

Wales Cancer Patient Experience Survey

This questionnaire is about your cancer care and treatment. Its purpose is to provide information which can help NHS Wales and Macmillan Cancer Support monitor and improve the quality of health services for future patients. This questionnaire is available in **English and Welsh. Please complete it in your language of choice – you only need to complete it in ONE language.**

You can also fill in the survey online which we encourage you to do if possible. The online survey can be found at **www.myonlinesurvey.co.uk/WCPES**

You will need the ID number which is printed on the letter which came with the questionnaire.

Who should complete the questionnaire?

The questions should be answered by the person named in the letter enclosed with this questionnaire. If that person needs help to complete the questionnaire, the answers should be given from their point of view – not the point of view of the person helping.

Completing the questionnaire

For each question please tick inside the box that is closest to your views using a black or blue pen. Don't worry if you make a mistake; simply cross out the mistake and put a tick in the correct box. Please do not write your name or address anywhere on the questionnaire.

To make sure the information we collect is useful, we need to collect some personal details from you and to access information held about you in other NHS databases. The purpose of collecting this information is to generate collective statistics about the care and treatment people receive.

IMPORTANT INFORMATION

By completing this questionnaire, you are giving your consent for the information you provide to be used for the above purposes. Specifically, you are agreeing that:

- Your personal details and relevant health information can be held and used by Quality Health, contracted to NHS Wales and Macmillan Cancer Support to analyse the data.
- Other information about you held by the Patient Demographics Service, the data repository of Digital Health and Care Wales (DHCW) and other NHS databases can be held and used by an organisation contracted to NHS Wales to analyse the data.
- Your responses to the survey can be held and used by the NHS Welsh Cancer Intelligence and Surveillance Unit and securely linked to information about you held in other databases to help improve services.
- Information that does not directly identify you may be made available to research organisations. Any research organisation analysing the data will be subject to strict rules for the security and confidentiality of your information. They will not use your details for other purposes. Your personal information will not be shared with others unless required by law or where there is a clear overriding public interest.

www.myonlinesurvey.co.uk/WCPES/Privacy - if you would like to be sent a paper copy of the privacy notice or if you have queries about the questionnaire please call the Quality Health helpline on **0800 783 1775**.

If you need any support which is NOT about this survey, you can contact Macmillan Cancer Support on **0808 239 06 25**.

1. At which hospital did each of the following take place for you in the last 12 months?

Please think about the last time. Please tick one box in each column.

	Diagnostic Tests	Operation / Overnight Stay	Outpatients / Day Case	Radiotherapy	Chemotherapy
South West Wales					
Bronglais Hospital	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Glangwili Hospital	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Morryston Hospital	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Neath Port Talbot Hospital	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Prince Philip Hospital	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>
Singleton Hospital	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>
Withybush Hospital	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>
South East Wales					
Llandough Hospital	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>
Nevill Hall Hospital	9 <input type="checkbox"/>	9 <input type="checkbox"/>	9 <input type="checkbox"/>	9 <input type="checkbox"/>	9 <input type="checkbox"/>
Prince Charles Hospital	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>
Princess of Wales Hospital	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>
Royal Glamorgan Hospital	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>
Royal Gwent Hospital	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>
The Grange University Hospital	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>
University Hospital of Wales (Cardiff or Heath)	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>
Velindre Cancer Centre	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>
Ysbyty Ystrad Fawr	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>
North Wales					
Glan Clwyd Hospital	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>
Wrexham Maelor Hospital	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>
Ysbyty Gwynedd	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>
Other					
Other (please specify each hospital for each treatment)	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>
Don't know / can't remember	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>
Not applicable - I did not have this in the last 12 months	23 <input type="checkbox"/>	23 <input type="checkbox"/>	23 <input type="checkbox"/>	23 <input type="checkbox"/>	23 <input type="checkbox"/>

BEFORE YOUR DIAGNOSIS

These questions are about what happened before you found out you had cancer.

