

National Cancer Patient Experience Survey

2025 Results

**The Robert Jones and Agnes Hunt
Orthopaedic Hospital NHS Foundation
Trust**

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Executive summary

Questions above expected range

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust has no scores above expected range

Executive summary

Questions below expected range

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust has no scores below expected range

Introduction

The National Cancer Patient Experience Survey 2025 is the fifteenth 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 2025 survey involved 130 NHS trusts. Out of 134,285 people, 64,268 people responded to the survey, yielding a response rate of 48%.

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 2025. The fieldwork for the survey was undertaken between November 2025 and February 2026.

As in the previous 10 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 and 2025 are included in this report for most questions. The below should be noted for comparability of results:

- Q23 and Q42: In 2023 the question text was amended. These questions are not comparable to 2021 or 2022, data is only comparable for 2023, 2024 and 2025.
- Q67: In 2023 the long-term condition question was amended to include “Autism or autism spectrum condition” as a response option, and update the answer option “Neurological condition” to “Neurological condition, such as epilepsy”. These answer options are not comparable to 2021 or 2022, data is only comparable for 2023, 2024 and 2025.
- Q71: In 2023 the ethnic group question was amended to include “Roma” as a response option. The ethnic group question is still deemed comparable to previous years, but data for the “Roma” response option is only available for 2023, 2024 and 2025.
- Q51 and Q52: In 2025 the question text was amended. These questions are not comparable to previous years, data is only available for 2025.

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.

Statistical significance

In the reporting of 2025 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 how 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 2024 and 2025 unadjusted scores for this trust for each scored question. The columns 'Change 2024-2025' and 'Change overall' include arrows to show if there is statistically significant variation between years. 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 2025 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, age, 'Which of the following best describes you?', ethnicity, IMD quintile, long-term condition status, and impact of long-term condition(s) on day-to-day activities. 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.

Ethnicity tables

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

Long-term condition status tables

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

Impact of long-term condition(s) (excluding cancer) on day-to-day activities tables

The impact of long-term condition(s) tables show unadjusted scores for respondents with an additional long-term condition(s) and whether these affect their day-to-day activities.

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 five columns representing the unadjusted scores of the last five years (2021, 2022, 2023, 2024 and 2025) for each scored question. Arrows are included to show if there is statistically significant variation between 2024 and 2025 or overall between 2021 and 2025. An upwards arrow indicates a statistically significant increase, a downwards arrow indicates a statistically significant decrease, and no arrow indicates no statistically significant change.

National level and England level data

In some cases (333 respondents in 2025), 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, Long-term condition status tables and Impact of long-term condition(s) (excluding cancer) on day-to-day activities 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.

To view all outputs and supporting materials for 2025 and previous years, please visit the website www.ncpes.co.uk. This includes:

- All Excel data tables, PDF reports and the interactive dashboard available at national, Integrated Care Board, Cancer Alliance and NHS trust level.
- Analysis of free text data available in the national qualitative thematic report. Free text workbooks are also shared directly with the NHS trust and Cancer Alliance leads.
- The Technical Document, providing more information about the methodology including significance testing, suppression and question comparability.
- Additional resources, including reports which explore key driver analysis for a high rating of care, and a video demonstration on using the outputs.
- The questionnaire, survey guidance and survey materials.

These resources will help users to explore trends over time, analyse results by demographic and clinical subgroups, and benchmark organisations against national scores and other providers.

Response rate

Overall response rate

9 patients responded out of a total of 17 patients, resulting in a response rate of 53%.

