

National Cancer Patient Experience Survey

2024 Results Webinar



Agenda

	Time	Item	
1	10:00-10:05	Introduction and housekeeping	Jane Winter, NHS England
2	10:05-10:15	Opening statement	Neil Churchill, NHS England
3	10:15-10:25	The lived experience perspective	Arlene Honeyman, Patient and Public Voice Partner
4	10:25-11:55	NCPES 2024 results	Zoe Oliver, NHS England
5	10:55-11:05	Use of free text data	Estelle Phillips, NHS England
6	11:05-11:20	Case study: Improving patient experience and enhancing access to cancer services for people with learning disabilities	Michelle Richardson, Sherwood Forest NHS Foundation Trust
7	11:20-12:00	Panel discussion: Using the NCPES	 Emma Leatherbarrow, Wessex Cancer Alliance Jannike Nordlund, South East London Cancer Alliance Irina Belun-Vieira, King's College Hospital NHS Trust Lucy Green, Glastonbury Health Centre Jodie Moffat, NHS England
8	12:00-12:15	Q&A	Jane Winter, NHS England
9	12:15-12:25	Closing statement	Jodie Moffat, NHS England
10	12:25-12:30	Close and request for feedback	Jane Winter, NHS England



Welcome statement

Neil Churchill

Director of People and Communities NHS England





The lived experience perspective

Arlene Honeyman

Patient and Public Voice Partner





2024 results

Zoe Oliver

Quantitative Senior Analyst NHS England



Methodology

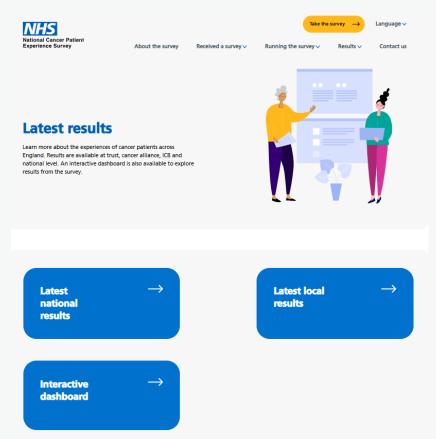
Eligibility

- All NHS patients who were:
 - Aged 16+
 - Primary diagnosis of cancer
 - Discharged from an NHS trust after an inpatient or day case attendance for cancer related treatment in April, May or June 2024.

Survey methods

- Mixed mode methods paper and online
- Questionnaires sent by post (two reminders, where necessary) with online option available
- Freephone available
- Fieldwork from November 2024 to February 2025

Accessing the results



National

- National PDF report, Excel data table, easy read report and infographic
- National qualitative report and easy read (estimated September 2025)

Local

- Trust, ICB and Cancer Alliance individual reports and Excel data tables
- Trust freetext workbooks

All

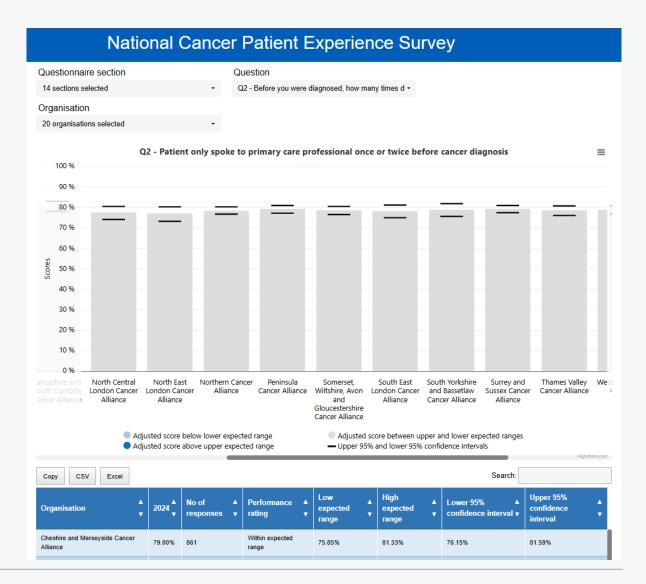
- Interactive dashboard
- Long format tables



www.ncpes.co.uk/latest-results

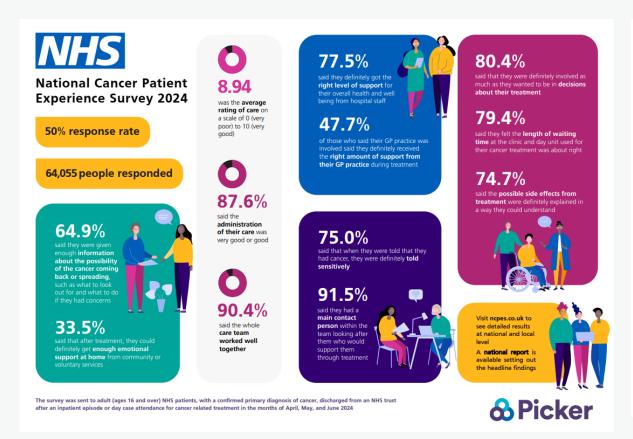
Accessing local results

Local results Use the 'Search by organisation name or code' functionality to find a specific report. You can also use the filter to narrow your search to a specific organisation type. Organisation type Search by organisation name Organisation type ICB RCF TRUST TRUST Trust Airedale NHS **Ashford And St** Airedale NHS **Peter's Hospitals Foundation Trust Foundation Trust NHS Foundation** PDF PPTX Trust PDF Download Download Download RF4 RTK RF4 TRUST TRUST TRUST **Ashford And St** Barking, Havering Barking, Havering **Peter's Hospitals And Redbridge And Redbridge NHS Foundation** University University **Hospitals NHS Hospitals NHS** Trust **Trust** Trust PPTX PDF PPTX Download



Sharing local headline findings

Infographic and infographic template





About the respondents

Subgroups include:

- Which of the following best describes you? (Male/Female/Non-Binary/Other)
- Is your gender identity the same as the sex you were registered at birth?
- Sexual orientation
- Ethnicity
- Age
- IMD quintile (Deprivation)

- Long-term condition status
- Long-term condition
- Number of long-term conditions
- Cancer spread
- Cancer outcome
- Tumour group
- Cancer type

Response rates

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

This is in comparison to a 52% response rate seen for the 2023 iteration of the survey, where 63,438 people took part.

