient was always able to discuss worries and fears with hospital staff	101	71%	78	63%		63%	54%	75%	64%
Q36. Hospital staff always did everything they could to help the patient control pain	96	90%	66	76%		75%	75%	93%	84%
Q37. Patient was always treated with respect and dignity while in hospital	103	90%	82	83%		82%	81%	95%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	103	92%	77	90%		90%	81%	95%	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	182	82%	206	82%		82%	73%	84%	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

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	Unadjusted Scores						Case Mix Adjusted Scores				
YOUR TREATMENT	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score		
Q41_1. Beforehand patient completely had enough understandable information about surgery	150	94%	130	87%		87%	84%	95%	89%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	103	90%	110	90%		90%	79%	92%	85%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	49	90%	93	90%		90%	82%	95%	88%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	41	90%	83	86%		85%	70%	88%	79%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	23	87%	25	88%		89%	70%	98%	84%		
Q42_1. Patient completely had enough understandable information about progress with surgery	149	91%	130	87%		87%	79%	91%	85%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	102	85%	110	87%		87%	71%	86%	79%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	49	84%	91	91%		91%	72%	89%	81%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	40	83%	82	80%		80%	63%	82%	72%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	23	74%	24	88%		88%	63%	96%	80%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	216	86%	219	79%		80%	69%	87%	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	National Score
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	211	77%	212	75%		75%	68%	80%	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	201	78%	203	71%		72%	63%	76%	69%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	161	86%	166	88%		88%	81%	91%	86%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	203	68%	199	65%		65%	52%	66%	59%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	175	61%	177	59%		59%	45%	61%	53%

		Una	djusted So	cores	Case M				
SUPPORT WHILE AT HOME	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	157	62%	158	64%		66%	50%	66%	58%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	85	68%	81	57%		59%	40%	62%	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

** No score available for 2021.

		Una	djusted So	cores		Case M			
CARE FROM YOUR GP PRACTICE	2021 n	2021 Score	2022 n	2022 Score	Change 2021-2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	124	52%	145	45%		44%	36%	54%	45%
Q52. Patient has had a review of cancer care by GP practice	213	21%	213	22%		22%	15%	26%	21%

		Una	djusted So	cores		Case M			
LIVING WITH AND BEYOND CANCER	2021 n	2021 Score	2022 n	2022 Score	Change 2021- 2022	2022 Score	Lower Expected Range	Upper Expected Range	National Score
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	51	41%	44	45%		48%	17%	45%	31%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	98	89%	101	84%		85%	70%	86%	78%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	171	68%	187	68%		69%	55%	69%	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	National Score
Q56. The whole care team worked well together	217	94%	204	97%		96%	85%	94%	90%
Q57. Administration of care was very good or good	216	93%	216	90%		90%	81%	92%	87%
Q58. Cancer research opportunities were discussed with patient	99	43%	141	41%		42%	31%	55%	43%
Q59. Patient's average rating of care scored from very poor to very good	211	9.1	212	9.2		9.1	8.7	9.1	8.9

SUPPORT FROM YOUR GP PRACTICE							Tum	our Typ	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	*	91%	*	*	59%	*	*	83%	*	*	*	82%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	88%	*	50%	64%	*	*	68%	*	*	*	28%	*	70%

DIAGNOSTIC TESTS							Tumo	our Typ	ре					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All Cancers
Q5. Patient received all the information needed about the diagnostic test in advance	*	89%	*	83%	96%	*	*	89%	*	*	*	90%	100%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	87%	*	58%	85%	*	*	91%	*	*	*	86%	77%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	81%	*	55%	81%	*	*	83%	*	*	*	73%	67%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	82%	*	83%	67%	*	*	83%	*	*	*	73%	85%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	99%	*	92%	93%	*	*	100%	*	*	*	82%	100%	96%

FINDING OUT THAT YOU HAD CANCER							Tumo	our Typ	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	*	74%	*	83%	82%	*	*	90%	*	*	*	76%	62%	78%
Q13. Patient was definitely told sensitively that they had cancer	*	81%	*	71%	79%	*	*	71%	*	*	*	76%	92%	79%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	83%	*	57%	71%	*	*	82%	*	*	*	65%	92%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	88%	*	71%	86%	*	*	98%	*	*	*	77%	85%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	*	92%	*	92%	88%	*	*	93%	*	*	*	90%	83%	91%

SUPPORT FROM A MAIN CONTACT PERSO	N						Tumo	our Typ	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	*	100%	*	93%	100%	*	*	96%	*	*	*	86%	100%	96%
Q18. Patient found it very or quite easy to contact their main contact person	*	83%	*	75%	85%	*	*	98%	*	*	*	89%	77%	86%
Q19. Patient found advice from main contact person was very or quite helpful	*	96%	*	85%	92%	*	*	95%	*	*	*	94%	92%	94%

DECIDING ON THE BEST TREATMENT							Tumo	our Typ	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	*	88%	*	*	88%	*	*	92%	*	*	*	85%	100%	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	87%	*	77%	79%	*	*	84%	*	*	*	64%	69%	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	84%	*	69%	88%	*	*	89%	*	*	*	65%	67%	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	63%	*	*	53%	*	*	52%	*	*	*	*	*	58%

CARE PLANNING							Tum	our Typ	е					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and Neck	Lung	Prostate	Sarcoma	Skin	Upper Gastro	Urological	Other	All Cancers
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	84%	*	80%	89%	*	*	70%	*	*	*	47%	62%	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	94%	*	*	100%	*	*	96%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	100%	*	*	92%	*	*	100%	*	*	*	*	*	98%

SUPPORT FROM HOSPITAL STAFF							Tumo	our Typ	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%	*	90%	92%	*	*	95%	*	*	*	83%	80%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	80%	*	71%	79%	*	*	80%	*	*	*	82%	85%	80%
Q29. Patient was offered information about how to get financial help or benefits	*	76%	*	*	94%	*	*	70%	*	*	*	60%	*	77%

