

National Cancer Patient Experience Survey

2024 Results

Homerton Healthcare NHS Foundation Trust

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Executive summary

Questions above expected range

Homerton Healthcare NHS Foundation Trust has no scores above expected range.

Executive summary

Executive Summary	Case	Case mix adjusted scores						
Questions below expected range	2024 score	Lower expected range	Upper expected range	National score				
Q07. Patient felt the length of time waiting for diagnostic test results was about right	52%	55%	100%	77%				
Q14. Cancer diagnosis explained in a way the patient could completely understand	51%	56%	98%	77%				
Q15. Patient was definitely told about their diagnosis in an appropriate place	54%	68%	100%	86%				
Q42_1. Patient completely had enough understandable information about their response to surgery	67%	68%	100%	87%				
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	50%	53%	97%	75%				

Introduction

The National Cancer Patient Experience Survey 2024 is the fourteenth iteration of the survey first undertaken in 2010. It has been designed to monitor progress on cancer care; to provide information to drive local quality improvements; to assist commissioners and providers of cancer care; and to inform the work of the various charities and stakeholder groups supporting cancer patients.

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

The 2024 survey involved 131 NHS trusts. Out of 127,021 people, 64,055 people responded to the survey, yielding a response rate of 50%.

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 2024. The fieldwork for the survey was undertaken between November 2024 and February 2025.

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

Note on question comparability

The questionnaire was redeveloped for the 2021 National Cancer Patient Experience Survey. Year on year comparisons between 2021, 2022, 2023 and 2024 are included in this report for most questions. There were three changes to the questionnaire over the last two years:

- In 2023 the question text for Q23 and Q42 were amended. These questions are no longer deemed comparable to 2021 and 2022. Data is only comparable for 2023 and 2024.
- In 2023 the long-term condition question (Q67) was amended to include "Autism or autism spectrum condition" as a response option. And the "Neurological condition" answer option was updated to include an example condition changing it to "Neurological condition, such as epilepsy". These changes see the answer option "Neurological condition, such as epilepsy" as no longer being deemed comparable to 2021 and 2022. Data is only comparable for 2023 and 2024.
- In 2023 the ethnic group question (Q71) was amended to include "Roma" as an answer option. The ethnic group question is still deemed comparable to 2021 and 2022. Data for the answer option is only available for 2023 and 2024.

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 'Which of the following best describes you?', age, ethnicity, deprivation, and cancer type.

Unadjusted data should be used to see the actual responses from patients relating to the trust. 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.

How trust results are derived

Trust results are derived using the NHS trust where each patient received cancer related treatment. Trust results are presented at the 'National' level, meaning results include patients with addresses in England and elsewhere in the UK. Some patients may receive care at a trust which is not near to where they live.

Scoring methodology

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

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

The full scoring for all questions at a trust level is available in the trust Excel tables available at www.ncpes.co.uk. Excel tables are also available at a national, ICB and Cancer Alliance level.

Statistical significance

In the reporting of 2024 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 2023 and 2024 unadjusted scores for this trust for each scored question. The Change 2023-2024 and Change overall columns show whether the scores show a statistically significant variation between years. This is shown between 2023-2024 and as an overall between 2021-2024. An upwards arrow indicates a statistically significant increase, a downwards arrow indicates a statistically significant decrease, and no arrow indicates no statistically significant change.

The adjusted 2024 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.

Subgroup breakdowns

Unadjusted scores are shown for tumour group, 'Which of the following best describes you?', age, IMD quintile, long-term condition status and ethnicity breakdowns. Unadjusted scores for the same subgroup across different trusts may not be comparable, as they do not account for the impact that differing patient populations might have on results.

Tumour group tables

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

Age group tables

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

'Which of the following best describes you?'

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

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 four columns representing the unadjusted scores of the last four years (2021, 2022, 2023 and 2024) for each scored question.

National level and England level data

In some cases (389 respondents in 2024), patients from outside England (from Wales, Scotland, Northern Ireland, the Channel Islands or the Isle of Man) are referred to English NHS trusts for treatment. These patients are described as 'Non-England' in the data.

National level data (England and Non-England) is used for:

- Response rate section
- National column in comparability tables section
- Subgroup tables section (Tumour group tables, Age group tables, 'Which of the following best describes you?', Ethnicity tables, IMD quintile tables and Long-term condition status tables).

England only level data is used for:

- Expected range charts section (as case mix adjustment includes IMD data specific to England)
- · Comparability tables section
- Year on year charts section.

Further information

This research was carried out in accordance with the international standard for organisations conducting market and social research (accreditation to ISO20252:2019; certificate number GB08/74322). Our statistical practice is regulated by the Office for Statistics Regulation (OSR). OSR sets the standards of trustworthiness, quality, and value in the Code of Practice for Statistics that all producers of official statistics should adhere to. You are welcome to contact us directly with any comments about how we meet these standards. Alternatively, you can contact OSR by emailing regulation@statistics.gov.uk or via the OSR website.

The 2024 questionnaire and survey guidance can be found on the website at www.ncpes.co.uk, and more information on the methodology in the Technical Document can be viewed 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

15 patients responded out of a total of 54 patients, resulting in a response rate of 28%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	54	54	15	28%
National	135,429	127,021	64,055	50%

Respondents by survey type

	Number of respondents
Paper	9
Online	6
Phone	0
Translation service	0
Total	15

Respondents by tumour group

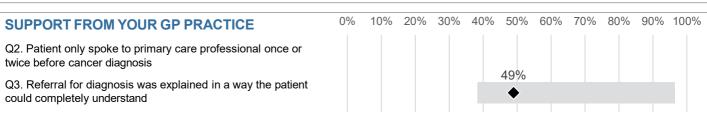
	Number of respondents
Brain / CNS	0
Breast	*
Colorectal / LGT	6
Gynaecological	*
Haematological	0
Head and neck	*
Lung	0
Prostate	0
Sarcoma	0
Skin	0
Upper gastro	0
Urological	*
Other	0
Total	15

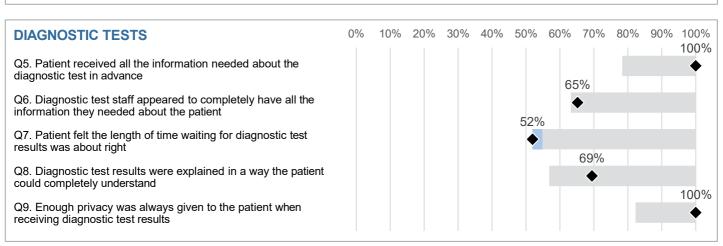
Respondents by ethnicity

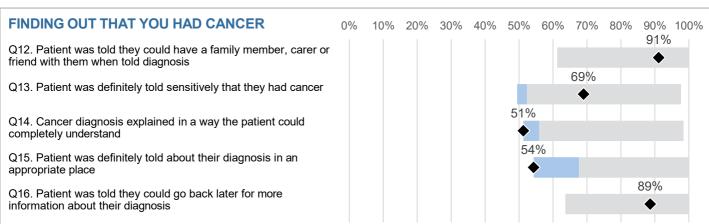
	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	5
Irish	*
Gypsy or Irish Traveller	*
Roma	*
Any other White background	*
Mixed / Multiple Ethnic Groups	
White and Black Caribbean	*
White and Black African	*
White and Asian	*
Any other Mixed / multiple ethnic background	*
Asian or Asian British	'
Indian	*
Pakistani	*
Bangladeshi	*
Chinese	*
Any other Asian background	*
Black / African / Caribbean / Black British	
African	*
Caribbean	*
Any other Black / African / Caribbean background	*
Other Ethnic Group	<u>'</u>
Arab	*
Any other ethnic group	*
Not given	
Not given	*
Total	15