Respondents by survey mode

Response mode	Number of respondents	Proportion of respondents [†]		
Paper	50,392	78.7%		
Online	13,618	21.3%		
Phone	35	0.1%		
Translation service	10	0.0%		
Total	64,055	100.0%		

Headline results

Positive trend in patient experience across most areas Overall, more improvement than decline over time



1-year trend (2023-2024)

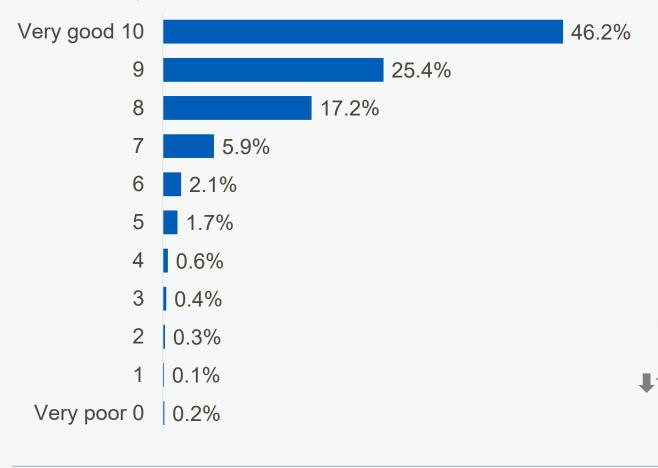
- Overall care score significantly increased
- 30/61 questions improved
- 30/61 questions were maintained
- 1 question declined

4-year trend (2021–2024)

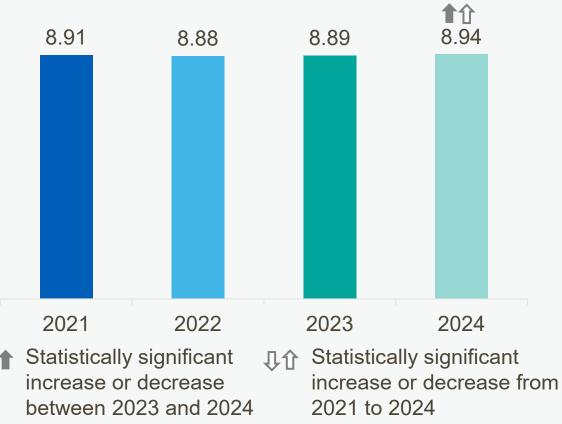
- 35 questions improved
- 15 stayed stable
- 11 declined

Overall experience

2024 results for 'Overall, how would you rate your care? (scale from 0 to 10)' (Q59)

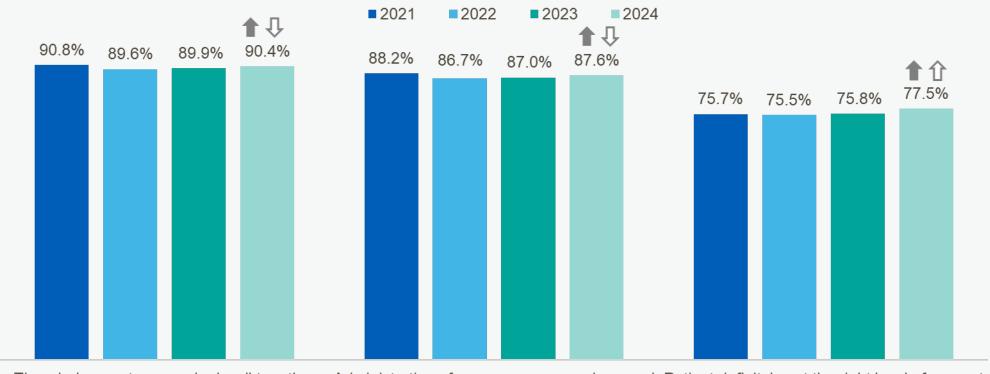


Year on year comparisons for 'Patient's average rating of care scored from very poor to very good' (Q59)



Drivers of a high overall experience score





(Q56)

The whole care team worked well together Administration of care was very good or good Patient definitely got the right level of support (Q57)for their overall health and well being from hospital staff (Q28)



Statistically significant increase or decrease between 2023 and 2024

Questions with the largest positive change (2023-2024)

The five scores with the largest positive change include:

Question	2023	2024	Change
Q29 - Patient was offered information about how to get financial help or benefits	70.1%	71.9%	+1.9pp
Q12 - Patient was told they could have a family member, carer or friend with them when told diagnosis	80.9%	82.7%	+1.8pp
Q28 - Patient definitely got the right level of support for their overall health and well being from hospital staff	75.8%	77.5%	+1.7pp
Q49 - Care team gave family, or someone close, all the information needed to help care for the patient at home	61.6%	63.0%	+1.4pp
Q59 - Patient's average rating of care scored from very poor to very good	8.89	8.94	+0.05

[†] These changes indicate a statistically significant difference at the 99% confidence level (p<0.01), as determined by the longitudinal logistic regression model or linear regression for Q59. Change 'pp' refers to percentage point change between 2023 and 2024.

Q59 is scored differently to other questions, as it is an overall experience score from 0 to 10.

Questions with the largest positive change (2021-2024):

Out of the 35 questions which significantly increased since 2021, those with the largest positive change include[†]:

Question	2021	2024	Change
Q12 - Patient was told they could have a family member, carer or friend with them	70.1%	82.7%	+12.6pp
when told diagnosis	70.170	02.7 70	· 12.0pp
Q32 - Patient's family, or someone close, was definitely able to talk to a member of	60.6%	70.8%	+10.2pp
the team looking after the patient in hospital	00.070	7 0.0 70	· 10.2pp
Q22 - Family and/or carers were definitely involved as much as the patient wanted	74.7%	84.9%	+10.2pp
them to be in decisions about treatment options		04.970	. 10.2рр
Q49 - Care team gave family, or someone close, all the information needed to help	55.4%	63.0%	+7.7pp
care for the patient at home	JJ. + 70		. 7.7 pp
Q52 - Patient has had a review of cancer care by GP practice	18.0%	23.5%	+5.5pp
			П
Q51 - Patient definitely received the right amount of support from their GP practice	43.7%	47.7%	+4.0pp
during treatment	+ 0. 1 70	T1.170	
Q59 - Patient's average rating of care scored from very poor to very good	8.91	8.94	+0.03

[†] These changes indicate a statistically significant difference at the 99% confidence level (p<0.01), as determined by the longitudinal logistic regression model or linear regression for Q59. Change 'pp' refers to percentage point change between 2021 and 2024.

Q59 is scored differently to other questions, as it is an overall experience score from 0 to 10.

Questions with the largest negative change (2023-2024)

The score with the largest negative change[†]

Question	2023	2024	Change
Q38 - Patient received easily understandable information about what they should or		87.3%	-1.0pp
should not do after leaving hospital			• •

[†] There is one significant negative change from 2023 to 2024. The change indicates a statistically significant difference at the 99% confidence level (p<0.01), as determined by the longitudinal logistic regression model.