HOSPITAL CARE							Tumo	our Typ	е					
	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	*	63%	*	*	89%	*	*	100%	*	*	*	69%	*	73%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	70%	*	*	84%	*	*	*	*	*	*	31%	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	61%	*	*	79%	*	*	69%	*	*	*	50%	*	65%
Q34. Patient was always able to get help from ward staff when needed	*	55%	*	*	79%	*	*	75%	*	*	*	50%	*	64%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	57%	*	*	84%	*	*	83%	*	*	*	33%	*	63%
Q36. Hospital staff always did everything they could to help the patient control pain	*	75%	*	*	79%	*	*	91%	*	*	*	69%	*	76%
Q37. Patient was always treated with respect and dignity while in hospital	*	78%	*	*	89%	*	*	92%	*	*	*	81%	*	83%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	91%	*	*	94%	*	*	85%	*	*	*	87%	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	84%	*	73%	85%	*	*	81%	*	*	*	84%	85%	82%

YOUR TREATMENT							Tumo	our Typ	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	*	91%	*	*	*	*	*	82%	*	*	*	94%	*	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	90%	*	82%	96%	*	*	75%	*	*	*	100%	91%	90%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	89%	*	*	*	*	*	90%	*	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	82%	*	*	*	*	*	91%	*	*	*	*	*	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	100%	*	*	*	*	*	*	*	*	*	*	*	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	91%	*	*	*	*	*	91%	*	*	*	88%	*	87%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	92%	*	80%	88%	*	*	67%	*	*	*	91%	91%	87%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	93%	*	*	*	*	*	80%	*	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	81%	*	*	*	*	*	82%	*	*	*	*	*	80%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	91%	*	*	*	*	*	*	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	69%	*	92%	78%	*	*	88%	*	*	*	95%	92%	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS						Tumo	our Typ	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	*	76%	*	69%	76%	*	*	77%	*	*	*	62%	92%	75%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	74%	*	75%	74%	*	*	67%	*	*	*	68%	69%	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	90%	*	*	82%	*	*	84%	*	*	*	87%	100%	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	66%	*	50%	71%	*	*	74%	*	*	*	47%	62%	65%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	61%	*	50%	64%	*	*	57%	*	*	*	56%	55%	59%

SUPPORT WHILE AT HOME							Tumo	our Typ	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	*	70%	*	40%	67%	*	*	48%	*	*	*	69%	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	63%	*	*	55%	*	*	42%	*	*	*	*	*	57%

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	*	42%	*	20%	65%	*	*	47%	*	*	*	27%	*	45%
Q52. Patient has had a review of cancer care by GP practice	*	23%	*	23%	23%	*	*	19%	*	*	*	19%	18%	22%

LIVING WITH AND BEYOND CANCER							Tumo	our Typ	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	*	42%	*	*	*	*	*	*	*	*	*	*	*	45%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	88%	*	*	75%	*	*	78%	*	*	*	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	65%	*	83%	76%	*	*	53%	*	*	*	89%	60%	68%

YOUR OVERALL NHS CARE							Tumo	our Typ	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	*	97%	*	100%	92%	*	*	98%	*	*	*	95%	100%	97%
Q57. Administration of care was very good or good	*	93%	*	85%	93%	*	*	85%	*	*	*	90%	85%	90%
Q58. Cancer research opportunities were discussed with patient	*	56%	*	*	57%	*	*	15%	*	*	*	*	30%	41%
Q59. Patient's average rating of care scored from very poor to very good	*	9.3	*	8.9	9.3	*	*	9.0	*	*	*	9.0	9.1	9.2

Age group tables

SUPPORT FROM YOUR GP PRACTICE	Age								
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	75%	66%	87%	85%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	82%	69%	74%	66%	*	70%

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	*	*	*	87%	90%	89%	96%	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	80%	82%	85%	92%	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	88%	72%	79%	87%	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	75%	84%	78%	87%	*	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	94%	94%	99%	96%	*	96%

FINDING OUT THAT YOU HAD CANCER				Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	53%	71%	79%	88%	*	78%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	71%	84%	75%	83%	*	79%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	65%	79%	82%	80%	*	79%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	76%	81%	92%	97%	*	88%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	100%	92%	88%	91%	*	91%	

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	*	*	*	94%	96%	96%	98%	*	96%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	87%	75%	89%	94%	*	86%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	94%	93%	90%	100%	*	94%

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%	87%	87%	94%	*	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	76%	79%	82%	84%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	86%	71%	84%	87%	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	*	*	*	*	57%	57%	68%	*	58%

Age group tables

CARE PLANNING				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	82%	75%	70%	85%	*	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	100%	94%	91%	98%	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	100%	96%	100%	97%	*	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	*	*	*	88%	90%	89%	96%	*	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	76%	75%	74%	92%	*	80%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	77%	79%	73%	83%	*	77%

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	*	*	*	*	68%	71%	86%	*	73%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	47%	61%	79%	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	64%	63%	73%	*	65%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	62%	58%	77%	*	64%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	62%	56%	76%	*	63%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	78%	67%	88%	*	76%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	86%	70%	91%	*	83%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	90%	88%	90%	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	73%	73%	86%	89%	*	82%

Age group tables

YOUR TREATMENT				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	77%	89%	83%	97%	*	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	93%	86%	96%	*	90%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	73%	92%	90%	95%	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	85%	88%	100%	*	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	88%
Q42_1. Patient completely had enough understandable information about progress with surgery	*	*	*	83%	89%	80%	97%	*	87%
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	*	*	*	*	90%	86%	92%	*	87%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	*	*	*	80%	92%	97%	85%	*	91%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	*	*	*	*	76%	81%	94%	*	80%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	71%	80%	76%	88%	*	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	TS			Age						
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	76%	75%	72%	80%	*	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	71%	77%	68%	70%	*	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	92%	93%	85%	87%	*	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	63%	63%	61%	75%	*	65%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	57%	53%	57%	70%	*	59%	

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	*	*	*	73%	64%	54%	75%	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	48%	55%	59%	*	57%

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	*	*	*	45%	38%	32%	66%	*	45%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	18%	22%	17%	28%	*	22%

Age group tables

LIVING WITH AND BEYOND CANCER				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	32%	*	*	*	45%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	77%	86%	80%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	43%	67%	73%	72%	*	68%