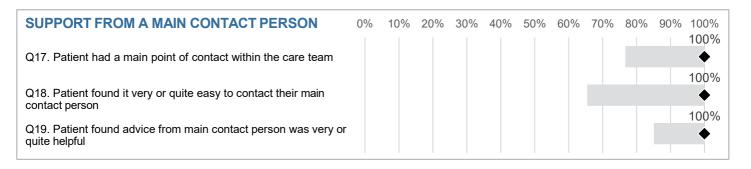
Expected range charts











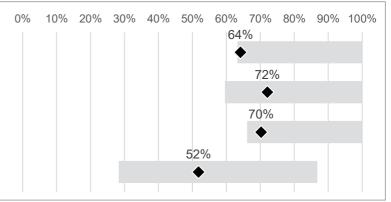
Expected range charts



The left outer edge of the bars is the lowest score achieved of all trusts. The right outer edge of the bars is the highest score achieved of all trusts.

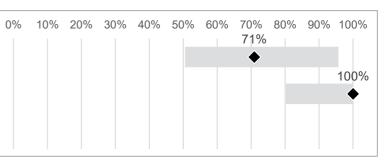
DECIDING ON THE BEST TREATMENT

- Q20. Treatment options were explained in a way the patient could completely understand
- Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment
- Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options
- Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options



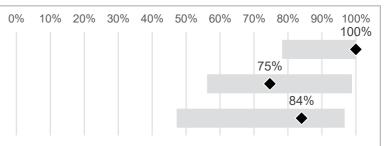
CARE PLANNING

- Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment
- Q25. A member of their care team helped the patient create a care plan to address any needs or concerns
- Q26. Care team reviewed the patient's care plan with them to ensure it was up to date



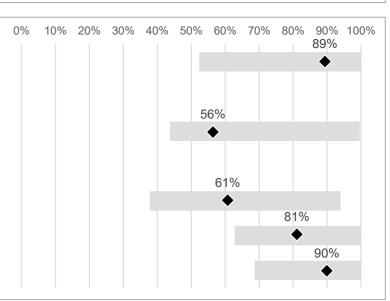
SUPPORT FROM HOSPITAL STAFF

- Q27. Staff provided the patient with relevant information on available support
- Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff
- Q29. Patient was offered information about how to get financial help or benefits



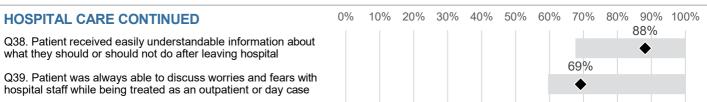
HOSPITAL CARE

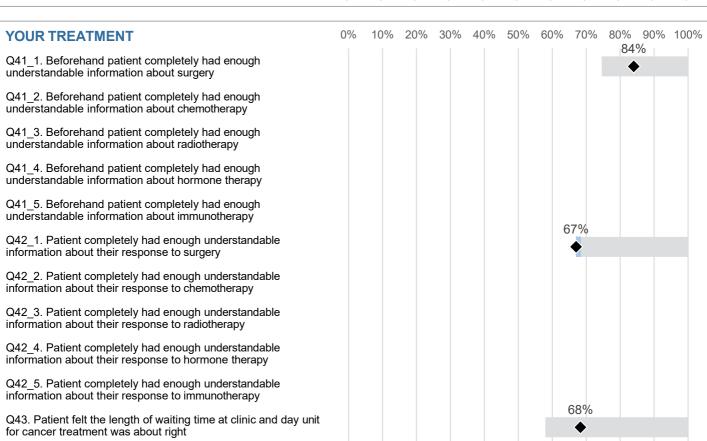
- Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital
- Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital
- Q33. Patient was always involved in decisions about their care and treatment whilst in hospital
- Q34. Patient was always able to get help from ward staff when
- Q35. Patient was always able to discuss worries and fears with hospital staff
- Q36. Hospital staff always did everything they could to help the patient control pain
- Q37. Patient was always treated with respect and dignity while in hospital

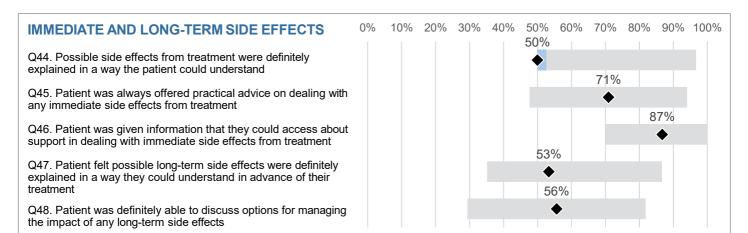


Expected range charts



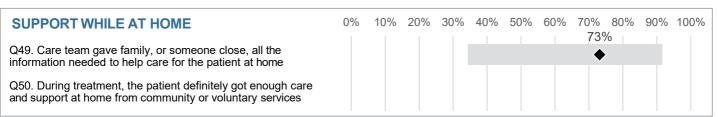


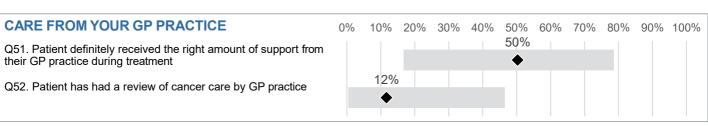


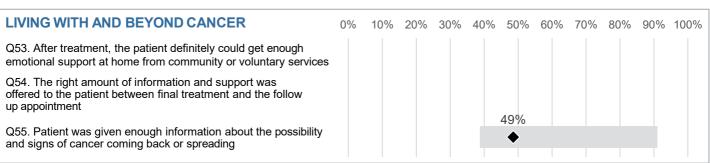


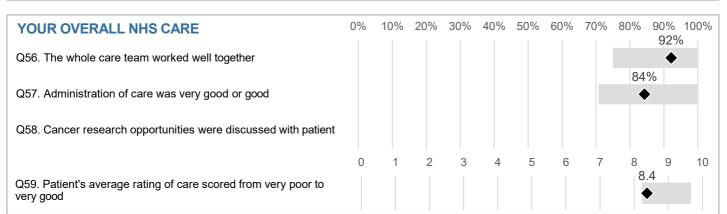
Expected range charts











Comparability tables

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

Change 2023-2024: Indicates where 2024 score is significantly higher or lower than 2023 score.

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

- No score available.

Change overall: Indicates significant change overall (2021, 2022, 2023 and 2024).