Change 'pp' refers to percentage point change between 2023 and 2024.

Questions with the largest negative change (2021-2024):

Out of the 11 questions which have significantly decreased since 2021, those with the largest negative change include[†]:

Question	2021	2024	Change
Q7 - Patient felt the length of time waiting for diagnostic test results was about right	81.9%	77.5%	-4.4pp
Q31 - Patient had confidence and trust in all of the team looking after them during their stay in hospital	80.9%	78.1%	-2.8pp
Q34 - Patient was always able to get help from ward staff when needed	76.2%	73.9%	-2.3pp
Q36 - Hospital staff always did everything they could to help the patient control pain	85.9%	84.3%	-1.6pp
Q37 - Patient was always treated with respect and dignity while in hospital	89.2%	87.9%	-1.2pp
Q38 - Patient received easily understandable information about what they should or should not do after leaving hospital	88.6%	87.3%	-1.2pp

[†] The change indicates a statistically significant difference at the 99% confidence level (p<0.01), as determined by the longitudinal logistic regression model. Change 'pp' refers to percentage point change between 2021 and 2024.

Highest scoring questions (2024)

In 2024, nine questions scored over 90%:

98.9%

of patients said that the care team reviewed their care plan with them to ensure it was up to date (Care planning)

95.7%

of patients found that the advice from their main contact person was very or quite helpful (Support from a main contact person)

94.6%

of patients said that enough privacy was always given to them when receiving diagnostic test results (Diagnostic tests)

93.8%

of patients said that a member of their care team helped them create a care plan to address any needs or concern. (Care planning)

92.6%

of patients said that they received all the information needed about the diagnostic test in advance. (Diagnostic tests)

92.3%

of patients said that staff provided them with relevant information on available support. (Support from hospital staff) 91.5%

of patients said they had a main point of contact within the care team. (Support from a main contact person)

90.4%

of patients said that the whole care team worked well together. (Overall NHS care)

90.2%

of patients said they had completely had enough understandable information about surgery beforehand. (Your treatment)

Lowest scoring questions (2024)

In 2024, four questions scored below 50%:



of patients said they have had a review of their cancer care by their GP practice



of patients said cancer research opportunities were discussed with them



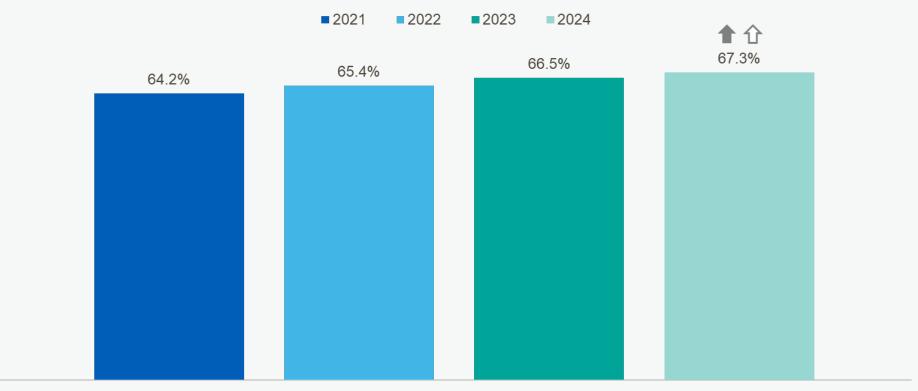
of patients said that they could definitely get enough emotional support at home from community or voluntary services after treatment



of patients said they definitely received the right amount of support from their GP practice during treatment.

Support from your GP practice

Year on year comparisons for 'Referral for diagnosis was explained in a way the patient could completely understand' (Q03)



Referral for diagnosis was explained in a way the patient could completely understand (Q03)

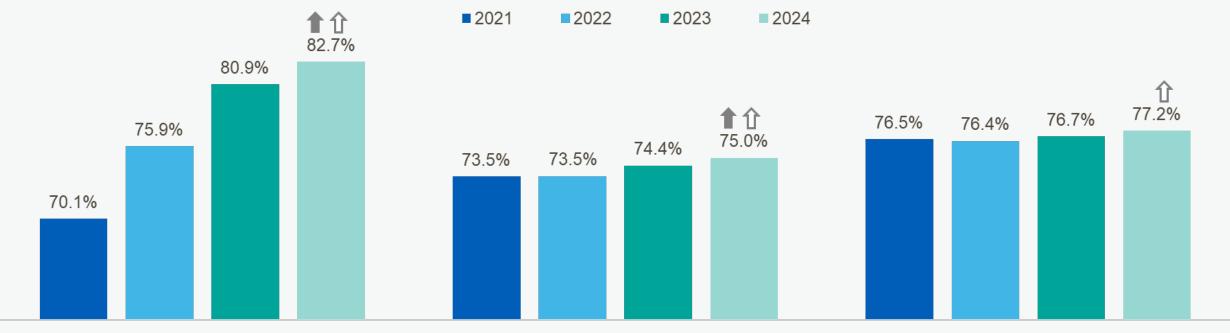


Statistically significant increase or decrease between 2023 and 2024



Finding out that you had cancer

Year on year comparisons for questions related to finding out that you had cancer



Patient was told they could have a family member, carer or friend with them when told diagnosis (Q12)

Patient was definitely told sensitively that they had cancer (Q13)

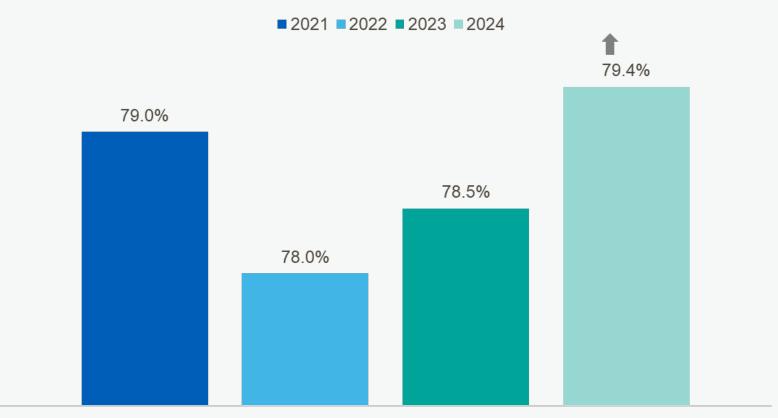
Cancer diagnosis explained in a way the patient could completely understand (Q14)