2. How long was it from the time you first thought something might be wrong with you until you **first saw a GP or other doctor**?

- 1 Less than 3 months
- 2 3-6 months
- 3 6-12 months
- 4 More than 12 months
- 5 I did not think something was wrong with me until I was told
- 6 Don't know / can't remember

3. Did you understand the explanation of what was wrong with you?

- 1 Yes, I completely understood it
- 2 Yes, I understood some of it
- 3 No, I did not understand it
- 4 Don't know / can't remember

4. Before you were told you needed to go to hospital about cancer, how many times did you see your GP (family doctor) about the health problem caused by cancer?

- 1 I saw my GP **once**
- 2 I saw my GP **twice**
- 3 I saw my GP **3 or 4** times
- 4 I saw my GP **5 or more** times
- 5 I went straight to hospital following a cancer screening appointment
- 6 I went straight to hospital via Accident & Emergency
- 7 Other
- 8 Don't know / can't remember

5. Were you told that you would need further tests at hospital to see if you had cancer? (This is sometimes called the 'cancer pathway'.)

- 1 Yes
- 2 No
- 3 Don't know / can't remember

6. How do you feel about the length of time you had to wait before your **first appointment with a healthcare professional in a hospital**?

- 1 I was seen as soon as I thought was necessary
- 2 I should have been seen a bit sooner
- 3 I should have been seen a lot sooner

7. In the last 12 months, have you had diagnostic test(s) for cancer such as an endoscopy, biopsy, mammogram, or scan?

- 1 Yes → **Go to Q8**
- 2 No → **Go to Q10**

Thinking about the LAST time you had a diagnostic test for your cancer....

8. Beforehand, did you have all the information you needed about your test?

- 1 Yes
- 2 No, I would have liked more information
- 3 No, I did not need any information
- 4 Don't know / can't remember

9. Were the **results** of the test(s) explained in a way you could understand?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No, I did not understand the explanation
- 4 No, but I would have liked an explanation
- 5 I did not need an explanation
- 6 Don't know / can't remember

FINDING OUT YOU HAD CANCER

10. How do you feel about the way you were told you had cancer?

- 1 It was done sensitively
- 2 It should have been done **a bit** more sensitively
- 3 It should have been done **a lot** more sensitively

11. Did you understand the explanation of what was wrong with you?

- 1 Yes, I completely understood it
- 2 Yes, I understood some of it
- 3 No, I did not understand it
- 4 Don't know / can't remember

12. When you were told you had cancer, were you given **written** information about the type of cancer you had?

- 1 Yes, and it was **easy** to understand
- 2 Yes, but it was **difficult** to understand
- 3 No, I was not given written information about the type of cancer I had
- 4 I did not need written information
- 5 Don't know / can't remember

13. Were you given any of the following information before treatment?

Tick all that apply

- 1 Physical activity and exercise
- 2 Nutrition and diet
- 3 Psychological support
- 4 None of the above
- 5 Don't know / can't remember
- 6 Not applicable - didn't have time

14. When you were first told that you had cancer, had you been told you could bring a family member or friend with you?

- 1 Yes
- 2 No
- 3 I was told by phone or letter
- 4 Don't know / can't remember

DECIDING THE BEST TREATMENT AND/OR CARE FOR YOU

15. Before your cancer treatment started, were your treatment options discussed with you?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 There was only one type of treatment that was suitable for me
- 5 Don't know / can't remember

16. Were you involved as much as you wanted to be in decisions about your care and treatment?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 Don't know / can't remember

17. Were the possible side effects of treatment(s) explained in a way you could understand?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, side effects were not explained
- 4 I did not need an explanation
- 5 Don't know

18. Were you offered practical advice and support in dealing with the side effects of your treatment(s)?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, I was not offered any practical advice or support
- 4 Don't know / can't remember