SUPPORT FROM YOUR GP PRACTICE			Unadjus	ted score	Case n					
	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*			*	*	*	79%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	12	75%	10	50%			49%	38%	96%	67%

			Unadjus	ted score	Case n					
DIAGNOSTIC TESTS	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q5. Patient received all the information needed about the diagnostic test in advance	11	91%	13	100%			100%	78%	100%	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	13	62%			65%	63%	100%	83%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	11	73%	13	54%	•		52%	55%	100%	77%
Q8. Diagnostic test results were explained in a way the patient could completely understand	11	73%	13	69%			69%	57%	100%	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	11	91%	13	100%		A	100%	82%	100%	95%

			Unadjust	ted score	Case n					
FINDING OUT THAT YOU HAD CANCER	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 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	15	73%	12	92%		A	91%	61%	100%	83%
Q13. Patient was definitely told sensitively that they had cancer	16	88%	14	71%			69%	52%	98%	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	16	88%	15	53%			51%	56%	98%	77%
Q15. Patient was definitely told about their diagnosis in an appropriate place	16	94%	14	57%	•	•	54%	68%	100%	86%
Q16. Patient was told they could go back later for more information about their diagnosis	15	87%	11	91%			89%	64%	100%	85%

			Unadjust	ted score	Case n					
SUPPORT FROM A MAIN CONTACT PERSON	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q17. Patient had a main point of contact within the care team	15	87%	14	100%		A	100%	77%	100%	91%
Q18. Patient found it very or quite easy to contact their main contact person	12	92%	14	100%			100%	65%	100%	85%
Q19. Patient found advice from main contact person was very or quite helpful	12	100%	14	100%			100%	85%	100%	96%

Comparability tables

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

Change 2023-2024: Indicates where 2024 score is significantly higher or lower than 2023 score.

Adjusted score below lower expected range

- No score available.

Change overall: Indicates significant change overall (2021, 2022, 2023 and 2024).

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

			Unadjust	ed score	Case n					
DECIDING ON THE BEST TREATMENT	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q20. Treatment options were explained in a way the patient could completely understand	13	92%	14	64%			64%	63%	100%	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	15	73%	14	71%			72%	60%	100%	80%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	11	100%	14	64%	•		70%	66%	100%	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	12	42%	11	55%			52%	28%	87%	58%

			Unadjust	ed score	Case m					
CARE PLANNING	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 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	14	79%	15	73%			71%	51%	96%	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	11	91%	12	100%			100%	80%	100%	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*			*	*	*	99%

			Unadjust	ed score	s		Case m	nix adjuste		
SUPPORT FROM HOSPITAL STAFF	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q27. Staff provided the patient with relevant information on available support	16	81%	14	100%			100%	78%	100%	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	16	81%	15	73%			75%	56%	99%	78%
Q29. Patient was offered information about how to get financial help or benefits	12	33%	13	85%			84%	47%	97%	72%

Comparability tables

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

Change 2023-2024: Indicates where 2024 score is significantly higher or lower than 2023 score.

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

- No score available.

Change overall: Indicates significant change overall (2021, 2022, 2023 and 2024).

Adjusted score above upper expected range

			Unadjust	ted score	es		Case n	nix adjuste	ed scores	
HOSPITAL CARE	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 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	*	*	10	90%			89%	52%	100%	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*			*	*	*	71%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	10	60%			56%	44%	100%	72%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*			*	*	*	74%
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	11	64%			61%	38%	94%	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	11	82%			81%	63%	100%	84%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	11	91%			90%	69%	100%	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	11	91%			88%	68%	100%	87%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	14	79%	15	67%			69%	60%	100%	80%

			Unadjust	ted score	s		Case n	nix adjuste	d scores	
YOUR TREATMENT	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	Nationa score
Q41_1. Beforehand patient completely had enough understandable information about surgery	12	83%	14	86%	A		84%	75%	100%	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*			*	*	*	86%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*			*	*	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*			*	*	*	80%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*			*	*	*	84%
Q42_1. Patient completely had enough understandable information about their response to surgery	13	85%	13	69%			67%	68%	100%	87%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*			*	*	*	82%
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*			*	*	*	85%
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*			*	*	*	77%
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*			*	*	*	81%
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	16	75%	15	67%	•		68%	58%	100%	79%

Comparability tables

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

- No score available.

Change 2023-2024: Indicates where 2024 score is significantly higher or lower than 2023 score. ▲ or ▼

Change overall: Indicates significant change overall (2021, 2022, 2023 and 2024).

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

expected range

Unadjusted scores Case mix adjusted scores **IMMEDIATE AND LONG-TERM SIDE EFFECTS** National Change 2023-Lower Upper Change 2024 2023 2023 2024 2024 expected expected score score score overall score 2024 range range Q44. Possible side effects from treatment were definitely 15 80% 15 53% 50% 53% 97% 75% explained in a way the patient could understand Q45. Patient was always offered practical advice on dealing 14 64% 15 73% 71% 48% 94% 71% with any immediate side effects from treatment Q46. Patient was given information that they could access 90% 70% 100% 88% 10 85% 87% about support in dealing with immediate side effects from 13 treatment Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in 16 75% 14 57% 53% 35% 87% 61% advance of their treatment Q48. Patient was definitely able to discuss options for 15 73% 14 57% 56% 29% 82% 56% managing the impact of any long-term side effects

			Unadjust	ed score	s		Case n	nix adjuste	d scores	
SUPPORT WHILE AT HOME	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 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	14	57%	11	73%			73%	34%	92%	63%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*			*	*	*	53%

			Unadjust	ed score	s		Case m	nix adjuste	d scores	
CARE FROM YOUR GP PRACTICE	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q51. Patient definitely received the right amount of support from their GP practice during treatment	10	60%	10	50%			50%	17%	79%	48%
Q52. Patient has had a review of cancer care by GP practice	15	27%	13	15%	•		12%	0%	47%	23%

			Unadjust	ed score	s		Case m	nix adjuste	d scores	
LIVING WITH AND BEYOND CANCER	2023 n	2023 score	2024 n	2024 score	Change 2023-2024	Change overall	2024 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	*	*	*	*			*	*	*	34%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	12	92%	*	*			*	*	*	81%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	15	73%	13	46%			49%	39%	91%	65%

Comparability tables

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

Change 2023-2024: Indicates where 2024 score is significantly higher or lower than 2023 score.

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

- No score available.

Change overall: Indicates significant change overall (2021, 2022, 2023 and 2024).

Adjusted score above upper expected range

			Unadjust	ed score	s		Case n	nix adjuste	d scores	
YOUR OVERALL NHS CARE	2023 n	2023 score	2024 n	2024 score	Change 2023- 2024	Change overall	2024 score	Lower expected range	Upper expected range	National score
Q56. The whole care team worked well together	16	100%	14	93%	•		92%	75%	100%	90%
Q57. Administration of care was very good or good	16	88%	15	87%	•		84%	71%	100%	88%
Q58. Cancer research opportunities were discussed with patient	10	60%	*	*			*	*	*	46%
Q59. Patient's average rating of care scored from very poor to very good	17	8.8	15	8.3			8.4	8.2	9.7	8.9

SUPPORT FROM YOUR GP PRACTICE						Т	umou	r grou	p					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	₽
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	50%

DIAGNOSTIC TESTS						Т	umou	r grou	р					
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	100%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	*	*	*	*	*	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	*	*	*	*	*	54%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	*	*	*	*	*	100%

FINDING OUT THAT YOU HAD CANCER						Т	umou	r grou	p					
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	92%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	*	*	*	*	*	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	53%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	*	*	*	*	*	57%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSON	1					Т	umou	r grou	p					
	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%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	*	*	*	*	*	100%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	*	*	*	*	*	100%

DECIDING ON THE BEST TREATMENT						Т	umou	r grou	p					
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	64%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	71%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	*	*	*	*	*	64%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	*	*	*	*	*	55%

CARE PLANNING						Т	umou	r grou	р					
	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%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	*	*	*	*	*	100%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	*	*	*	*	*	*

SUPPORT FROM HOSPITAL STAFF						Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	₽
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	*	*	*	*	*	*	*	100%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	*	*	*	*	*	85%