Statistically significant increase or decrease between 2023 and 2024

Your treatment

Year on year comparisons for questions about your treatment



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

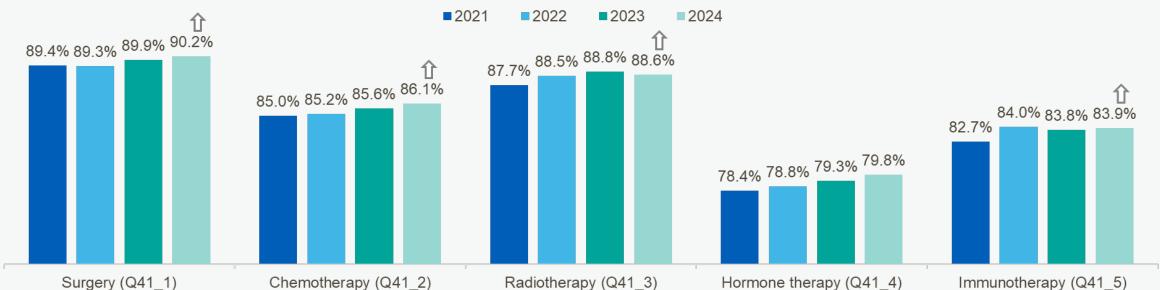


Statistically significant increase or decrease between 2023 and 2024



Your treatment

Before treatment - Year on year comparisons for 'Before your treatment started were you given all the information you needed about the treatment in a way that you could understand?' (Q41)



Of those who had surgery, 90.2% said that before their treatment started, they completely had enough understandable information. This is similar to 89.9% in 2023 but an increase over the past four years.

Of those who had chemotherapy, 86.1% said that before their treatment started, they completely had enough understandable information. This is similar to 85.6% in 2023 but an increase over the past four years.

Of those who had radiotherapy, 88.6% said that before their treatment started, they completely had enough understandable information. This is similar to 88.8% in 2023 but an increase over the past four years.

Of those who had hormone therapy, 79.8% said that before their treatment started, they completely had enough understandable information, similar to 79.3% in 2023

Of those who had immunotherapy, 83.9% said that before their treatment started, they completely had enough understandable information. This is similar to 83.8% in 2023 but an increase over the past four years.

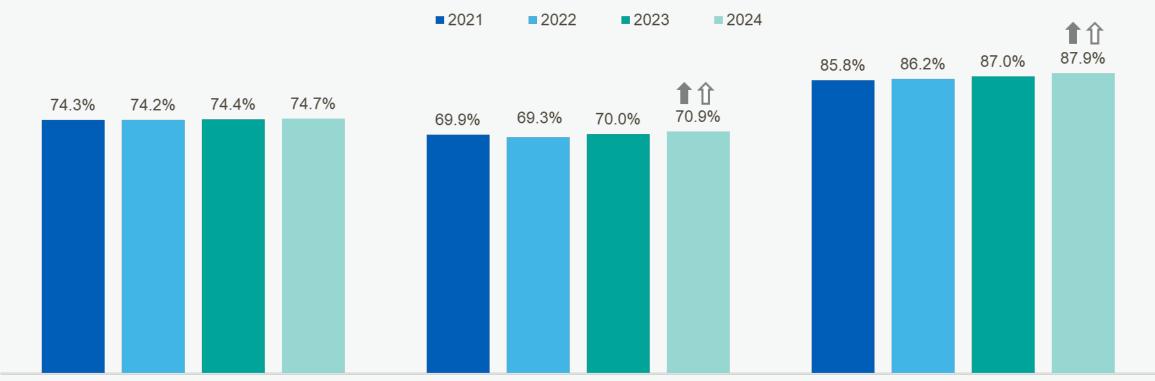


Statistically significant increase or decrease between 2023 and 2024

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Immediate and long-term side effects

Year on year comparisons for questions about immediate and long-term side effects



Possible side effects from treatment were definitely Patient was always offered practical advice on dealing Patient was given information that they could access explained in a way the patient could understand (Q44) with any immediate side effects from treatment (Q45) about support in dealing with immediate side effects from treatment (Q46)

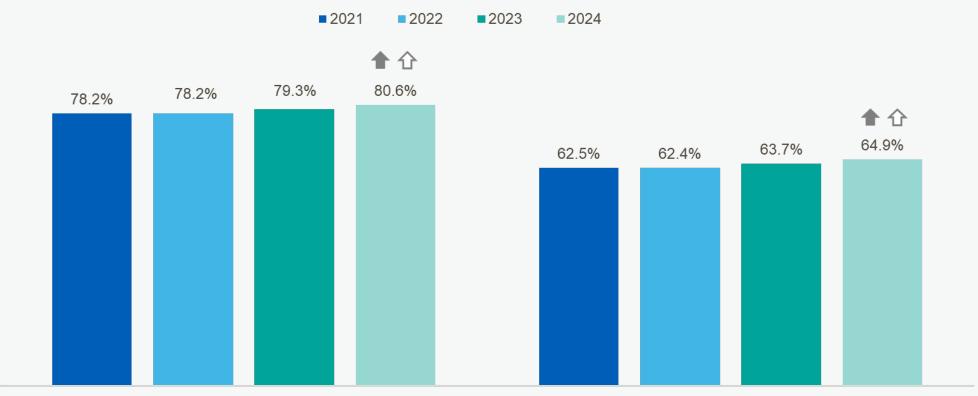


Statistically significant increase or decrease between 2023 and 2024



Living with and beyond cancer

Year on year comparisons for questions about living with and beyond cancer



between final treatment and the follow up appointment (Q54)

The right amount of information and support was offered to the patient. Patient was given enough information about the possibility and signs of cancer coming back or spreading (Q55)

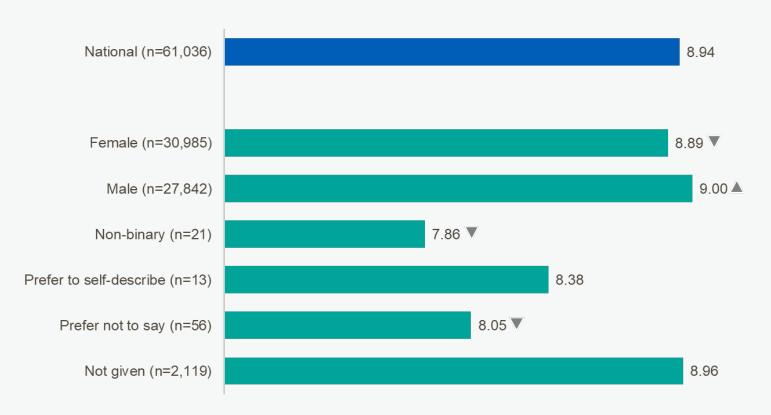


Statistically significant increase or decrease between 2023 and 2024



Overall experience by 'Which of the following best describes you?'