19. Before you started your treatment, were you also told about any side effects of the treatment that could affect you in the future rather than straight away?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, future side effects were not explained
- 4 I did not need an explanation
- 5 Don't know / can't remember

HEALTHCARE PROFESSIONALS

The next few questions are about **Key Workers, Clinical Nurse Specialists** and **other health professionals**. **Key Worker** is the title given to a health professional who you can contact for advice and information who will coordinate your care. This person may change depending on where you are in your cancer care and treatment. They could be your Clinical Nurse Specialist or another health care professional. A **Clinical Nurse Specialist (CNS)** is a specialist cancer nurse who makes sure you get the right care and gives you help and advice on coping with cancer. **Other health professionals** (sometimes called Allied Health Professionals) include people like physiotherapists, dietitians, speech and language therapists, occupational therapists and lymphoedema specialists.

Please tick one box in each row.

20. Were you given the name and contact details of your Key Worker?

1 Yes 2 No 3 Don't know / not sure

21. Did your care include access to...

	Yes, and this was my Key Worker	Yes, but this was not my Key Worker	No, I did not have one as part of my care team	Don't know / can't remember
A CNS	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Another health professional	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

22. How easy was it for you to contact your...

	Easy	Sometimes easy, sometimes difficult	Difficult	I have not tried to contact them	Not applicable
Key Worker	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
CNS	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Other health professional	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

23. When you had questions to ask, how often did you get answers you can understand from your...

	All or most of the time	Some of the time	Rarely or never	I did not ask any questions	Not applicable
Key Worker	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
CNS	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Other health professional	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

24. Did they provide you with the information you needed to make informed decisions about your treatment?

	Yes, completely	Yes, to some extent	No	Don't know / can't remember	Not applicable
Key Worker	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
CNS	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Other health professional	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

25. There are a few ways in which you might have been given an opportunity to discuss your needs and concerns, be they physical, emotional, mental, spiritual, social or environmental, to put together your care plan. Two tools that might be used for this are a Holistic Needs Assessment (HNA) or Patient-Reported Outcome Measures (PROMs), both done either electronically or on paper.

PROMs are questionnaires that have been designed and tested with patients and clinicians for either specific diseases or for general health or quality of life.

Were you offered the opportunity to discuss your needs and concerns?

- 1 Yes - using a Holistic Needs Assessment
- 2 Yes - using a PROM assessment
- 3 Yes - I was asked to complete a Holistic Needs Assessment and a PROM
- 4 Yes - I was offered a discussion about my needs and concerns but unsure of the format
- 5 No
- 6 Don't know / can't remember

26. Have you been offered a written care plan? *(A written care plan is a document that sets out your needs and goals for caring for you and your cancer. It is an agreement or plan between you and your health professional to help meet those goals.)*

- 1 Yes
- 2 No
- 3 I do not know / understand what a care plan is
- 4 Don't know / can't remember

SUPPORT FOR PEOPLE WITH CANCER

27. How much information about support or self-help groups did your healthcare team give you?

- 1 Not enough
- 2 The right amount
- 3 Too much
- 4 I was not given any information
- 5 Don't know / can't remember

28. During your care, were you told about voluntary or charity support?

- 1 Yes
- 2 No
- 3 Don't know / can't remember

29. Did your healthcare team discuss with you or give you information about the impact cancer could have on your day to day activities (for example, your work life or education)?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 Don't know / can't remember

30. Did your healthcare team give you information about how to get financial help or any benefits you might be entitled to?

- 1 Yes
- 2 Yes, but I would have liked more information
- 3 No, but I would have liked information
- 4 It was not necessary
- 5 Don't know / can't remember

OPERATIONS

31. During the last 12 months, have you **had an operation for your cancer** (such as removal of a tumour or lump)?

- 1 Yes → **Go to Q32**
- 2 No → **Go to Q34**

Thinking about the LAST time you went into hospital for an operation for your cancer...