HOSPITAL CARE						Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	₽
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	90%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	60%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	*	*	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	*	*	*	*	*	82%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	91%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	*	*	*	*	*	67%

YOUR TREATMENT						Т	umou	r grou	p					
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	*	*	*	*	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	*	*	*	*	*	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECT	S					Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	₹
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	*	*	*	*	*	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	*	*	*	*	*	57%

SUPPORT WHILE AT HOME						Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	ΙΨ
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	*	*	*	*	*	*	*	73%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	*	*

CARE FROM YOUR GP PRACTICE						Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	*	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	*	*	*	*	*	15%

LIVING WITH AND BEYOND CANCER						Т	umou	r grou	p					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	ΙΙ
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	*	*	*	*	*	46%

YOUR OVERALL NHS CARE						Т	umou	r grou	р					
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	ΙΨ
Q56. The whole care team worked well together	*	*	*	*	*	*	*	*	*	*	*	*	*	93%
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	*	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	*	*	*	*	*	8.3

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	*	*	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	50%

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	*	*	*	*	*	*	*	*	100%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	*	*	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	*	*	54%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	*	*	100%

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	*	*	*	*	*	*	*	*	92%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	53%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	57%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSON	UPPORT FROM A MAIN CONTACT PERSON					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%		
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	100%		
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	100%		

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	*	*	*	*	*	*	*	*	64%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	*	*	71%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	*	*	64%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	*	*	55%

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	*	*	*	*	*	*	*	*	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	*	*	100%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	*	*

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%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	*	*	85%

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	*	*	*	*	*	*	*	*	90%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*	*	*
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	*	*	60%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*	*	*
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	*	*	82%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	91%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	67%

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	*	*	*	*	*	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECT	S				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	*	*	*	*	*	*	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*	*	57%

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%	
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	

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	*	*	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	*	*	15%

LIVING WITH AND BEYOND CANCER	NG 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	*	*	*	*	*	*	*	*	*				
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	*	*				
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	*	*	46%				

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	*	*	*	*	*	*	*	*	93%
Q57. Administration of care was very good or good	*	*	*	*	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*	*	8.3

SUPPORT FROM YOUR GP PRACTICE		V	Vhich of the	following be	st describes	you?	
	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	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	50%

DIAGNOSTIC TESTS		Which of the following best describes you?							
	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	*	*	*	*	*	*	100%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	62%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	54%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	69%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	100%		

FINDING OUT THAT YOU HAD CANCER		1	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	92%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	53%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	57%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSON	l	Which of the following best describes you?							
	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	*	*	*	*	*	*	100%		
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	100%		
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	100%		

DECIDING ON THE BEST TREATMENT		\	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	64%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	71%
Q22. Family and/or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	64%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	55%

CARE PLANNING		١	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	73%
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	100%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*

SUPPORT FROM HOSPITAL STAFF		1	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	100%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	73%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	85%

HOSPITAL CARE		1	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	90%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	60%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	82%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	91%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	67%

YOUR TREATMENT		١	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable nformation about their response to radiotherapy	*	*	*	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable nformation about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECTS	S	\	Which of the	following be	st describes	you?	
	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	*	*	*	*	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	57%

SUPPORT WHILE AT HOME		V	Vhich of the	following be	st describes	you?	
	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	*	*	*	*	*	*	73%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*

CARE FROM YOUR GP PRACTICE		V	Vhich of the	following be	st describes	you?	
	Female Male Non-binary Prefer to self-describe Prefer not to say						
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	15%

LIVING WITH AND BEYOND CANCER		V	Which of the following best describes you?						
	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	*	*	*	*	*	*	*		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	46%		

'Which of the following best describes you?' tables

YOUR OVERALL NHS CARE		\	Which of the	following be	st describes	you?	
	Female	Male	Non- binary	Prefer to self- describe	Prefer not to say	Not given	All
Q56. The whole care team worked well together	*	*	*	*	*	*	93%
Q57. Administration of care was very good or good	*	*	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	8.3

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	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	50%

DIAGNOSTIC TESTS	Ethnicity								
	White	Mixed	Asian	Black	Other	Not given	All		
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*	*	*	100%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	62%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	54%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	69%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	100%		

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	*	*	*	*	*	*	92%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	71%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	53%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	57%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	91%

SUPPORT FROM A MAIN CONTACT PERSON	l			Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	100%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	100%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	100%

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	*	*	*	*	*	*	64%		
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	71%		
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	64%		
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	55%		

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	*	*	*	*	*	*	73%	
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	100%	
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*	

SUPPORT FROM HOSPITAL STAFF		Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All	
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	100%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	73%	
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	85%	

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	*	*	*	*	*	*	90%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	60%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	82%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	91%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	67%

YOUR TREATMENT				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECTS	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	*	*	*	*	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	57%

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	*	*	*	*	*	*	73%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*

CARE FROM YOUR GP PRACTICE	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	15%

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	*	*	*	*	*	*	*		
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*		
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	46%		

YOUR OVERALL NHS CARE				Ethnicity			
	White	Mixed	Asian	Black	Other	Not given	All
Q56. The whole care team worked well together	*	*	*	*	*	*	93%
Q57. Administration of care was very good or good	*	*	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	8.3

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	*	*	*	*	*	*	*
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*	*	*	50%

DIAGNOSTIC TESTS	IMD quintile								
	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	*	*	*	*	*	*	100%		
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*	*	62%		
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*	*	54%		
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*	*	69%		
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*	*	100%		

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	*	*	*	*	*	*	92%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	71%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	53%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	57%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	91%	

SUPPORT FROM A MAIN CONTACT PERSON	I		IME	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	*	*	*	*	*	*	100%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	100%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	100%

IMD quintile tables

DECIDING ON THE BEST TREATMENT			IME) 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	*	*	*	*	*	*	64%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*	*	*	71%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*	*	*	64%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*	*	*	55%

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	*	*	*	*	*	*	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	*	*	*	100%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*	*	*	*		

SUPPORT FROM HOSPITAL STAFF			IME) quintile				
	1 (most deprived) 2 3 4 5 (least deprived) England							
Q27. Staff provided the patient with relevant information on available support	*	*	*	*	*	*	100%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*	*	*	73%	
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*	*	*	85%	

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	*	*	*	*	*	*	90%		
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*	*	*	*		
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*	*	*	60%		
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*	*	*	*		
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	*	*	*	64%		
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*	*	*	82%		
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*	*	*	91%		
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	91%		
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	67%		

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	*	*	*	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	*	*	*	*	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECT	S		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	*	*	*	*	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	57%

SUPPORT WHILE AT HOME			IME) 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	*	*	*	*	*	*	73%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*

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	*	*	*	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	*	*	*	15%

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	*	*	*	*	*	*	*	
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*	*	*	*	
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*	*	*	46%	

YOUR OVERALL NHS CARE			IME) quintile			
	1 (most deprived)	2	3	4	5 (least deprived)	Non- England	All
Q56. The whole care team worked well together	*	*	*	*	*	*	93%
Q57. Administration of care was very good or good	*	*	*	*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	8.3

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	*	*	*	*	
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	50%	

DIAGNOSTIC TESTS		Long-term cond	ition status	
	Yes	No	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	100%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	62%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	54%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	69%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	100%

FINDING OUT THAT YOU HAD CANCER		Long-term condi	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	*	*	*	92%	
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	71%	
Q14. Cancer diagnosis explained in a way the patient could completely understand	50%	*	*	53%	
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	57%	
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	91%	