	Sample size	Adjusted sample	Completed	Response rate
Overall response rate	17	17	9	53%
National	143,951	134,285	64,268	48%

Respondents by survey mode

	Number of respondents
Paper	7
Online	2
Phone	0
Translation service	0
Total	9

Respondents by tumour group

	Number of respondents
Brain / CNS	0
Breast	0
Colorectal / LGT	0
Gynaecological	0
Haematological	*
Head and neck	0
Lung	0
Prostate	0
Sarcoma	*
Skin	0
Upper gastro	0
Urological	0
Other	*
Total	9

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Respondents by ethnicity

	Number of respondents
White	
English / Welsh / Scottish / Northern Irish / British	8
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	
Arab	*
Any other ethnic group	*
Not given	
Not given	*
Total	9

Expected range charts

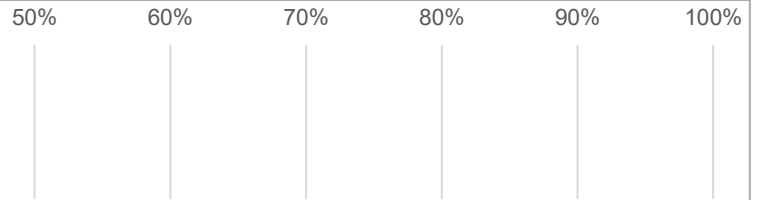
Lower expected range Within expected range Upper expected range Case mix adjusted score

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.

SUPPORT FROM YOUR GP PRACTICE

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



DIAGNOSTIC TESTS

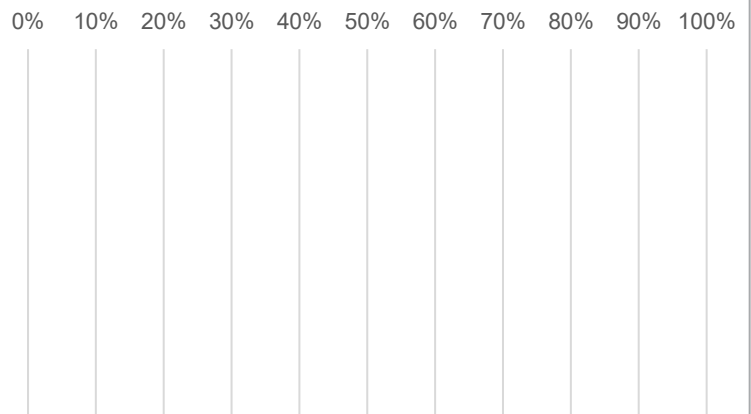
Q5. Patient received all the information needed about the diagnostic test in advance

Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient

Q7. Patient felt the length of time waiting for diagnostic test results was about right

Q8. Diagnostic test results were explained in a way the patient could completely understand

Q9. Enough privacy was always given to the patient when receiving diagnostic test results



FINDING OUT THAT YOU HAD CANCER

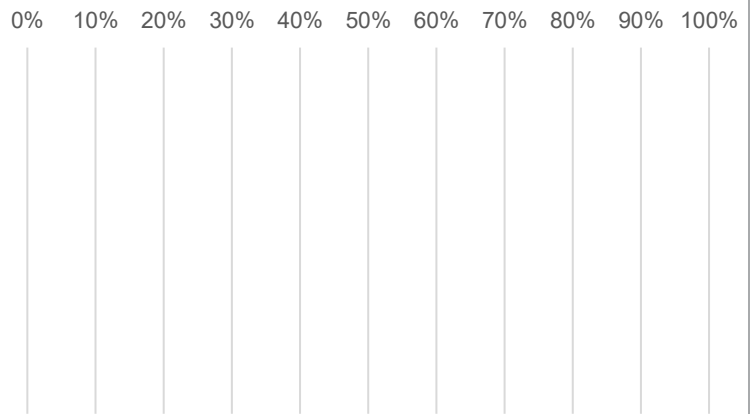
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis

Q13. Patient was definitely told sensitively that they had cancer

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

Q15. Patient was definitely told about their diagnosis in an appropriate place

Q16. Patient was told they could go back later for more information about their diagnosis