32. Beforehand, did you have all the information you needed about your operation?

- 1 Yes
- 2 No, I would have liked more information
- 3 Don't know / can't remember

33. After the operation, did a member of staff explain how it had gone in a way you could understand?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No, but I would have liked an explanation
- 4 I did not need an explanation

HOSPITAL CARE AS AN INPATIENT

34. During the last 12 months, have you had an operation or stayed overnight **for cancer care**?

- 1 Yes → **Go to Q35**
- 2 No → **Go to Q44**

Thinking about the LAST time you had an operation or stayed overnight for cancer care...

35. Overall, while you were in hospital, were you treated with dignity and respect?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

36. Were you able to discuss any worries or fears with staff during your hospital visit?

- 1 As much as I wanted
- 2 Most of the time
- 3 Some of the time
- 4 Not at all, but would have liked to
- 5 I did not have any worries or fears

Please remember you are thinking about the LAST time you had an operation or stayed overnight for cancer care...

37. Did your family or someone else close to you have enough opportunity to talk to a healthcare professional?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 No family or friends were involved
- 5 My family did not want to talk to a healthcare professional

38. Did you have confidence and trust in the healthcare professionals treating you?

- 1 Yes, in all of them
- 2 Yes, in some of them
- 3 No, in none of them

39. Were you given enough privacy when discussing your condition or treatment?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

40. Were you given enough privacy when being examined or treated?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

41. Do you think the hospital staff did everything they could to help control your pain?

- 1 All of the time
- 2 Some of the time
- 3 Not at all
- 4 I did not have any pain

42. Were you given clear written information about what you should or should not do after leaving hospital?

- 1 Yes
- 2 No
- 3 I did not need written information
- 4 Don't know / can't remember

43. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

- 1 Yes
- 2 No
- 3 Don't know / can't remember

OUTPATIENTS / DAY CASE

APPOINTMENTS

44. In the last 12 months, have you had an outpatient or day case appointment for your cancer? This might include virtual appointments.

- 1 Yes → Go to Q45
- 2 No → Go to Q47

Thinking about the LAST time you attended hospital as an outpatient or day case for cancer care ...

45. While you were being treated as an outpatient or day case, did hospital staff do everything they could to help control your pain?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, they could have done more
- 4 I did not have any pain

46. While you were being treated as an outpatient or day case, were you given enough emotional support from hospital staff?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, I would have liked more support
- 4 I did not need emotional support from staff

RADIOTHERAPY / CHEMOTHERAPY

47. Have you had radiotherapy treatment?

- 1 Yes → Go to Q48
- 2 No → Go to Q49

Thinking about the LAST time you had radiotherapy treatment...

48. Beforehand, did you have all of the information you needed about your radiotherapy treatment?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need any information

49. Have you had chemotherapy treatment?

- 1 Yes → Go to Q50
- 2 No → Go to Q51

Thinking about the LAST time you had chemotherapy treatment...

50. Beforehand, did you have all of the information you needed about your chemotherapy treatment?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need any information

ARRANGING HOME SUPPORT

Thinking about the LAST time you left the hospital named on the covering letter following care for your cancer...

51. Did healthcare professionals give your family or someone close to you all the information they needed to help care for you at home?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 No family or friends were involved
- 5 My family did not want to talk to a healthcare professional

52. Were you given information about how to manage your health and wellbeing after your treatment ends? (This information may be given to you BEFORE your treatment ends. This is sometimes called 'rehabilitation.')

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 Don't know / can't remember
- 5 Not applicable

53. Were you offered practical advice and support in dealing with the side effects of your treatment(s) at home (such as physical activity advice, how to manage diet and fatigue)?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No, I was not offered any practical advice or support
- 4 Don't know / can't remember

54. After leaving hospital, were you given enough care and help from health or social services (for example, district nurses, home helps or physiotherapists)?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 I did not need help
- 5 Don't know / can't remember

CARE FROM YOUR GENERAL PRACTICE

55. After leaving hospital, were you given enough care and help from your GP and the GP practice?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 I did not need help
- 5 Don't know / can't remember

56. As far as you know, did your GP practice have all the information they needed about your care after leaving hospital?