SUPPORT FROM A MAIN CONTACT PERSON				
	Yes	No	Not given	All
Q17. Patient had a main point of contact within the care team	*	*	*	100%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	100%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	100%

DECIDING ON THE BEST TREATMENT		Long-term condi	tion status	
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	64%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	71%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	60%	*	*	64%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	55%

CARE PLANNING	Long-term condition status					
	Yes	Yes No Not given	All			
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	80%	*	*	73%		
Q25. A member of their care team helped the patient create a care plan to address any needs or concerns	*	*	*	100%		
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*		

SUPPORT FROM HOSPITAL STAFF	Long-term condition status				
	Yes	No	Not given	All	
Q27. Staff provided the patient with relevant information on available support	*	*	*	100%	
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	70%	*	*	73%	
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	85%	

HOSPITAL CARE		Long-term cond	lition 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	*	*	*	90%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	60%
Q34. Patient was always able to get help from ward staff when needed	*	*	*	*
Q35. Patient was always able to discuss worries and fears with hospital staff	*	*	*	64%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	82%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	91%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	91%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	60%	*	*	67%

YOUR TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	86%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	69%
Q42_2. Patient completely had enough understandable information about their response to chemotherapy	*	*	*	*
Q42_3. Patient completely had enough understandable information about their response to radiotherapy	*	*	*	*
Q42_4. Patient completely had enough understandable information about their response to hormone therapy	*	*	*	*
Q42_5. Patient completely had enough understandable information about their response to immunotherapy	*	*	*	*
Q43. Patient felt the length of waiting time at clinic and day unit for cancer treatment was about right	60%	*	*	67%

IMMEDIATE AND LONG-TERM SIDE EFFECTS	3	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	50%	*	*	53%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	80%	*	*	73%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	85%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	60%	*	*	57%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	57%

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	*	*	*	73%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*

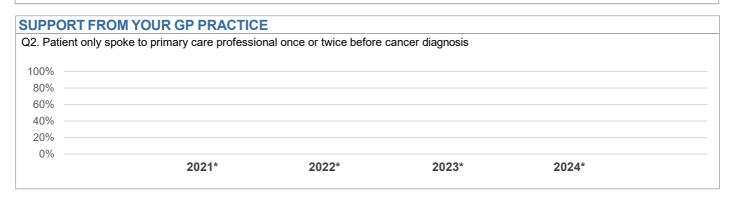
CARE FROM YOUR GP PRACTICE	Long-term condition status			
	Yes	No	Not given	All
Q51. Patient definitely received the right amount of support from their GP practice during treatment	*	*	*	50%
Q52. Patient has had a review of cancer care by GP practice	*	*	*	15%

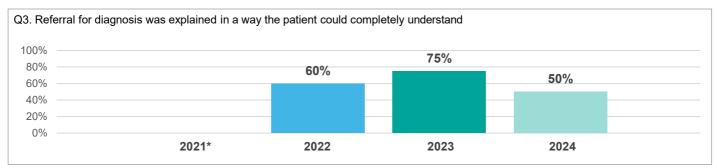
LIVING WITH AND BEYOND CANCER	Long-term condition status			
	Yes	No	Not given	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*
Q54. The right amount of information and support was offered to the patient between final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

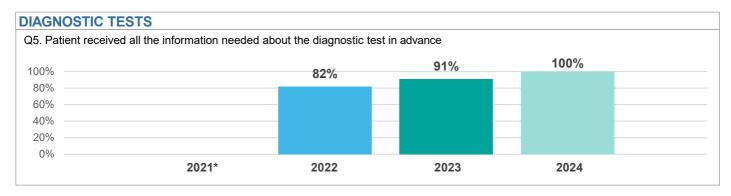
YOUR OVERALL NHS CARE	Long-term condition status			
	Yes	No	Not given	All
Q56. The whole care team worked well together	*	*	*	93%
Q57. Administration of care was very good or good	80%	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	7.9	*	*	8.3

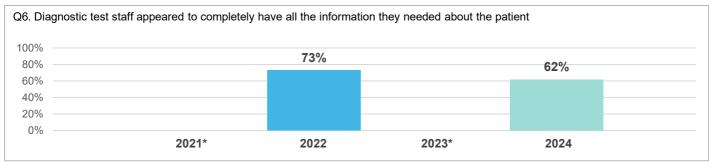
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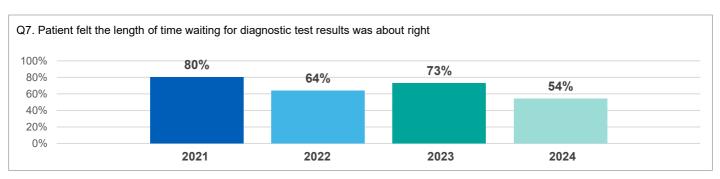
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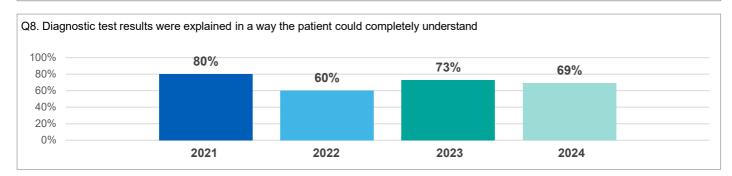


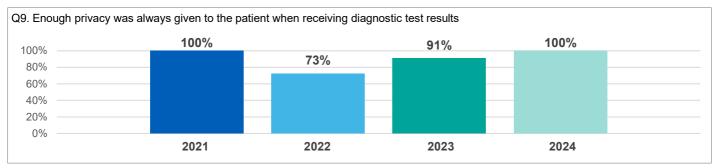


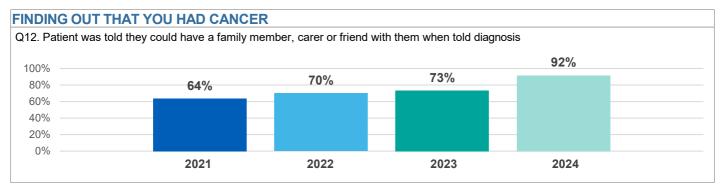


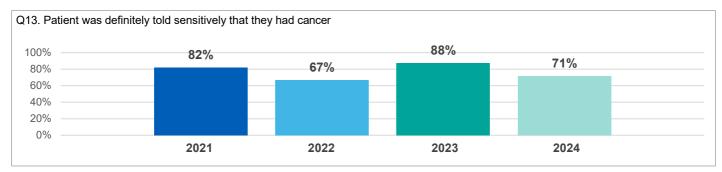
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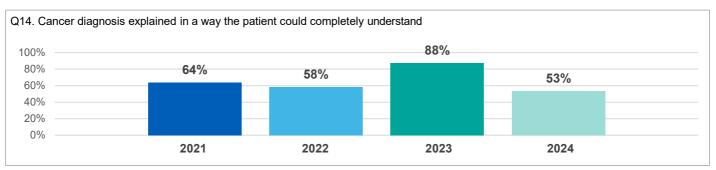
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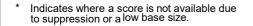