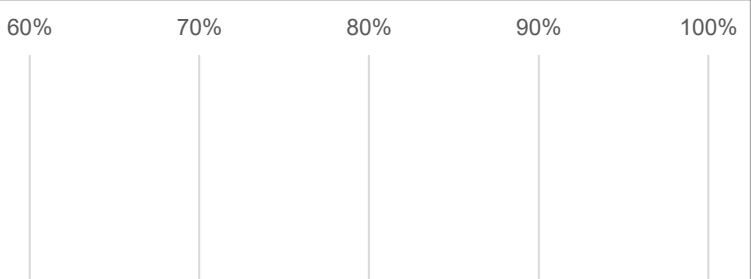


SUPPORT FROM A MAIN CONTACT PERSON

Q17. Patient had a main point of contact within the care team

Q18. Patient found it very or quite easy to contact their main contact person

Q19. Patient found advice from main contact person was very or quite helpful



Expected range charts

Lower expected range
 Within expected range
 Upper expected range
 Case mix adjusted score

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

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

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

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

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

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

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

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

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 needed

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

Lower expected range Within expected range Upper expected range Case mix adjusted score

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.

HOSPITAL CARE CONTINUED

60% 70% 80% 90% 100%

Q38. Patient received easily understandable information about what they should or should not do after leaving hospital

Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case

YOUR TREATMENT

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Q41_1. Beforehand patient completely had enough understandable information about surgery

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

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

IMMEDIATE AND LONG-TERM SIDE EFFECTS

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Q44. Possible side effects from treatment were definitely explained in a way the patient could understand

Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment

Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment

Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment

Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects

Expected range charts

Lower expected range
 Within expected range
 Upper expected range
 Case mix adjusted score

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.

SUPPORT WHILE AT HOME

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home

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

CARE FROM YOUR GP PRACTICE

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis

Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)

LIVING WITH AND BEYOND CANCER

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

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

YOUR OVERALL NHS CARE

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Q56. The whole care team worked well together

Q57. Administration of care was very good or good

Q58. Cancer research opportunities were discussed with patient

0 1 2 3 4 5 6 7 8 9 10

Q59. Patient's average rating of care scored from very poor to very good

Comparability tables

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

- No score available.

▲ or ▼ Change 2024-2025: Statistically significant increase or decrease between 2024 and 2025.

△ or ▽ Change overall: Statistically significant increase or decrease from 2021 to 2025.

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

SUPPORT FROM YOUR GP PRACTICE	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q2. Patient only spoke to primary care professional once or twice before cancer diagnosis	*	*	*	*			*	*	*	78%
Q3. Referral for diagnosis was explained in a way the patient could completely understand	*	*	*	*			*	*	*	68%

DIAGNOSTIC TESTS	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*			*	*	*	93%
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*			*	*	*	84%
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*			*	*	*	78%
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*			*	*	*	79%
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*			*	*	*	95%

FINDING OUT THAT YOU HAD CANCER	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*			*	*	*	83%
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*			*	*	*	75%
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*			*	*	*	78%
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*			*	*	*	86%
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*			*	*	*	85%

SUPPORT FROM A MAIN CONTACT PERSON	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q17. Patient had a main point of contact within the care team	*	*	*	*			*	*	*	91%
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*			*	*	*	84%
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*			*	*	*	96%



Comparability tables

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

- No score available.

▲ or ▼ Change 2024-2025: Statistically significant increase or decrease between 2024 and 2025.

△ or ▽ Change overall: Statistically significant increase or decrease from 2021 to 2025.

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

DECIDING ON THE BEST TREATMENT	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*			*	*	*	83%
Q21. Patient was definitely involved as much as they wanted to be in decisions about their treatment	*	*	*	*			*	*	*	80%
Q22. Family and / or carers were definitely involved as much as the patient wanted them to be in decisions about treatment options	*	*	*	*			*	*	*	85%
Q23. Patient could get further advice from a different healthcare professional before making decisions about their treatment options	*	*	*	*			*	*	*	58%

CARE PLANNING	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
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	*	*	*	*			*	*	*	94%
Q26. Care team reviewed the patient's care plan with them to ensure it was up to date	*	*	*	*			*	*	*	99%

SUPPORT FROM HOSPITAL STAFF	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q27. Staff provided the patient with relevant information on available support	*	*	*	*			*	*	*	92%
Q28. Patient definitely got the right level of support for their overall health and well being from hospital staff	*	*	*	*			*	*	*	77%
Q29. Patient was offered information about how to get financial help or benefits	*	*	*	*			*	*	*	71%



Comparability tables

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

- No score available.