YOUR OVERALL NHS CARE				Age					
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q56. The whole care team worked well together	*	*	*	94%	96%	96%	100%	*	97%
Q57. Administration of care was very good or good	*	*	*	100%	84%	87%	96%	*	90%
Q58. Cancer research opportunities were discussed with patient	*	*	*	36%	53%	37%	31%	*	41%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	9.3	9.3	9.0	9.3	*	9.2

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	79%	81%	*	*	*	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	78%	58%	*	*	*	*	70%

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	89%	92%	*	*	*	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	94%	*	*	*	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	73%	86%	*	*	*	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	81%	*	*	*	*	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	96%	*	*	*	*	96%

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	77%	83%	*	*	*	*	78%	
Q13. Patient was definitely told sensitively that they had cancer	80%	79%	*	*	*	*	79%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	81%	77%	*	*	*	*	79%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	84%	93%	*	*	*	*	88%	
Q16. Patient was told they could go back later for more information about their diagnosis	91%	93%	*	*	*	*	91%	

SUPPORT FROM A MAIN CONTACT PERSO	N			Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q17. Patient had a main point of contact within the care team	98%	93%	*	*	*	*	96%
Q18. Patient found it very or quite easy to contact their main contact person	81%	94%	*	*	*	*	86%
Q19. Patient found advice from main contact person was very or quite helpful	94%	95%	*	*	*	*	94%

DECIDING ON THE BEST TREATMENT				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	87%	91%	*	*	*	*	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	83%	*	*	*	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	80%	85%	*	*	*	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	58%	59%	*	*	*	*	58%

CARE PLANNING				Male/Fema	ile/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	79%	76%	*	*	*	*	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	94%	98%	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	97%	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	89%	94%	*	*	*	*	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	78%	81%	*	*	*	*	80%
Q29. Patient was offered information about how to get financial help or benefits	79%	77%	*	*	*	*	77%

HOSPITAL CARE				Male/Fema	le/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	62%	91%	*	*	*	*	73%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	64%	66%	*	*	*	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	69%	*	*	*	*	65%
Q34. Patient was always able to get help from ward staff when needed	63%	68%	*	*	*	*	64%
Q35. Patient was always able to discuss worries and fears with hospital staff	62%	67%	*	*	*	*	63%
Q36. Hospital staff always did everything they could to help the patient control pain	76%	76%	*	*	*	*	76%
Q37. Patient was always treated with respect and dignity while in hospital	82%	86%	*	*	*	*	83%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	93%	88%	*	*	*	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	80%	86%	*	*	*	*	82%

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%	86%	*	*	*	*	87%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	89%	*	*	*	*	90%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	92%	*	*	*	*	90%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	82%	92%	*	*	*	*	86%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	94%	*	*	*	*	*	88%
Q42_1. Patient completely had enough understandable nformation about progress with surgery	89%	86%	*	*	*	*	87%
Q42_2. Patient completely had enough understandable nformation about progress with chemotherapy	89%	84%	*	*	*	*	87%
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	95%	88%	*	*	*	*	91%
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	82%	80%	*	*	*	*	80%
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	87%	*	*	*	*	*	88%
Q43. Patient felt the length of waiting time at clinic and lay unit for cancer treatment was about right	74%	91%	*	*	*	*	79%

IMMEDIATE AND LONG TERM SIDE EFFECT	ΓS		Male/Female/Non-binary/Other					
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	76%	76%	*	*	*	*	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	73%	*	*	*	*	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	89%	84%	*	*	*	*	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	74%	*	*	*	*	65%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	57%	63%	*	*	*	*	59%	

SUPPORT WHILE AT HOME				Male/Fema	le/Non-bina	ry/Other	
	Female Male Non-binary Prefer to self-describe Prefer not to say Not give						All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	63%	64%	*	*	*	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	58%	50%	*	*	*	*	57%

CARE FROM YOUR GP PRACTICE				Male/Fema	le/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	39%	50%	*	*	*	*	45%
Q52. Patient has had a review of cancer care by GP practice	23%	19%	*	*	*	*	22%

LIVING WITH AND BEYOND CANCER				Male/Fema	ale/Non-bina	ry/Other	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	40%	55%	*	*	*	*	45%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	86%	82%	*	*	*	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	71%	*	*	*	*	68%

Male/Female/Non-binary/Other tables

YOUR OVERALL NHS CARE			Male/Female/Non-binary/Other						
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All		
Q56. The whole care team worked well together	97%	96%	*	*	*	*	97%		
Q57. Administration of care was very good or good	90%	89%	*	*	*	*	90%		
Q58. Cancer research opportunities were discussed with patient	48%	28%	*	*	*	*	41%		
Q59. Patient's average rating of care scored from very poor to very good	9.2	9.1	*	*	*	*	9.2		

Ethnicity tables

SUPPORT FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not given					All	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	79%	*	*	*	*	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	70%	*	*	*	*	*	70%

DIAGNOSTIC TESTS		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	90%	*	*	*	*	*	91%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	*	*	*	*	*	86%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	*	*	*	*	*	79%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	80%	*	*	*	*	*	80%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	96%	*	*	*	*	*	96%		

FINDING OUT THAT YOU HAD CANCER		Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All		
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	79%	*	*	*	*	*	78%		
Q13. Patient was definitely told sensitively that they had cancer	79%	*	*	*	*	*	79%		
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	*	*	*	*	*	79%		
Q15. Patient was definitely told about their diagnosis in an appropriate place	88%	*	*	*	*	*	88%		
Q16. Patient was told they could go back later for more information about their diagnosis	91%	*	*	*	*	*	91%		

SUPPORT FROM A MAIN CONTACT PERSO	N	Ethnicity					
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	96%	*	*	*	*	*	96%
Q18. Patient found it very or quite easy to contact their main contact person	86%	*	*	*	*	*	86%
Q19. Patient found advice from main contact person was very or quite helpful	94%	*	*	*	*	*	94%

DECIDING ON THE BEST TREATMENT				Ethr	nicity		
	White	Mixed	Asian	Black	Other	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	90%	*	*	*	*	*	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	*	*	*	*	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	82%	*	*	*	*	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	58%	*	*	*	*	*	58%

Ethnicity tables

CARE PLANNING	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	78%	*	*	*	*	*	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	*	*	*	*	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	98%	*	*	*	*	*	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	90%	*	*	*	*	*	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	79%	*	*	*	*	*	80%
Q29. Patient was offered information about how to get financial help or benefits	79%	*	*	*	*	*	77%