Overall experience by 'Which of the following best describes you?' (Q59)

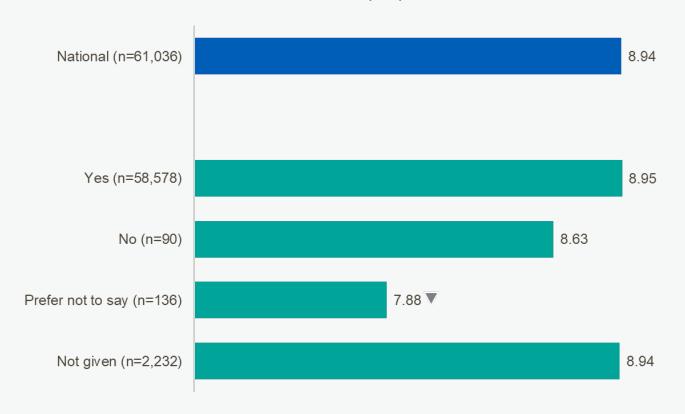


[▲] Indicates whether the score for the subgroup shows a statistically significant variation

⁽higher or lower) compared with the national average

Overall experience by 'ls your gender identity the same as the sex you were registered at birth?'

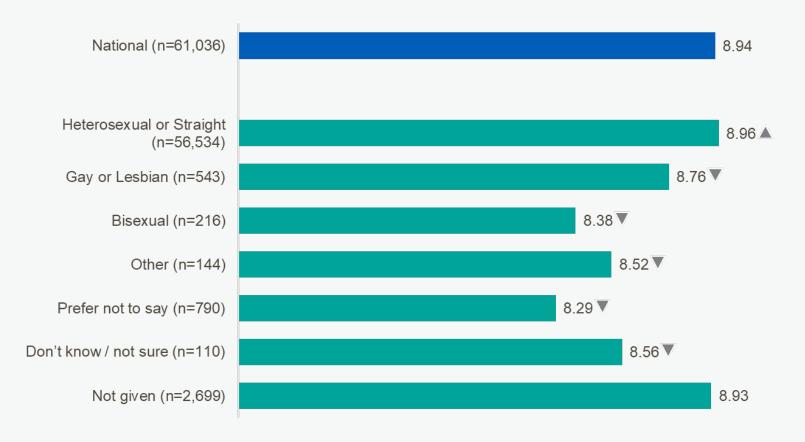
Overall experience by 'ls your gender identity the same as the sex you were registered at birth?' (Q59)



- Indicates whether the score for the subgroup shows a statistically significant variation
- (higher or lower) compared with the national average

Overall experience by sexual orientation

Overall experience by sexual orientation (Q59)



[▲] Indicates whether the score for the subgroup shows a statistically significant variation

⁽higher or lower) compared with the national average

Overall experience by ethnicity

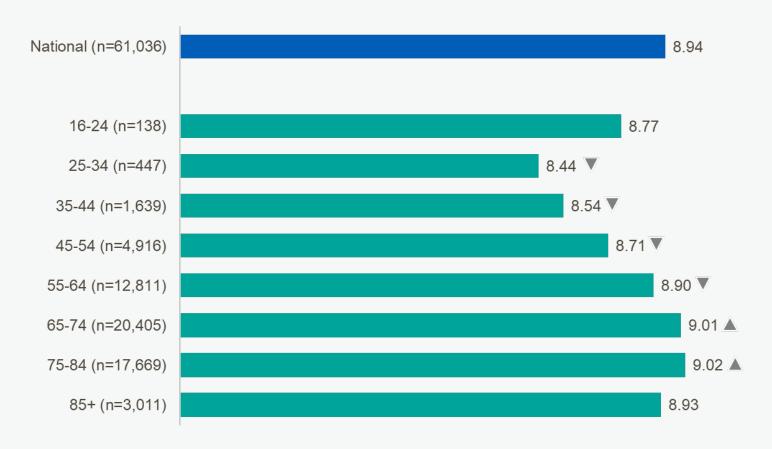
Overall experience by ethnicity (Q59)



- ▲ Indicates whether the score for the subgroup shows a statistically significant variation
- ▼ (higher or lower) compared with the national average

Overall experience by age

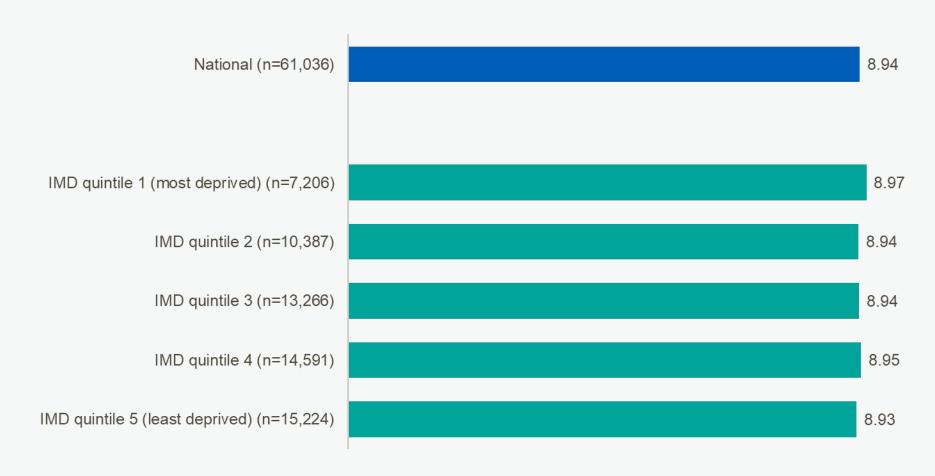
Overall experience by age (Q59)



- Indicates whether the score for the subgroup shows a statistically significant variation
- ▼ (higher or lower) compared with the national average

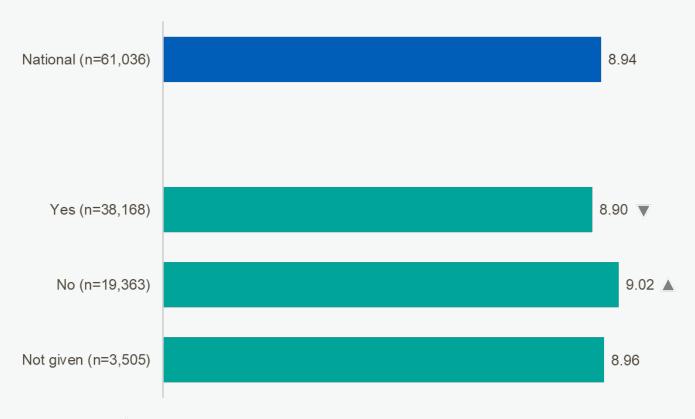
Overall experience by deprivation (IMD quintile)