▲ or ▼ Change 2024-2025: Statistically significant increase or decrease between 2024 and 2025.

△ or ▽ Change overall: Statistically significant increase or decrease from 2021 to 2025.

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

HOSPITAL CARE	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*			*	*	*	78%
Q32. Patient's family, or someone close, was definitely able to talk to a member of the team looking after the patient in hospital	*	*	*	*			*	*	*	72%
Q33. Patient was always involved in decisions about their care and treatment whilst in hospital	*	*	*	*			*	*	*	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	*	*	*	*			*	*	*	66%
Q36. Hospital staff always did everything they could to help the patient control pain	*	*	*	*			*	*	*	84%
Q37. Patient was always treated with respect and dignity while in hospital	*	*	*	*			*	*	*	88%
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*			*	*	*	88%
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*			*	*	*	80%

YOUR TREATMENT	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*			*	*	*	90%
Q41_2. Beforehand patient completely had enough understandable information about chemotherapy	*	*	*	*			*	*	*	85%
Q41_3. Beforehand patient completely had enough understandable information about radiotherapy	*	*	*	*			*	*	*	89%
Q41_4. Beforehand patient completely had enough understandable information about hormone therapy	*	*	*	*			*	*	*	78%
Q41_5. Beforehand patient completely had enough understandable information about immunotherapy	*	*	*	*			*	*	*	83%
Q42_1. Patient completely had enough understandable information about their response to surgery	*	*	*	*			*	*	*	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	*	*	*	*			*	*	*	75%
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	*	*	*	*			*	*	*	80%



Comparability tables

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

- No score available.

▲ or ▼ Change 2024-2025: Statistically significant increase or decrease between 2024 and 2025.

△ or ▽ Change overall: Statistically significant increase or decrease from 2021 to 2025.

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

IMMEDIATE AND LONG-TERM SIDE EFFECTS	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*			*	*	*	74%
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*			*	*	*	71%
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*			*	*	*	88%
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*			*	*	*	61%
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*			*	*	*	56%

SUPPORT WHILE AT HOME	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*			*	*	*	64%
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*			*	*	*	54%

CARE FROM YOUR GP PRACTICE	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	-	-	*	*			*	*	*	45%
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	-	-	*	*			*	*	*	41%

LIVING WITH AND BEYOND CANCER	Unadjusted scores						Case mix adjusted scores			National score
	2024 N	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*			*	*	*	33%
Q54. The right amount of information and support was offered to the patient between final treatment and the follow up appointment	*	*	*	*			*	*	*	80%
Q55. Patient was given enough information about the possibility and signs of cancer coming back or spreading	*	*	*	*			*	*	*	65%



Comparability tables

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- No score available.

▲ or ▼ Change 2024-2025: Statistically significant increase or decrease between 2024 and 2025.

△ or ▽ Change overall: Statistically significant increase or decrease from 2021 to 2025.



Adjusted score below lower expected range



Adjusted score between upper and lower expected ranges



Adjusted score above upper expected range

YOUR OVERALL NHS CARE	Unadjusted scores						Case mix adjusted scores			National score
	2024 n	2024 score	2025 n	2025 score	Change 2024-2025	Change overall	2025 score	Lower expected range	Upper expected range	
Q56. The whole care team worked well together	*	*	*	*			*	*	*	89%
Q57. Administration of care was very good or good	*	*	*	*			*	*	*	87%
Q58. Cancer research opportunities were discussed with patient	*	*	*	*			*	*	*	45%
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*			*	*	*	8.9