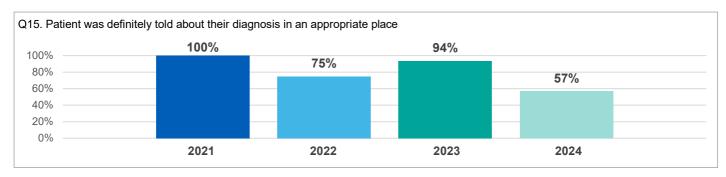


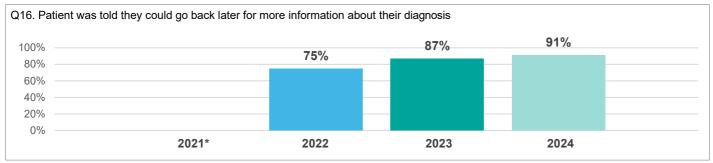


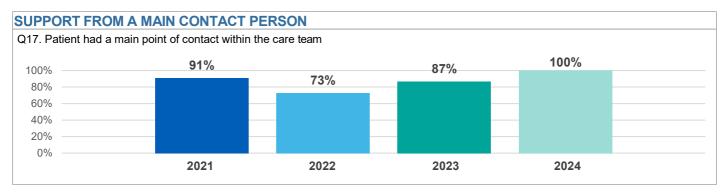
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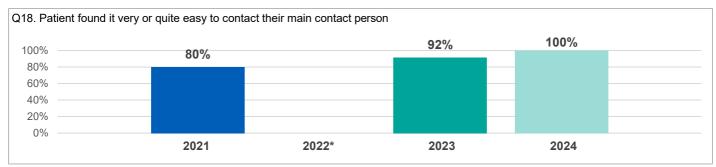


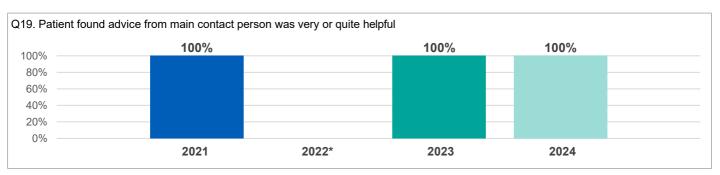




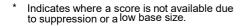




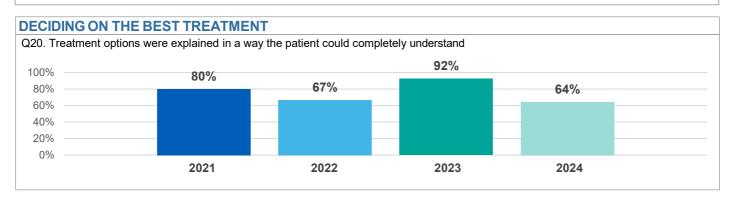


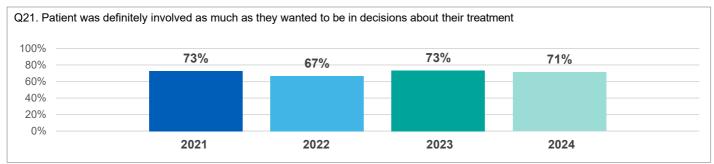


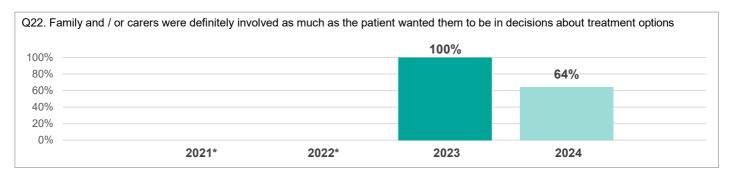
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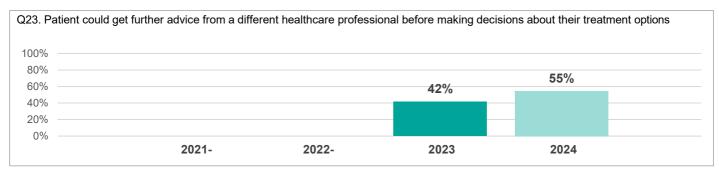


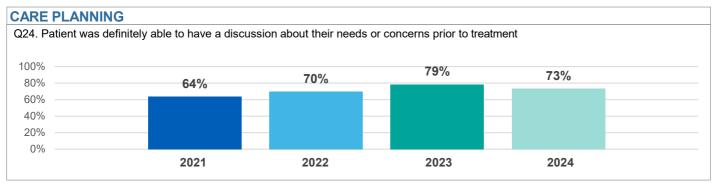
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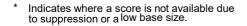




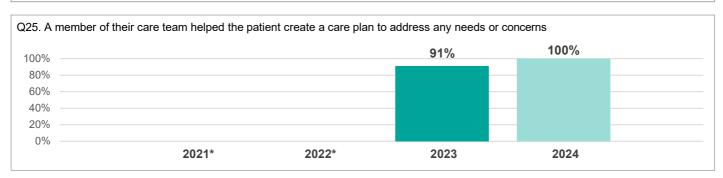


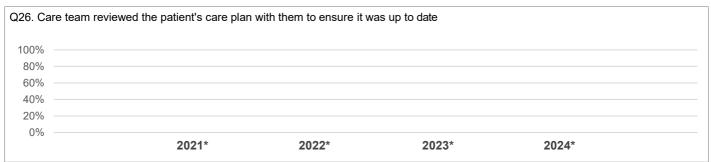


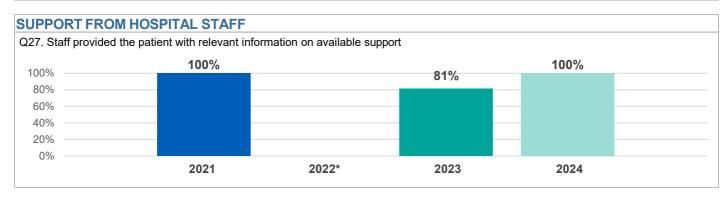
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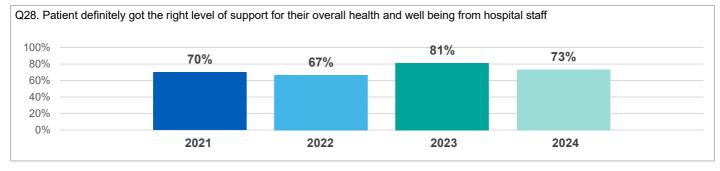


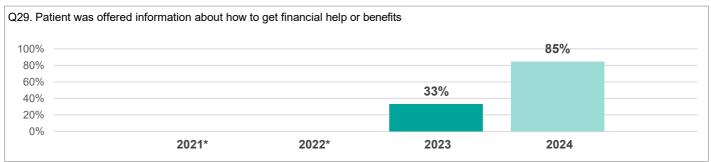




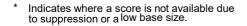




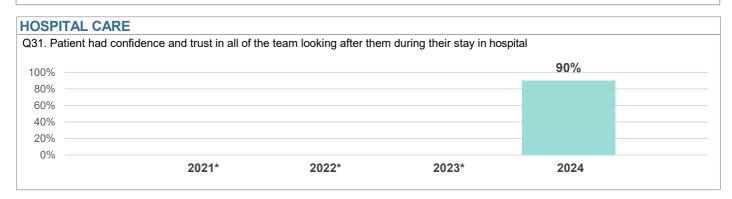


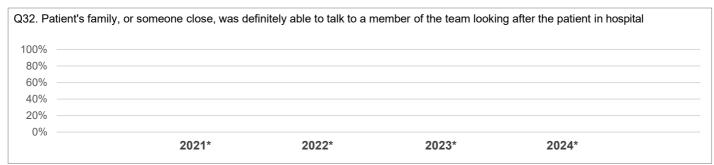


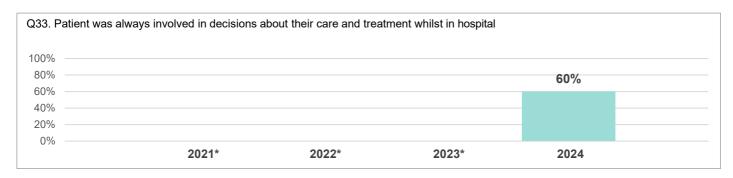
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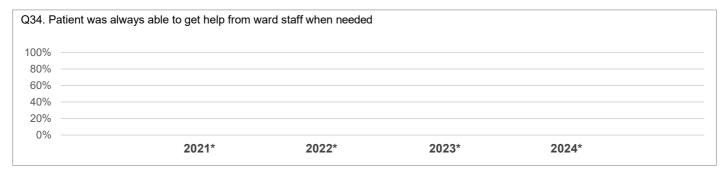