HOSPITAL CARE	Ethnicity									
	White	Mixed	Asian	Black	Other	Not given	All			
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	74%	*	*	*	*	*	73%			
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	64%	*	*	*	*	*	65%			
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	64%	*	*	*	*	*	65%			
Q34. Patient was always able to get help from ward staff when needed	65%	*	*	*	*	*	64%			
Q35. Patient was always able to discuss worries and fears with hospital staff	64%	*	*	*	*	*	63%			
Q36. Hospital staff always did everything they could to help the patient control pain	75%	*	*	*	*	*	76%			
Q37. Patient was always treated with respect and dignity while in hospital	83%	*	*	*	*	*	83%			
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	90%	*	*	*	*	*	90%			
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	*	*	*	*	*	82%			

Ethnicity tables

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

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	76%	*	*	*	*	*	75%		
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	71%	*	*	*	*	*	71%		
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	87%	*	*	*	*	*	88%		
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	66%	*	*	*	*	*	65%		
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	59%	*	*	*	*	*	59%		

SUPPORT WHILE AT HOME	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	63%	*	*	*	*	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	57%	*	*	*	*	*	57%

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White Mixed Asian Black Other Not					Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	*	*	*	*	*	45%
Q52. Patient has had a review of cancer care by GP practice	22%	*	*	*	*	*	22%

Ethnicity tables

LIVING WITH AND BEYOND CANCER			Ethnicity							
	White	Mixed	Asian	Black	Other	Not given	All			
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	45%	*	*	*	*	*	45%			
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	85%	*	*	*	*	*	84%			
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	68%	*	*	*	*	*	68%			

YOUR OVERALL NHS CARE			Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All		
Q56. The whole care team worked well together	96%	*	*	*	*	*	97%		
Q57. Administration of care was very good or good	89%	*	*	*	*	*	90%		
Q58. Cancer research opportunities were discussed with patient	40%	*	*	*	*	*	41%		
Q59. Patient's average rating of care scored from very poor to very good	9.1	*	*	*	*	*	9.2		

IMD quintile tables

SUPPORT FROM YOUR GP PRACTICE	IMD Quintile						
						Non- England	All
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	88%	73%	76%	80%	88%	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	50%	68%	72%	66%	96%	*	70%

DIAGNOSTIC TESTS				IMD Quinti	le		
	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	92%	92%	91%	85%	95%	*	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	80%	95%	83%	82%	86%	*	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	79%	77%	78%	90%	*	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	92%	73%	83%	76%	81%	*	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	97%	95%	98%	96%	95%	*	96%

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	86%	79%	85%	68%	70%	*	78%	
Q13. Patient was definitely told sensitively that they had cancer	81%	79%	77%	82%	74%	*	79%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	92%	67%	81%	78%	85%	*	79%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	87%	96%	84%	85%	*	88%	
Q16. Patient was told they could go back later for more information about their diagnosis	97%	93%	89%	88%	86%	*	91%	

SUPPORT FROM A MAIN CONTACT PERSO)N IMD				IMD Quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All	
Q17. Patient had a main point of contact within the care team	97%	98%	96%	92%	100%	*	96%	
Q18. Patient found it very or quite easy to contact their main contact person	85%	84%	87%	86%	92%	*	86%	
Q19. Patient found advice from main contact person was very or quite helpful	88%	97%	98%	91%	96%	*	94%	

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	97%	79%	91%	93%	88%	*	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	78%	87%	82%	78%	78%	*	81%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	79%	84%	88%	86%	62%	*	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	79%	54%	63%	48%	*	*	58%

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	62%	81%	78%	86%	69%	*	77%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	100%	90%	100%	93%	100%	*	95%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	100%	97%	100%	95%	*	*	98%

SUPPORT FROM HOSPITAL STAFF			IMD Quintile						
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All		
Q27. Staff provided the patient with relevant information on available support	94%	88%	95%	90%	84%	*	91%		
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	81%	80%	84%	73%	81%	*	80%		
Q29. Patient was offered information about how to get financial help or benefits	86%	74%	72%	81%	69%	*	77%		

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	75%	75%	78%	71%	*	*	73%	
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	50%	68%	79%	60%	*	*	65%	
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	50%	70%	67%	70%	*	*	65%	
Q34. Patient was always able to get help from ward staff when needed	55%	75%	59%	65%	*	*	64%	
Q35. Patient was always able to discuss worries and fears with hospital staff	42%	70%	63%	71%	*	*	63%	
Q36. Hospital staff always did everything they could to help the patient control pain	82%	75%	75%	80%	*	*	76%	
Q37. Patient was always treated with respect and dignity while in hospital	92%	80%	83%	78%	*	*	83%	
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	92%	95%	88%	85%	*	*	90%	
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	94%	82%	85%	75%	73%	*	82%	

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	91%	92%	82%	82%	88%	*	87%		
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	100%	86%	79%	93%	91%	*	90%		
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	93%	88%	89%	89%	93%	*	90%		
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	85%	81%	94%	79%	91%	*	86%		
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	88%		
Q42_1. Patient completely had enough understandable information about progress with surgery	91%	95%	79%	77%	94%	*	87%		
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	91%	86%	79%	90%	91%	*	87%		
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	93%	96%	78%	94%	93%	*	91%		
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	92%	79%	76%	79%	82%	*	80%		
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	*	*	*	*	*	*	88%		
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	86%	73%	78%	77%	92%	*	79%		

MMEDIATE AND LONG TERM SIDE EFFECTS					/ID 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	81%	74%	80%	69%	71%	*	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	79%	73%	72%	65%	67%	*	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	93%	89%	86%	87%	84%	*	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	75%	63%	70%	64%	50%	*	65%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	63%	58%	64%	58%	50%	*	59%	

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	71%	64%	63%	65%	53%	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	53%	52%	60%	65%	*	*	57%

CARE FROM YOUR GP PRACTICE			IMD Quintile					
	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	46%	46%	40%	41%	56%	*	45%	
Q52. Patient has had a review of cancer care by GP practice	24%	17%	17%	24%	33%	*	22%	

Cancer Patient Experience Survey 2022 Blackpool Teaching Hospitals NHS Foundation Trust