Tumour group tables

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

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

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

FINDING OUT THAT YOU HAD CANCER	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*	*

Tumour group tables

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

	Tumour group												
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	*	*	*	*	*	*	*
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	*	*	*	*	*
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	*	*	*	*	*

	Tumour group												
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other
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	*	*	*	*	*	*	*	*	*	*	*	*	*

	Tumour group												
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other
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	*	*	*	*	*	*	*	*	*	*	*	*	*

	Tumour group												
	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	*	*	*	*	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*	*	*	*	*

Tumour group tables

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

HOSPITAL CARE	Tumour group													
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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 needed	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	*	*	*	*	*	*

YOUR TREATMENT	Tumour group													
	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	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*	*	*	*	*	*

Tumour group tables

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

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

	Tumour group												
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	*	*	*	*	*	*	*
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	*

	Tumour group												
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*	*	*	*	*	*	*	*	*

Tumour group tables

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

LIVING WITH AND BEYOND CANCER														
	Tumour group													
	Brain / CNS	Breast	Colorectal / LGT	Gynaecological	Haematological	Head and neck	Lung	Prostate	Sarcoma	Skin	Upper gastro	Urological	Other	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*	*	*	*	*	*

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

Age group tables

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

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	*	*	*	*	*	*	*	*	*

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

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

SUPPORT 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	*	*	*	*	*	*	*	*	*
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*	*	*
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*	*	*

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	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*

Age group tables

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

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	*	*	*	*	*	*	*	*	*
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	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	*	*	*	*	*	*	*	*	*
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	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	*	*	*	*	*	*	*	*	*
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 needed	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*	*	*

Age group tables

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

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	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*

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

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	*	*	*	*	*	*	*	*	*
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 help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*	*	*	*	*

Age group tables

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

LIVING WITH AND BEYOND CANCER									
	Age								
	16 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 - 84	85+	All
Q53. After treatment, the patient definitely could get enough emotional support at home from community or voluntary services	*	*	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*	*	*

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

'Which of the following best describes you?' tables

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

SUPPORT FROM YOUR GP PRACTICE							
Which of the following best 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	*	*	*	*	*	*	*

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

FINDING OUT THAT YOU HAD CANCER							
Which of the following best 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	*	*	*	*	*	*	*
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*	*	*
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*	*	*
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*	*	*
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*	*	*

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

'Which of the following best describes you?' tables

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

DECIDING ON THE BEST TREATMENT							
	Which of the following best 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	*	*	*	*	*	*	*
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							
	Which of the following best 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	*	*	*	*	*	*	*
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							
	Which of the following best 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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*

‘Which of the following best describes you?’ tables

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

HOSPITAL CARE							
	Which of the following best 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	*	*	*	*	*	*	*
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 needed	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*

YOUR TREATMENT							
	Which of the following best 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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*

'Which of the following best describes you?' tables

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

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

SUPPORT WHILE AT HOME							
Which of the following best 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	*	*	*	*	*	*	*
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services	*	*	*	*	*	*	*

CARE FROM YOUR GP PRACTICE							
Which of the following best describes you?							
	Female	Male	Non-binary	Prefer to self-describe	Prefer not to say	Not given	All
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*	*	*

LIVING WITH AND BEYOND CANCER							
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	*	*	*	*	*	*	*

‘Which of the following best describes you?’ tables

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

YOUR OVERALL NHS CARE	Which of the following best 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	*	*	*	*	*	*	*
Q57. Administration of care was very good or good	*	*	*	*	*	*	*
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*	*	*



Ethnicity tables

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

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	*	*	*	*	*	*	*

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

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

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

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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*

Ethnicity tables

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

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	*	*	*	*	*	*	*
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	Ethnicity						
	White	Mixed	Asian	Black	Other	Not given	All
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	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	*	*	*	*	*	*	*
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 needed	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*

Ethnicity tables

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

YOUR TREATMENT	Ethnicity						All
	White	Mixed	Asian	Black	Other	Not given	
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*