Overall experience by IMD quintile (Q59)



Overall experience by long-term condition status

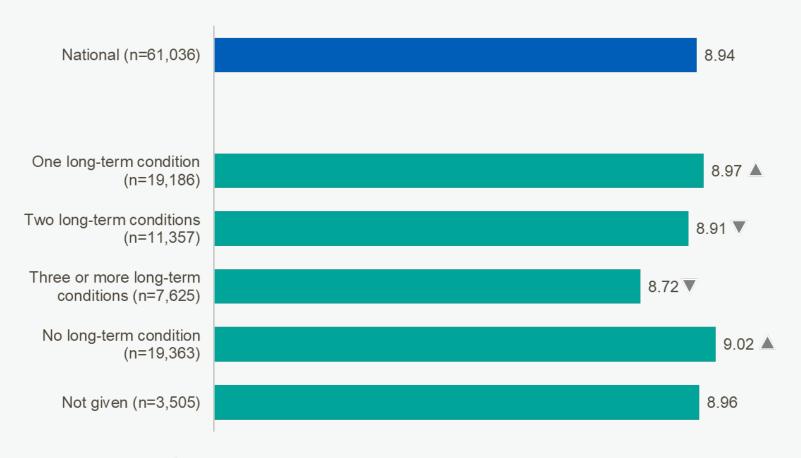
Overall experience by long-term condition status (Q59)



- Indicates whether the score for the subgroup shows a statistically significant variation.
- (higher or lower) compared with the national average

Overall experience by number of long-term conditions

Overall experience by number of long-term conditions (Q59)

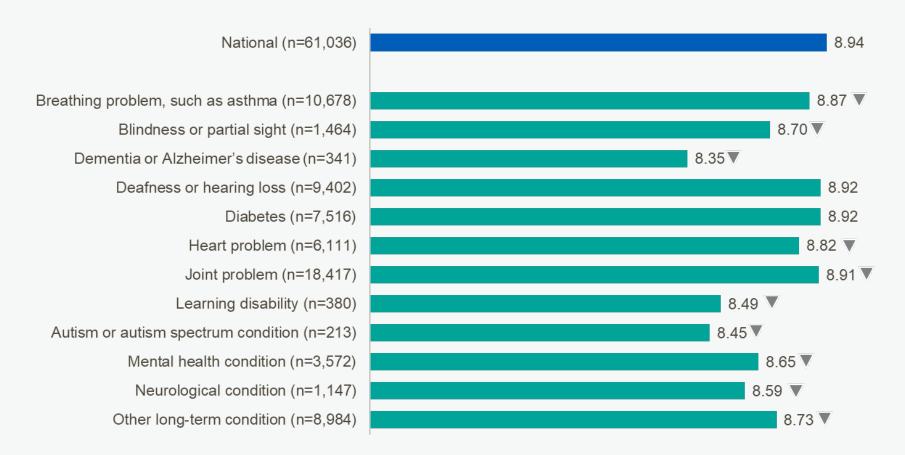


[▲] Indicates whether the score for the subgroup shows a statistically significant variation

⁽higher or lower) compared with the national average

Overall experience by long-term condition

Overall experience by long-term condition (Q59)

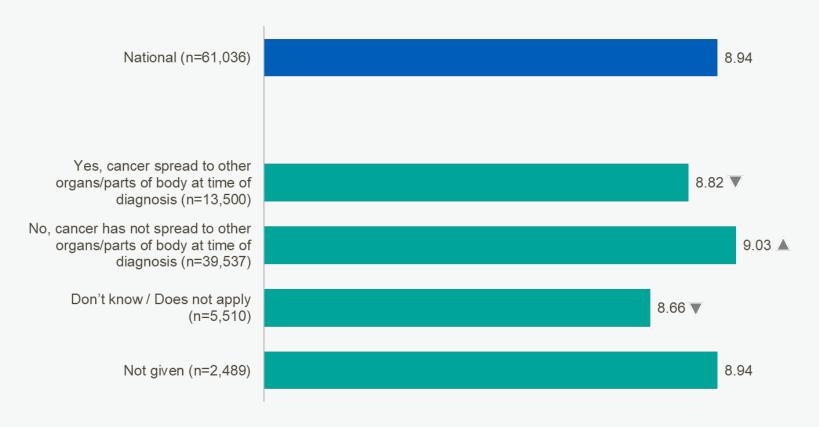


[▲] Indicates whether the score for the subgroup shows a statistically significant variation

⁽higher or lower) compared with the national average

Overall experience by cancer spread

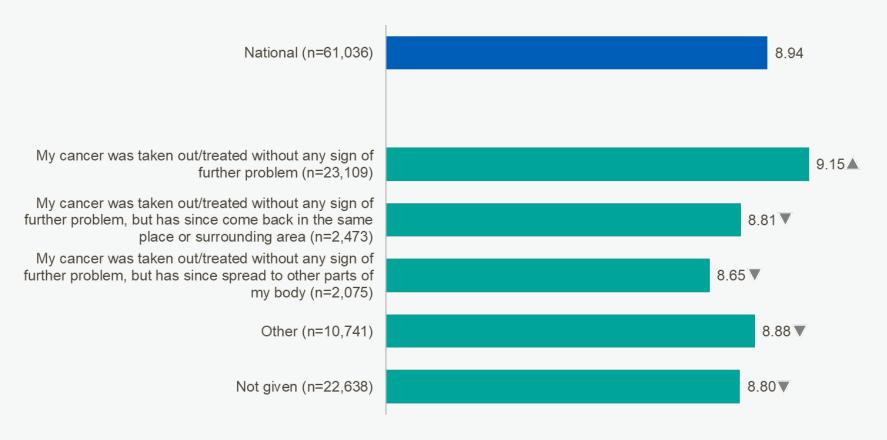
Overall experience by cancer spread to other organs / parts of body at time of diagnosis (Q59)



- ▲ Indicates whether the score for the subgroup shows a statistically significant variation
- (higher or lower) compared with the national average

Overall experience by cancer outcome

Overall experience by cancer outcome (Q59)



- ▲ Indicates whether the score for the subgroup shows a statistically significant variation
- (higher or lower) compared with the national average