IMD quintile tables

LIVING 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	27%	*	45%	*	*	*	45%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	88%	83%	81%	91%	75%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	69%	73%	74%	66%	52%	*	68%

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	97%	98%	98%	91%	100%	*	97%
Q57. Administration of care was very good or good	92%	90%	94%	84%	92%	*	90%
Q58. Cancer research opportunities were discussed with patient	39%	43%	31%	56%	30%	*	41%
Q59. Patient's average rating of care scored from very poor to very good	9.3	9.1	9.2	9.1	9.3	*	9.2

SUPPORT FROM YOUR GP PRACTICE	Long term condition status				
	Yes No Not given A				
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	80%	79%	*	79%	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	69%	75%	*	70%	

DIAGNOSTIC TESTS		Long term condition status		
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	90%	92%	100%	91%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	85%	89%	82%	86%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	78%	81%	80%	79%
Q8. Diagnostic test results were explained in a way the patient could completely understand	79%	83%	82%	80%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	95%	98%	100%	96%

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	79%	75%	77%	78%
Q13. Patient was definitely told sensitively that they had cancer	79%	80%	69%	79%
Q14. Cancer diagnosis explained in a way the patient could completely understand	80%	79%	62%	79%
Q15. Patient was definitely told about their diagnosis in an appropriate place	86%	90%	92%	88%
Q16. Patient was told they could go back later for more information about their diagnosis	90%	94%	83%	91%

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	98%	93%	100%	96%	
Q18. Patient found it very or quite easy to contact their main contact person	85%	88%	92%	86%	
Q19. Patient found advice from main contact person was very or quite helpful	91%	98%	100%	94%	

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	88%	91%	83%	89%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	81%	83%	75%	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%	75%	82%
Q23. Patient could get further advice or a second opinion before making decisions about their treatment options	57%	59%	*	58%

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	75%	83%	58%	77%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	95%	95%	*	95%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	97%	100%	*	98%	

SUPPORT FROM HOSPITAL STAFF				
	Yes	No	Not given	All
Q27. Staff provided the patient with relevant information on available support	86%	97%	100%	91%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	76%	86%	92%	80%
Q29. Patient was offered information about how to get financial help or benefits	76%	83%	*	77%

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	66%	96%	*	73%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	61%	74%	*	65%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	60%	79%	*	65%
Q34. Patient was always able to get help from ward staff when needed	57%	83%	*	64%
Q35. Patient was always able to discuss worries and fears with hospital staff	56%	83%	*	63%
Q36. Hospital staff always did everything they could to help the patient control pain	68%	95%	*	76%
Q37. Patient was always treated with respect and dignity while in hospital	76%	100%	*	83%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	88%	96%	*	90%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	82%	84%	69%	82%

YOUR TREATMENT Long term condition status					
	Yes	No	Not given	All	
Q41_1. Beforehand patient completely had enough understandable information about surgery	86%	89%	*	87%	
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	90%	88%	*	90%	
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	91%	90%	*	90%	
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	87%	85%	*	86%	
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	92%	83%	*	88%	
Q42_1. Patient completely had enough understandable information about progress with surgery	87%	89%	*	87%	
Q42_2. Patient completely had enough understandable information about progress with chemotherapy	86%	88%	*	87%	
Q42_3. Patient completely had enough understandable information about progress with radiotherapy	95%	90%	*	91%	
Q42_4. Patient completely had enough understandable information about progress with hormone therapy	79%	85%	*	80%	
Q42_5. Patient completely had enough understandable information about progress with immunotherapy	91%	83%	*	88%	
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	79%	82%	69%	79%	

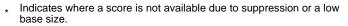
IMMEDIATE AND LONG TERM SIDE EFFECTS Long term condition status					
	Yes	No	Not given	All	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	72%	83%	62%	75%	
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	70%	76%	58%	71%	
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	85%	91%	*	88%	
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	63%	72%	55%	65%	
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	58%	63%	55%	59%	

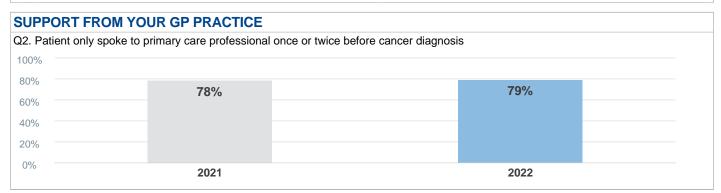
SUPPORT WHILE AT HOME	Long term condition status			
	Yes	No	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	58%	73%	70%	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	46%	76%	*	57%

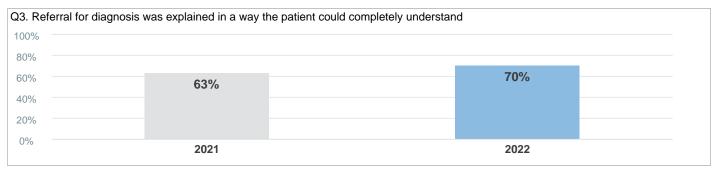
CARE FROM YOUR GP PRACTICE	Long term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	44%	44%	*	45%
Q52. Patient has had a review of cancer care by GP practice	20%	23%	31%	22%

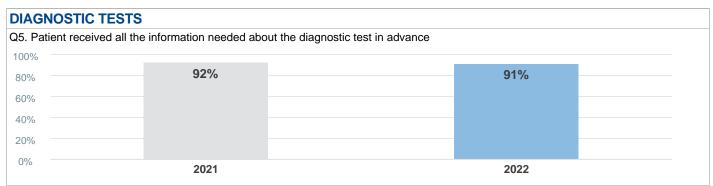
LIVING WITH AND BEYOND CANCER	G WITH AND BEYOND CANCER Long term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	42%	*	*	45%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	82%	89%	*	84%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	67%	72%	*	68%