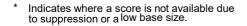




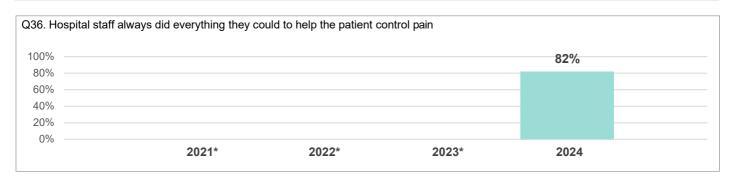


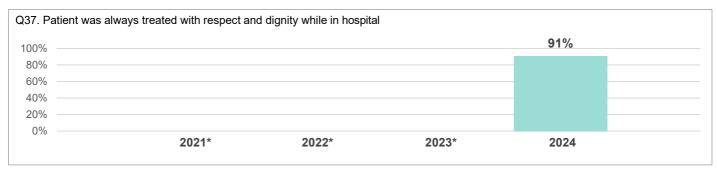


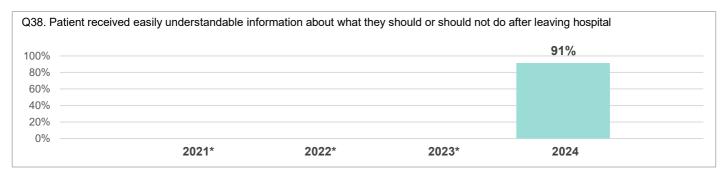
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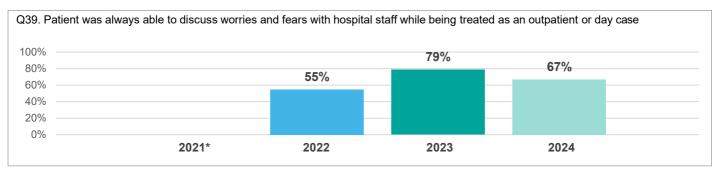


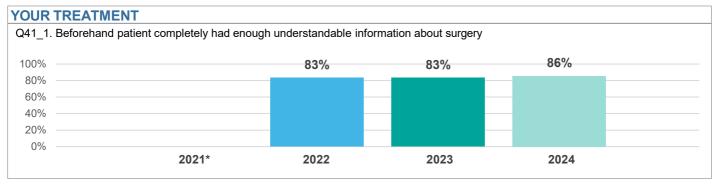






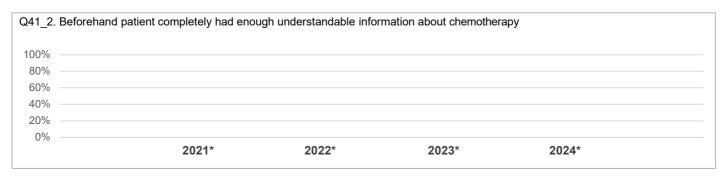


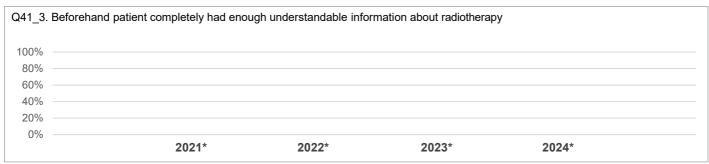


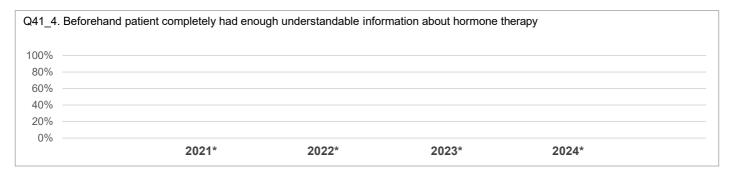


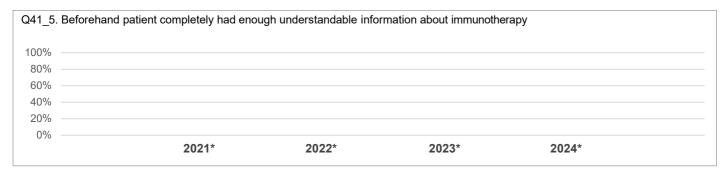
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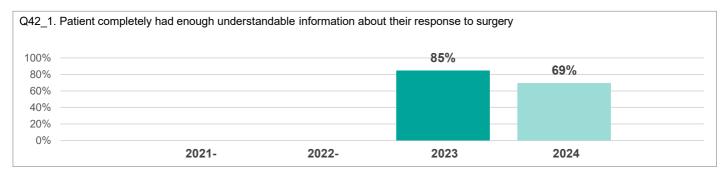
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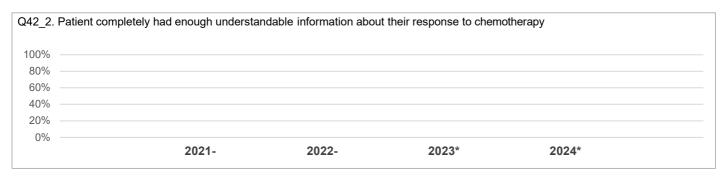


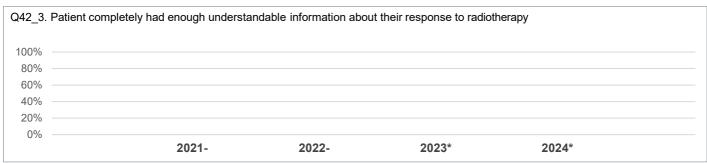


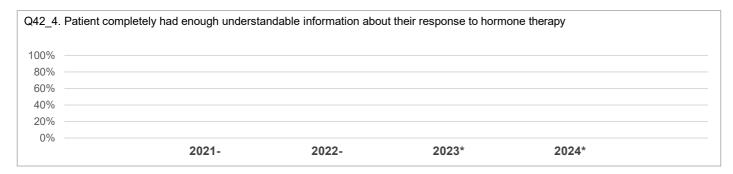


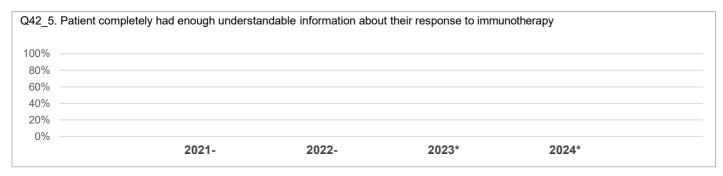
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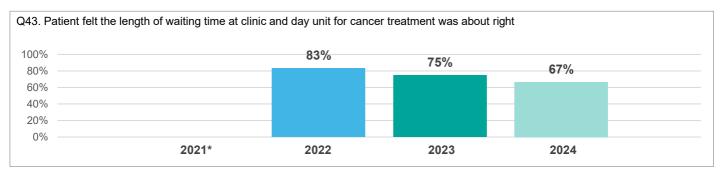
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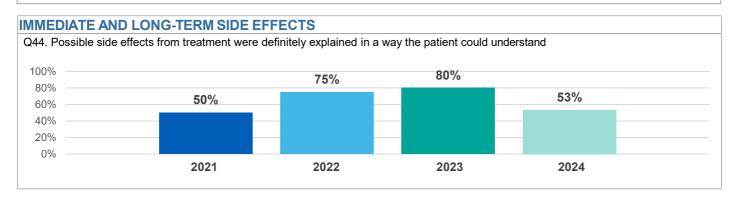