Overall experience by tumour group

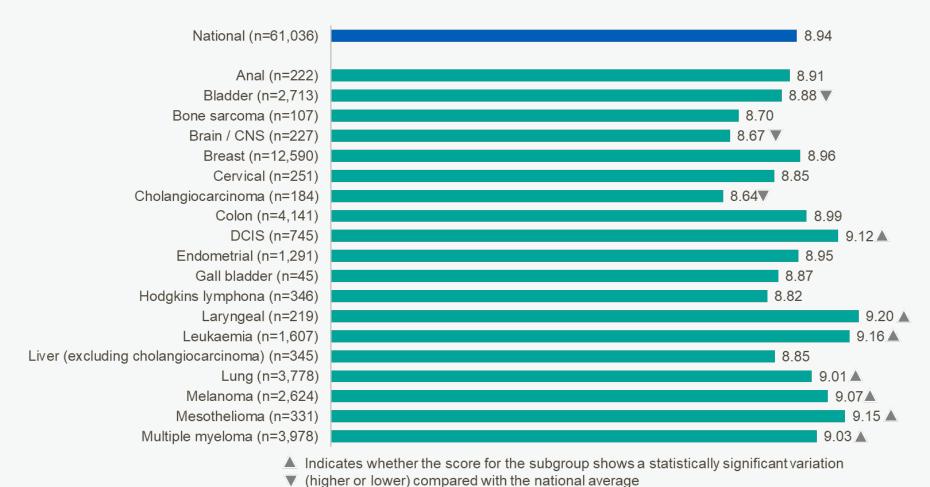
Overall experience by tumour group (Q59)



- ▲ Indicates whether the score for the subgroup shows a statistically significant variation
- (higher or lower) compared with the national average

Overall experience by cancer type (1)

Overall experience by cancer type (Q59)



Overall experience by cancer type (2)

Overall experience by cancer type (Q59)



- ▲ Indicates whether the score for the subgroup shows a statistically significant variation
- ▼ (higher or lower) compared with the national average

Quick links

- Latest national results
- Latest local results
- Interactive dashboard
- Key Driver Analysis for High Rating of Care (CPES22 data)



Use of free text data

Estelle Phillips

Qualitative Senior Analyst

NHS England



Free text data

Other comments

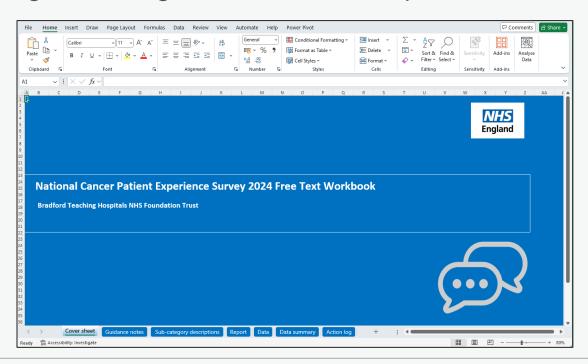
Please tell us in the box below what you found to be positive about your experience of cancer care.

My treatment was gold standard. The consultant and all their team treated me with outstanding care, professionalism and friendliness. I cannot praise them more highly.

Please tell us in the box below how your experience of cancer care could have been better.

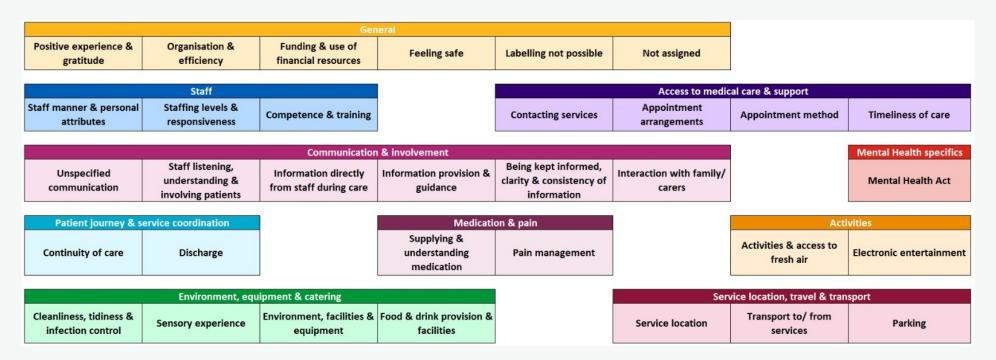
There is a lack of parking. The bathrooms were unclean and really shabby.

- Almost 80,000 free text comments in total (some trusts have over 2,000 comments)
- Excel workbooks created to present comments against categories for trusts to explore further



Categorisation of the free text data

NHSE has developed an automated Qualitative Data Categorisation (QDC) tool which works for NCPES

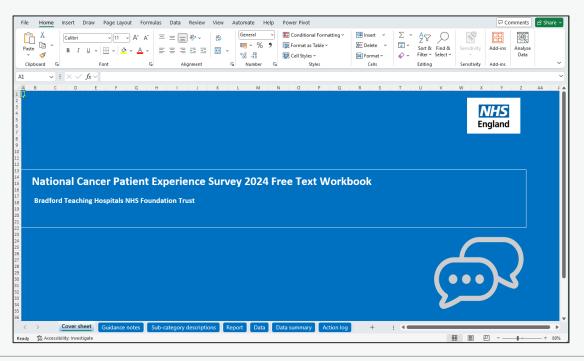


 QDC offers an opportunity for monitoring change over time through a consistent framework that is rooted in what patients' feedback on due to its inductive design

Use of the free text workbooks

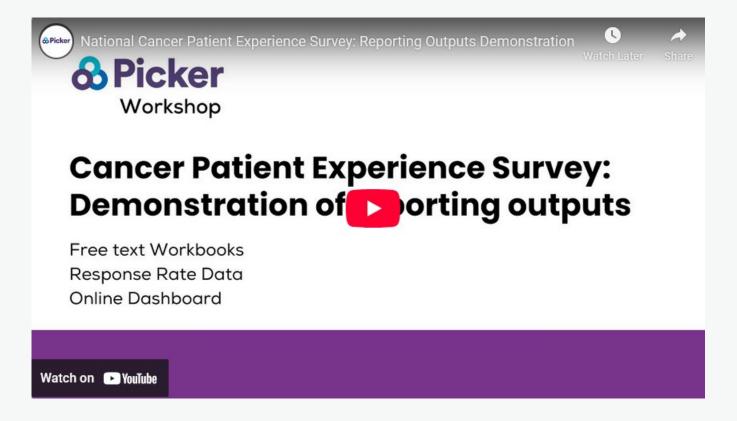
Features of the free text workbooks:

- Pulls all the data into one place, displaying it in user friendly ways
- Allows data to be filtered by categories, tumour group and respondent demographics
- Contains an action log to record and create a plan for acting on areas of interest



Workbook demo

- YouTube video demo of the free text workbooks and how to make best use of them
- https://youtu.be/QnAKqDeoNPo?feature=shared



National 2024 qualitative findings report

- Report to be published covering the themes identified from an analysis of free text comments
- Respondent quotes will be used to substantiate the findings and exemplify their experiences using their own words
- Themes will be presented in the context of the most relevant quantitative survey findings
- Quantitative tells us the how many, the qualitative will provide insight into the how and why
- There will be a further webinar to present these findings watch this space!