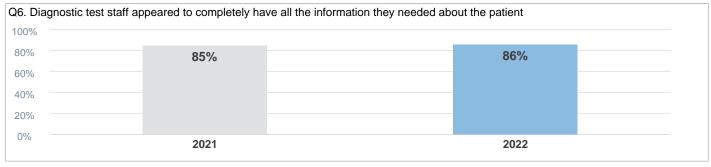
YOUR OVERALL NHS CARE				
	Yes	No	Not given	All
Q56. The whole care team worked well together	96%	97%	100%	97%
Q57. Administration of care was very good or good	93%	84%	92%	90%
Q58. Cancer research opportunities were discussed with patient	38%	45%	*	41%
Q59. Patient's average rating of care scored from very poor to very good	9.1	9.3	9.3	9.2

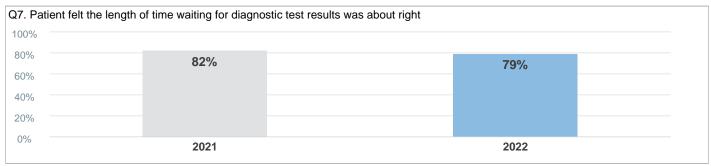


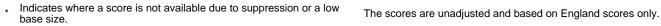


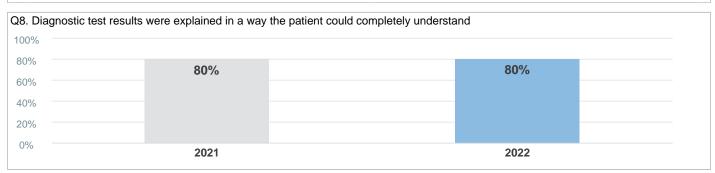


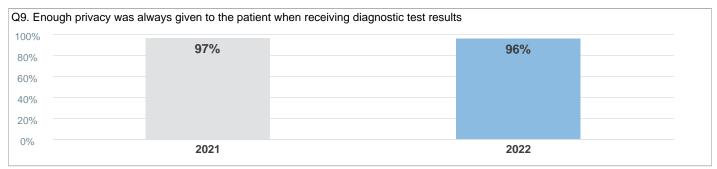


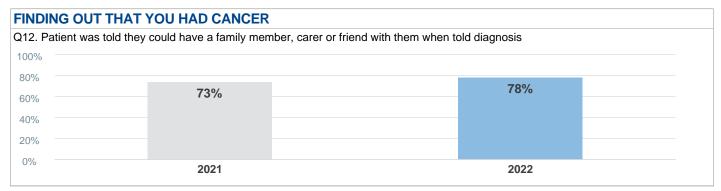


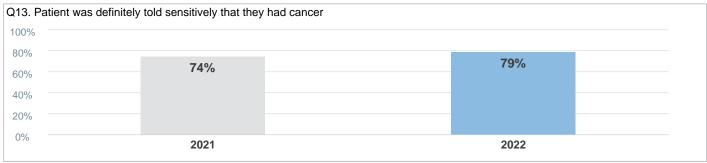


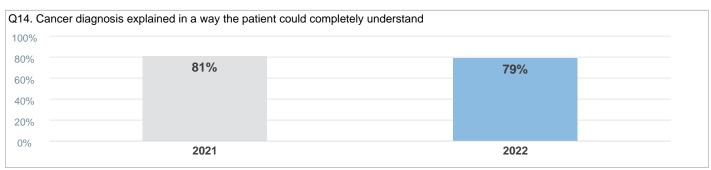


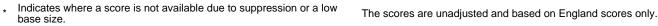




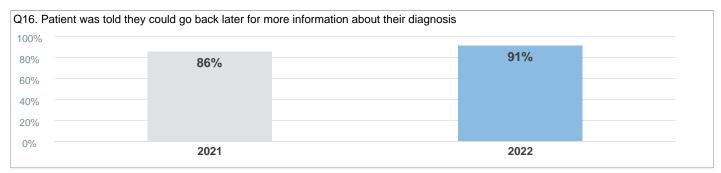








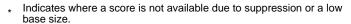


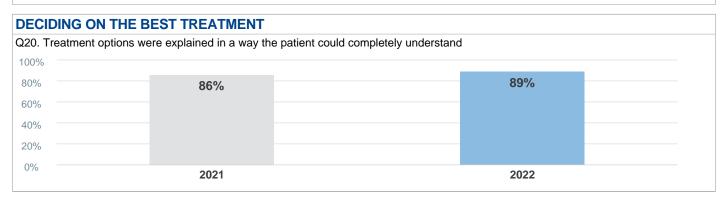




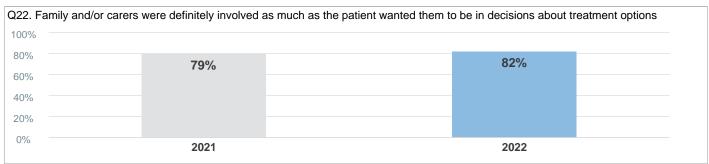