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

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

CARE FROM YOUR GP PRACTICE	Ethnicity						All
	White	Mixed	Asian	Black	Other	Not given	
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*	*	*

Ethnicity tables

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

LIVING WITH AND BEYOND CANCER	Ethnicity						All
	White	Mixed	Asian	Black	Other	Not given	
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	*	*	*	*	*	*	*

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

IMD quintile tables

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

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	*	*	*	*	*	*	*

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

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

SUPPORT FROM A MAIN CONTACT PERSON		IMD quintile					
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*	*	*
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*	*	*
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*	*	*

IMD quintile tables

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

DECIDING ON THE BEST TREATMENT	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
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	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
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	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
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	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
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 needed	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*	*	*

IMD quintile tables

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

YOUR TREATMENT	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*
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	*	*	*	*	*	*	*

IMMEDIATE AND LONG-TERM SIDE EFFECTS	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand	*	*	*	*	*	*	*
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment	*	*	*	*	*	*	*
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment	*	*	*	*	*	*	*
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment	*	*	*	*	*	*	*
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects	*	*	*	*	*	*	*

SUPPORT WHILE AT HOME	IMD quintile						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home	*	*	*	*	*	*	*
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						All
	1 (most deprived)	2	3	4	5 (least deprived)	Non-England	
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*	*	*

IMD quintile tables

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

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	*	*	*	*	*	*	*

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

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The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

Long-term condition status tables

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

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	*	*	*	*

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

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

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

DECIDING ON THE BEST TREATMENT		Long-term condition status		
	Yes	No	Not given	All
Q20. Treatment options were explained in a way the patient could completely understand	*	*	*	*
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	*	*	*	*

Long-term condition status tables

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

CARE PLANNING	Long-term condition status			
	Yes	No	Not given	All
Q24. Patient was definitely able to have a discussion about their needs or concerns prior to treatment	*	*	*	*
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	Long-term condition status			
	Yes	No	Not given	All
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	Long-term condition status			
	Yes	No	Not given	All
Q31. Patient had confidence and trust in all of the team looking after them during their stay in hospital	*	*	*	*
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 needed	*	*	*	*
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	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*

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Long-term condition status tables

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

YOUR TREATMENT	Long-term condition status			
	Yes	No	Not given	All
Q41_1. Beforehand patient completely had enough understandable information about surgery	*	*	*	*
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	*	*	*	*
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	*	*	*	*

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

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	*	*	*	*
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 help or support needed from their GP practice since their cancer diagnosis	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*

Long-term condition status tables

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

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	*	*	*	*

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



Impact of long-term condition(s) (excluding cancer) on day-to-day activities tables

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† Please note: the 'All' column shows the overall score including all cases within the organisation. The impact of long-term condition(s) (excluding cancer) on day-to-day activities breakdown is based on a routed question, so figures may not align.

SUPPORT FROM YOUR GP PRACTICE		Impact of long-term condition(s) (excluding cancer) on day-to-day activities			
	A lot	A little	Not at all	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	*	*	*	*	*

DIAGNOSTIC TESTS	Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
	A lot	A little	Not at all	Not given	All
Q5. Patient received all the information needed about the diagnostic test in advance	*	*	*	*	*
Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient	*	*	*	*	*
Q7. Patient felt the length of time waiting for diagnostic test results was about right	*	*	*	*	*
Q8. Diagnostic test results were explained in a way the patient could completely understand	*	*	*	*	*
Q9. Enough privacy was always given to the patient when receiving diagnostic test results	*	*	*	*	*

FINDING OUT THAT YOU HAD CANCER		Impact of long-term condition(s) (excluding cancer) on day-to-day activities			
	A lot	A little	Not at all	Not given	All
Q12. Patient was told they could have a family member, carer or friend with them when told diagnosis	*	*	*	*	*
Q13. Patient was definitely told sensitively that they had cancer	*	*	*	*	*
Q14. Cancer diagnosis explained in a way the patient could completely understand	*	*	*	*	*
Q15. Patient was definitely told about their diagnosis in an appropriate place	*	*	*	*	*
Q16. Patient was told they could go back later for more information about their diagnosis	*	*	*	*	*