Case study: Improving patient experience and enhancing access to cancer services for people with learning disabilities

Michelle Richardson

Macmillan Lead Cancer Nurse
Sherwood Forest NHS Foundation Trust





Healthier Communities, Outstanding Care



Early identification of patients with additional needs on a cancer pathway

MICHELLE RICHARDSON, MACMILLAN LEAD CANCER NURSE, SFH

GEMMA GUNN, MACMILLAN LEAD CANCER NURSE, UHL

Aim

To create a system to identify patients with additional needs on the pre-diagnostic cancer pathway, to assess if they experience a difference in meeting national cancer waiting times, and to be able to offer reasonable adjustments proactively

Kathryn:

"It would have been good if a learning disability nurse was at some of my appointments. I often didn't understand what the Doctors meant. Mum always had to explain things to me"

"I always had to try to ring up to change my appointments to later on if they were early because I have carers in the morning."

Our Lived Experience Partners



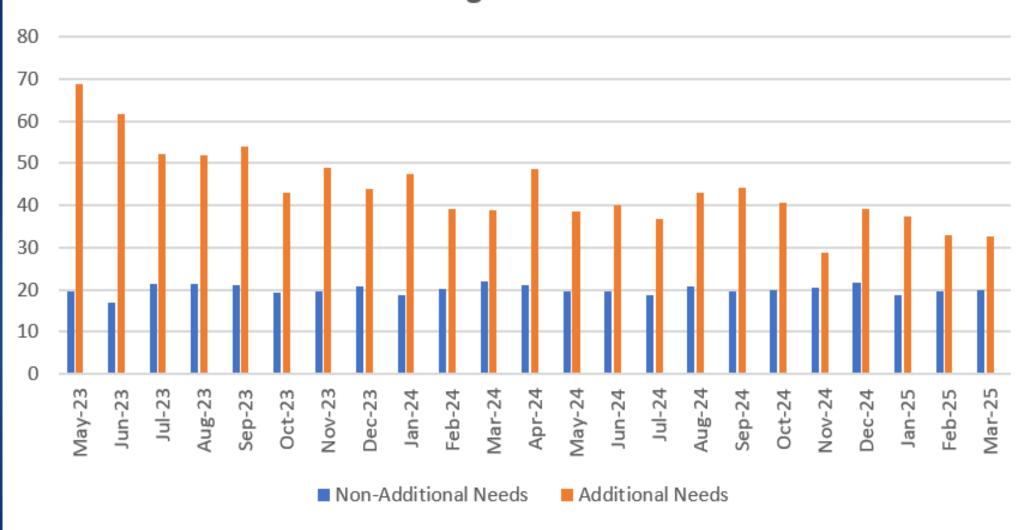
Christine (Kathryn's mum):

"You could tell that when we went to appointments people didn't usually know that Kathryn had a learning disability, and they explained things to her in a way that she didn't understand."

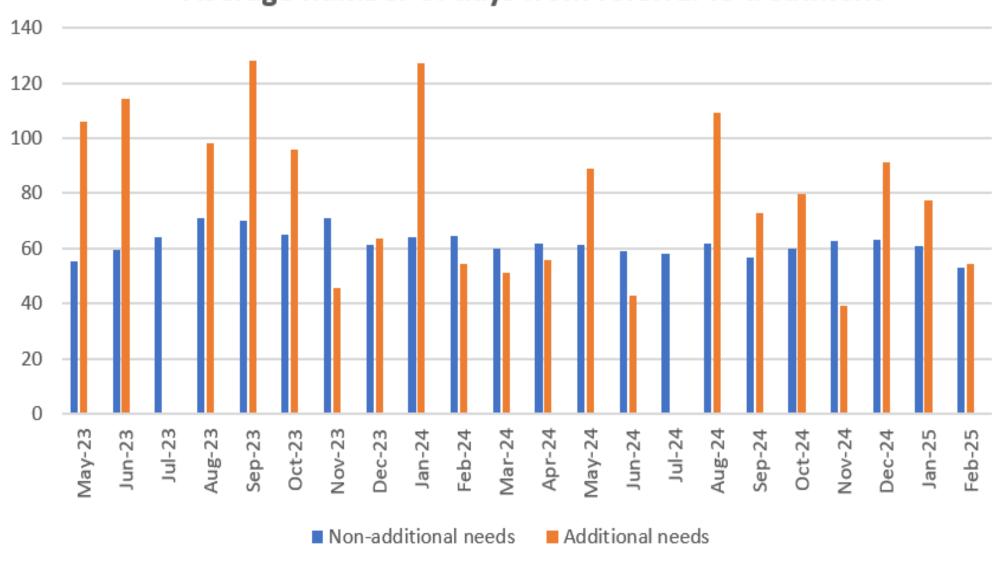
What We Did

- Created a digital flagging system for additional needs on Infoflex
- Process mapped from referral to first appointment to continually improve how we can flag patients at the earliest stage
- Developed the flagging system to introduce new flags when different needs were highlighted
- Highlighted all patients with additional needs for weekly discussion at our cancer patient tracking meetings
- Introduce proactive support for these patients, such as early support from learning disability and dementia specialist nurses

Average number of days from referral to diagnosis or ruling out cancer



Average number of days from referral to treatment



Thank you for listening!



Contact: michelle.richardson37@nhs.net



Panel discussion: Using the NCPES

- Jodie Moffat, Deputy Director, Policy and Strategy, NHS Cancer Programme, NHS England
- Emma Leatherbarrow, Equality and Involvement Strategic Lead, Wessex Cancer Alliance
- Jannike Nordlund, Programme Manager, South East London Cancer Alliance
- Irina Belun-Vieira, Head of Nursing Cancer, King's College Hospital NHS Foundation Trust
- Lucy Green, Health Coach, Glastonbury Health Centre



Any questions?







Closing statement

Jodie Moffat

Deputy Director, Policy and Strategy

NHS Cancer Programme

NHS England





Thank you

Please share your feedback:

https://forms.office.com/e/t5RzUuJtKq