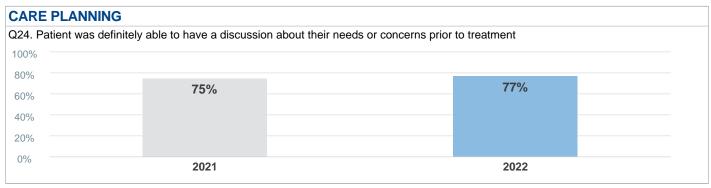


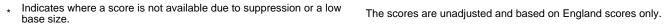


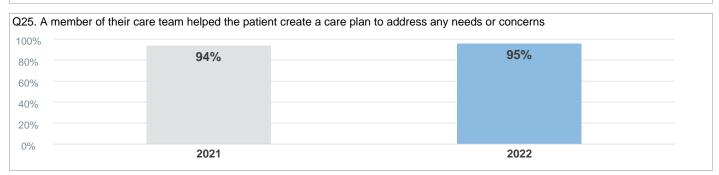




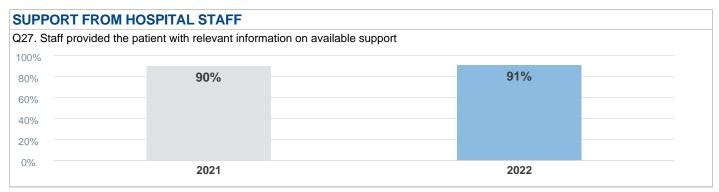


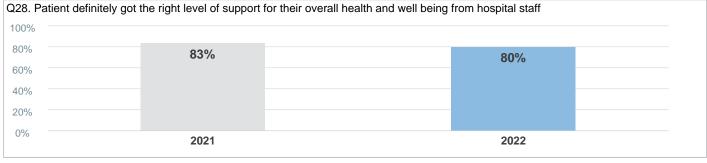




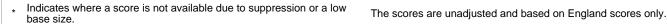


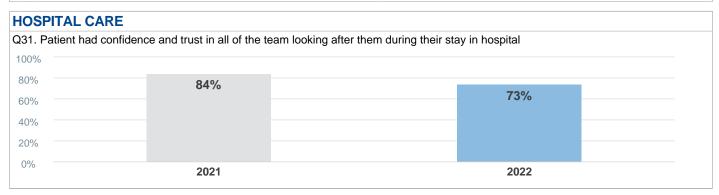




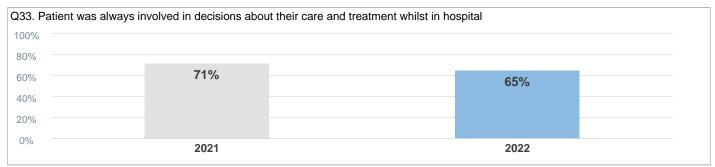




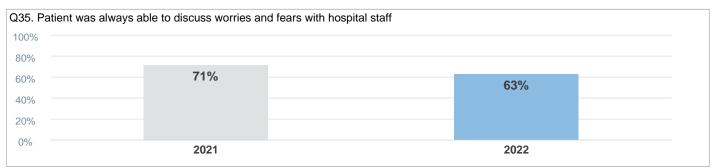


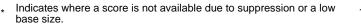


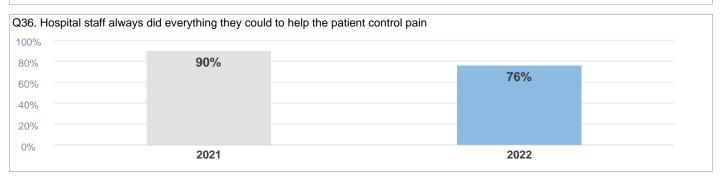


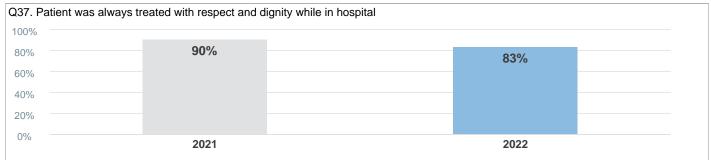




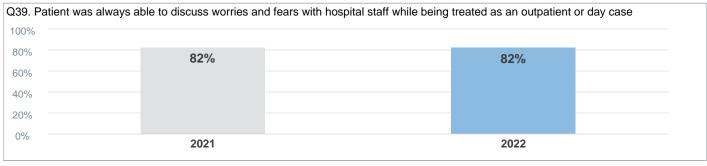


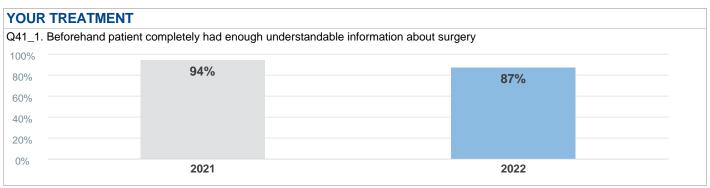


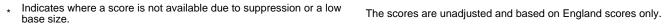


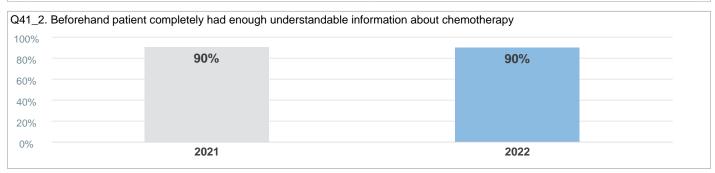


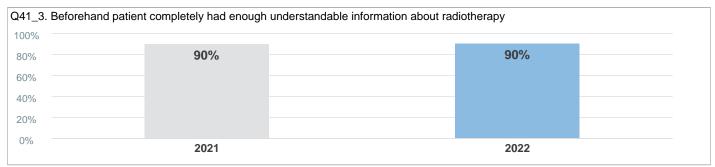


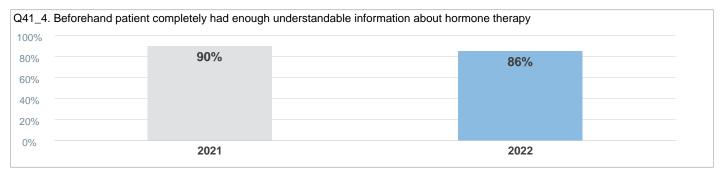


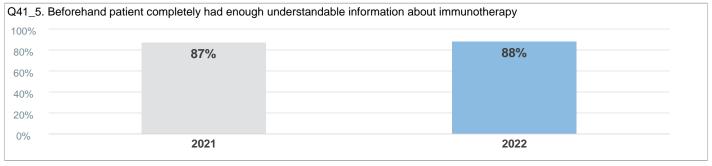


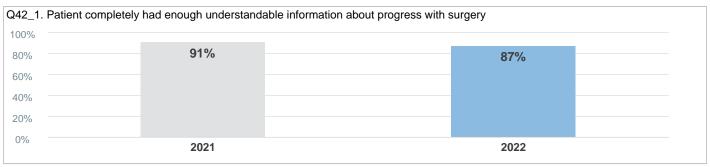