SUPPORT FROM A MAIN CONTACT PERSON	Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
	A lot	A little	Not at all	Not given	All
Q17. Patient had a main point of contact within the care team	*	*	*	*	*
Q18. Patient found it very or quite easy to contact their main contact person	*	*	*	*	*
Q19. Patient found advice from main contact person was very or quite helpful	*	*	*	*	*

DECIDING ON THE BEST TREATMENT	Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
	A lot	A little	Not at all	Not given	All
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	*	*	*	*	*

Impact of long-term condition(s) (excluding cancer) on day-to-day activities tables

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CARE PLANNING					
Impact of long-term condition(s) (excluding cancer) on day-to-day activities					
	A lot	A little	Not at all	Not given	All †
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					
Impact of long-term condition(s) (excluding cancer) on day-to-day activities					
	A lot	A little	Not at all	Not given	All
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					
Impact of long-term condition(s) (excluding cancer) on day-to-day activities					
	A lot	A little	Not at all	Not given	All
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 needed	*	*	*	*	*
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	*	*	*	*	*
Q38. Patient received easily understandable information about what they should or should not do after leaving hospital	*	*	*	*	*
Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case	*	*	*	*	*

Impact of long-term condition(s) (excluding cancer) on day-to-day activities tables

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† Please note: the 'All' column shows the overall score including all cases within the organisation. The impact of long-term condition(s) (excluding cancer) on day-to-day activities breakdown is based on a routed question, so figures may not align.

YOUR TREATMENT		Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
		A lot	A little	Not at all	Not given	All †
Q41_1. Beforehand patient completely had enough understandable information about surgery		*	*	*	*	*
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		*	*	*	*	*
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		*	*	*	*	*

IMMEDIATE AND LONG-TERM SIDE EFFECTS		Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
		A lot	A little	Not at all	Not given	All
Q44. Possible side effects from treatment were definitely explained in a way the patient could understand		*	*	*	*	*
Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment		*	*	*	*	*
Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment		*	*	*	*	*
Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment		*	*	*	*	*
Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects		*	*	*	*	*

SUPPORT WHILE AT HOME		Impact of long-term condition(s) (excluding cancer) on day-to-day activities				
		A lot	A little	Not at all	Not given	All
Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home		*	*	*	*	*
Q50. During treatment, the patient definitely got enough care and support at home from community or voluntary services		*	*	*	*	*

Impact of long-term condition(s) (excluding cancer) on day-to-day activities tables

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CARE FROM YOUR GP PRACTICE		Impact of long-term condition(s) (excluding cancer) on day-to-day activities			
	A lot	A little	Not at all	Not given	All †
Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis	*	*	*	*	*
Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)	*	*	*	*	*

LIVING WITH AND BEYOND CANCER		Impact of long-term condition(s) (excluding cancer) on day-to-day activities			
	A lot	A little	Not at all	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	*	*	*	*	*

YOUR OVERALL NHS CARE		Impact of long-term condition(s) (excluding cancer) on day-to-day activities			
	A lot	A little	Not at all	Not given	All
Q56. The whole care team worked well together	*	*	*	*	*
Q57. Administration of care was very good or good	*	*	*	*	*
Q58. Cancer research opportunities were discussed with patient	*	*	*	*	*
Q59. Patient's average rating of care scored from very poor to very good	*	*	*	*	*

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Year on year charts

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▲ or ▼ Statistically significant increase or decrease between 2024 and 2025