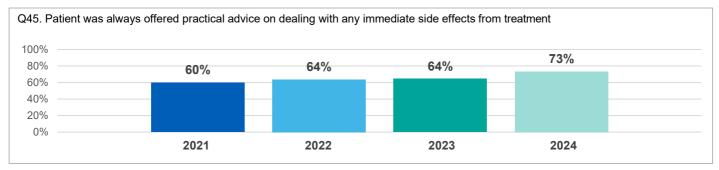


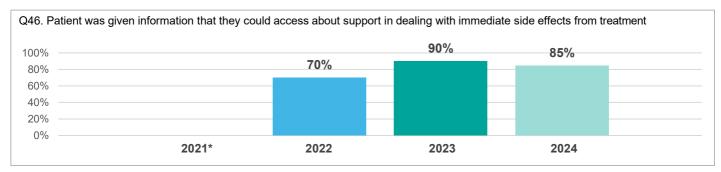


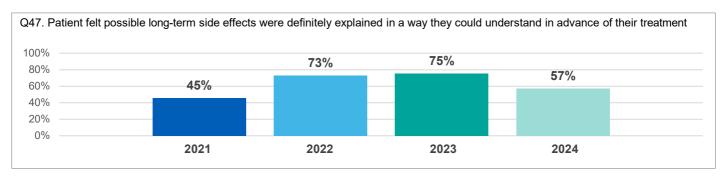
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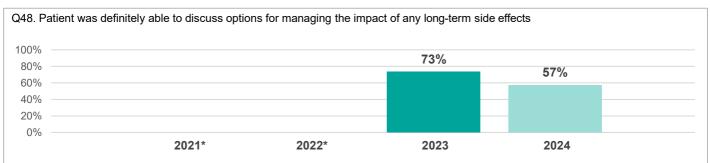
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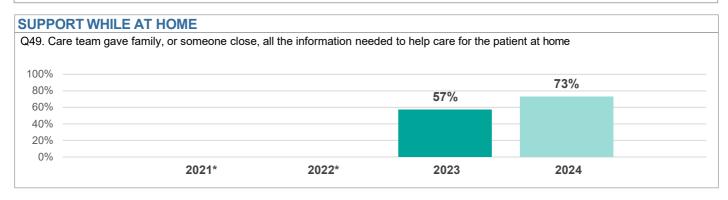


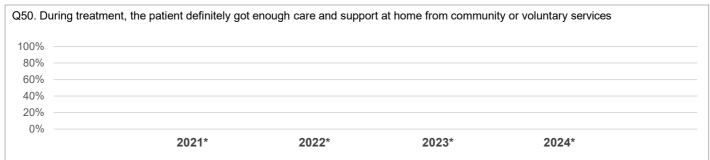


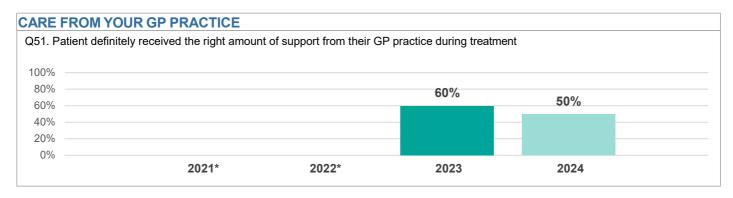


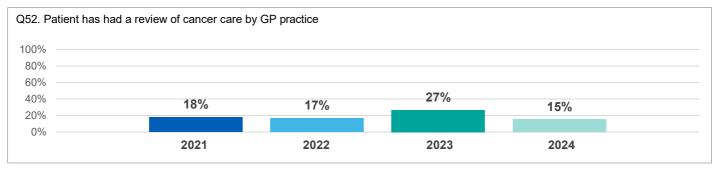
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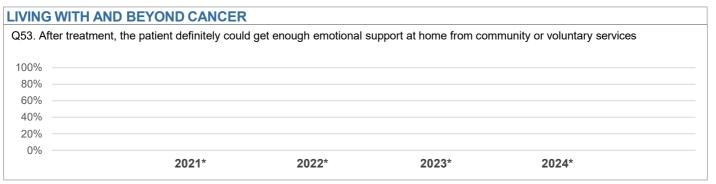
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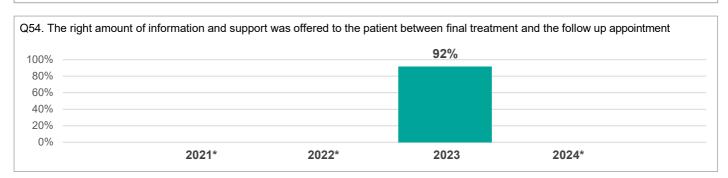


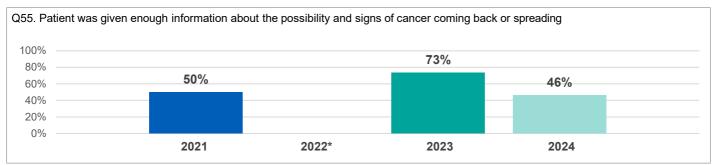


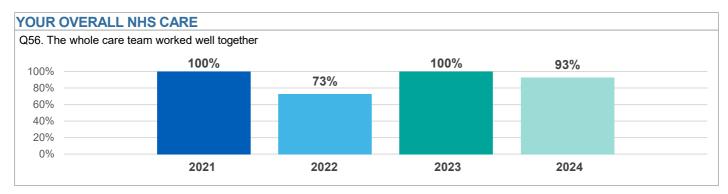


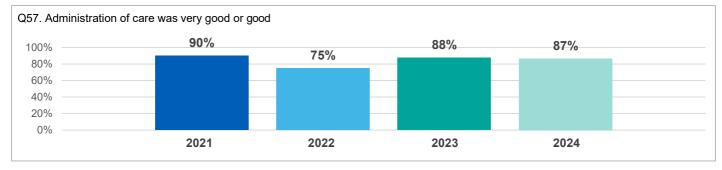
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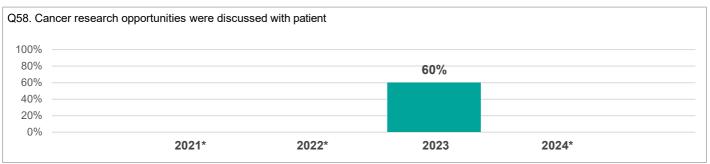
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Year on year charts

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