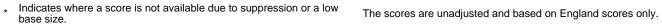


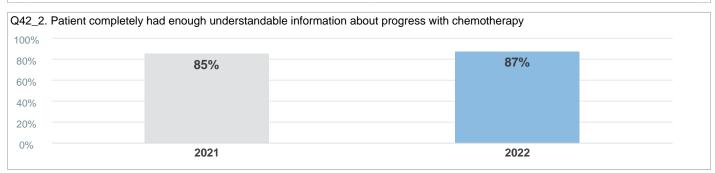


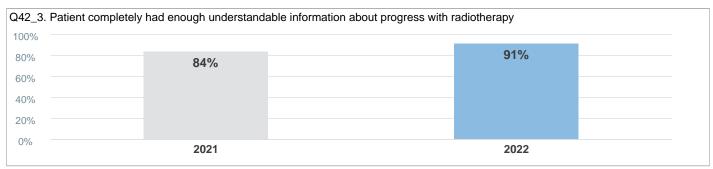


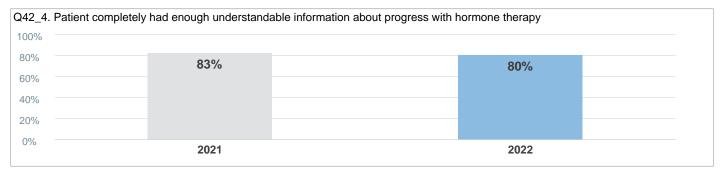


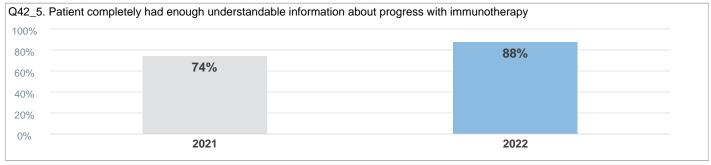




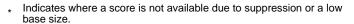


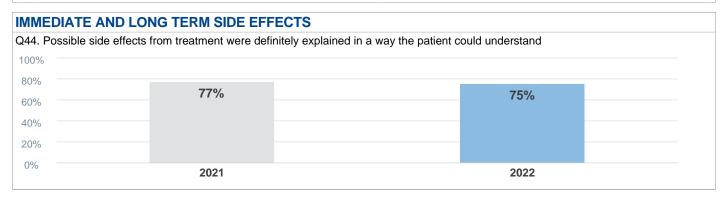




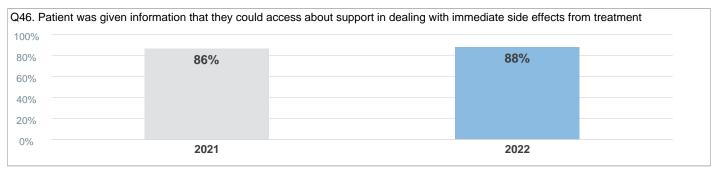


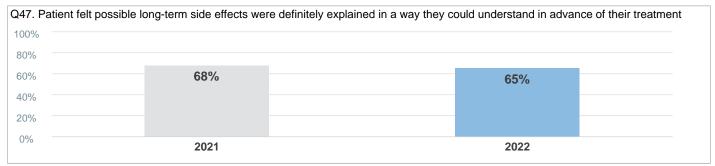




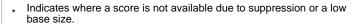


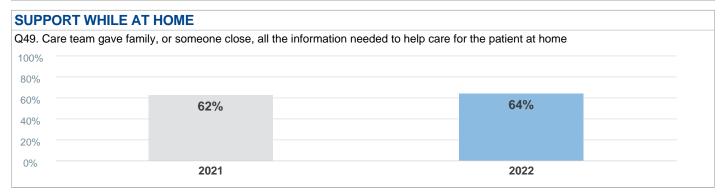


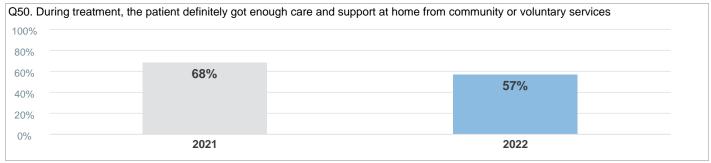


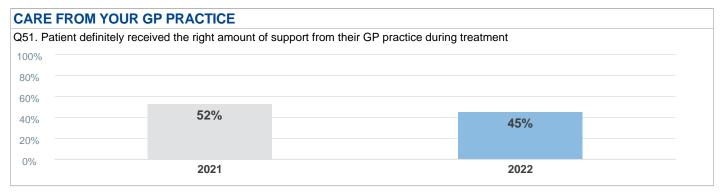




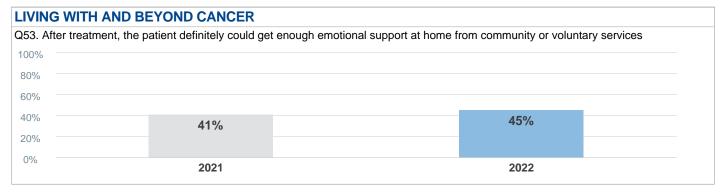


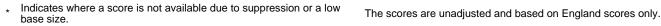


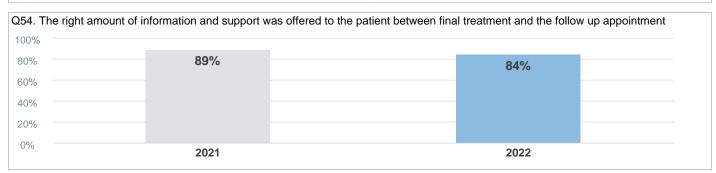


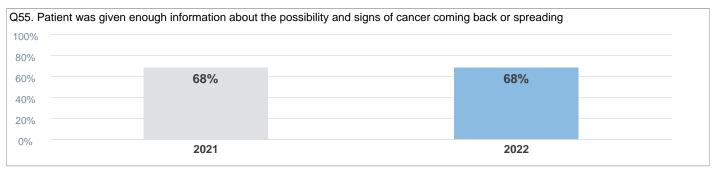


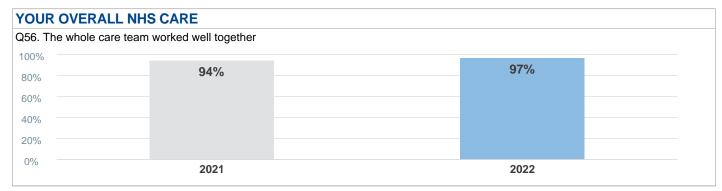




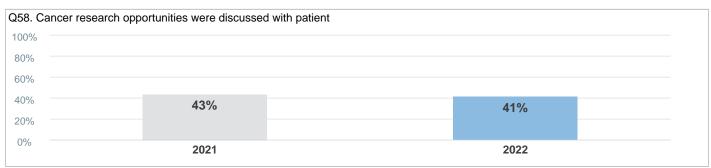












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