△ or ▽ Statistically significant increase or decrease from 2021 to 2025

SUPPORT FROM YOUR GP PRACTICE

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



DIAGNOSTIC TESTS

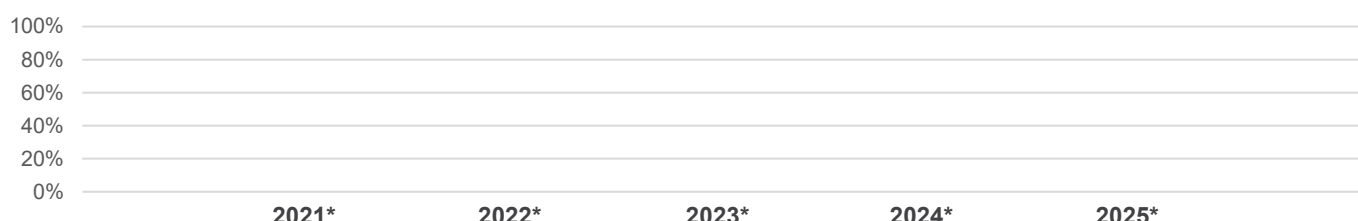
Q5. Patient received all the information needed about the diagnostic test in advance



Q6. Diagnostic test staff appeared to completely have all the information they needed about the patient



Q7. Patient felt the length of time waiting for diagnostic test results was about right



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Q8. Diagnostic test results were explained in a way the patient could completely understand



Q9. Enough privacy was always given to the patient when receiving diagnostic test results



FINDING OUT THAT YOU HAD CANCER

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



Q13. Patient was definitely told sensitively that they had cancer



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



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Q15. Patient was definitely told about their diagnosis in an appropriate place



Q16. Patient was told they could go back later for more information about their diagnosis



SUPPORT FROM A MAIN CONTACT PERSON

Q17. Patient had a main point of contact within the care team



Q18. Patient found it very or quite easy to contact their main contact person



Q19. Patient found advice from main contact person was very or quite helpful



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△ or ▽ Statistically significant increase or decrease from 2021 to 2025

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



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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



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- No score available.

△ or ▽ Statistically significant increase or decrease from 2021 to 2025

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 needed



Q35. Patient was always able to discuss worries and fears with hospital staff



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△ or ▽ Statistically significant increase or decrease from 2021 to 2025

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



Q38. Patient received easily understandable information about what they should or should not do after leaving hospital



Q39. Patient was always able to discuss worries and fears with hospital staff while being treated as an outpatient or day case



YOUR TREATMENT

Q41_1. Beforehand patient completely had enough understandable information about surgery



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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



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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



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- No score available.

△ or ▽ Statistically significant increase or decrease from 2021 to 2025

IMMEDIATE AND LONG-TERM SIDE EFFECTS

Q44. Possible side effects from treatment were definitely explained in a way the patient could understand



Q45. Patient was always offered practical advice on dealing with any immediate side effects from treatment



Q46. Patient was given information that they could access about support in dealing with immediate side effects from treatment



Q47. Patient felt possible long-term side effects were definitely explained in a way they could understand in advance of their treatment



Q48. Patient was definitely able to discuss options for managing the impact of any long-term side effects



National Cancer Patient Experience Survey 2025

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

Year on year charts

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

The scores are unadjusted and based on England scores only.

▲ or ▼ Statistically significant increase or decrease between 2024 and 2025

△ or ▽ Statistically significant increase or decrease from 2021 to 2025

SUPPORT WHILE AT HOME

Q49. Care team gave family, or someone close, all the information needed to help care for the patient at home



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



CARE FROM YOUR GP PRACTICE

Q51. Patient definitely received the help or support needed from their GP practice since their cancer diagnosis



Q52. Patient has had a cancer care review with someone from their GP practice (excluding patients who have not had a review but were diagnosed less than or around 12 months ago)



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LIVING WITH AND BEYOND CANCER

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



YOUR OVERALL NHS CARE

Q56. The whole care team worked well together



Q57. Administration of care was very good or good



Year on year charts

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Q58. Cancer research opportunities were discussed with patient



Q59. Patient's average rating of care scored from very poor to very good