- 1 Yes
- 2 No
- 3 Don't know / can't remember

YOUR OVERALL NHS CARE

57. Since your diagnosis, has anyone discussed with you whether you would like to take part in cancer research (e.g. clinical trials)?

- 1 Yes
- 2 No
- 3 Don't know / can't remember

58. Since your diagnosis, have the different professionals treating and caring for you worked well together to give you the best possible care?

- 1 Yes, always
- 2 Yes, most of the time
- 3 Yes, some of the time
- 4 No, never
- 5 Don't know / can't remember

59. Overall, how would you rate the administration of your care (getting letters at the right time, doctors having the right notes/tests results, etc)?

- 1 Very good
- 2 Good
- 3 Neither good nor bad
- 4 Quite bad
- 5 Very bad
- 6 Don't know / can't remember

60. Were you able to speak in Welsh to staff if you needed to?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 Don't know / can't remember
- 5 Not applicable to me

61. Overall how would you rate your care?
(Please circle a number)

I had a very poor experience I had a very good experience

0 1 2 3 4 5 6 7 8 9 10

YOUR CONDITION

We would like to understand a little more about your cancer and how you are now. Please answer these questions about the cancer that was treated at the hospital named on the covering letter.

62. How long is it since you were first treated for this cancer?

- 1 Less than 1 year
- 2 1 to 5 years
- 3 More than 5 years
- 4 Don't know / can't remember

63. Is this the first time you have been treated for cancer?

- 1 Yes, this is the first time I have been treated for cancer → **Go to Q65**
- 2 No, I have been treated for the same type of cancer before but it has now come back → **Go to Q64**
- 3 No, I have been treated for a different type of cancer before → **Go to Q65**
- 4 Don't know → **Go to Q65**

64. When your cancer came back did it:

- 1 Come back only in the same place as before
- 2 Spread to somewhere else in the body

65. How has your cancer responded to treatment?

- 1 My cancer has responded fully to treatment (I have no signs or symptoms of cancer)
- 2 My cancer has been treated but is still present
- 3 My cancer has not been treated at all
- 4 My cancer has come back after it was originally treated
- 5 My original cancer responded but I now have a new cancer
- 6 I am not certain what is happening with my cancer

ABOUT YOU

If you are helping someone to complete this questionnaire, please make sure this information is the patient's not your own.

66. What year were you born?

(Please write in) e.g.

1	9	4	4
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67a. What is your sex?

A question about gender identity will follow.

- 1 Female
- 2 Male

67b. Is the gender you identify with the same as your sex registered at birth?

This question is voluntary.

- 1 Yes
- 2 No, write in gender identity

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68. Which of the following best describes how you think of yourself? **(Tick one box only)**

- 1 Heterosexual / straight (opposite sex)
- 2 Bisexual (both sexes)
- 3 Gay or lesbian (same sex)
- 4 Other
- 5 Don't know / not sure
- 6 Prefer not to answer

69. What is your **main** employment status?

*(If on maternity or sick leave answer in relation to your **usual** employment status.)*

- 1 Full time employment
- 2 Part time employment
- 3 Homemaker
- 4 Student (in education)
- 5 Retired
- 6 Unemployed – and seeking work
- 7 Unemployed – unable to work for health reasons
- 8 Other

70. Do you have any of the following? Select ALL conditions you have that have lasted or are expected to last for 12 months or more.

- 1 Breathing problem, such as asthma
- 2 Blindness or partial sight
- 3 Dementia or Alzheimer's disease
- 4 Deafness or hearing loss
- 5 Diabetes
- 6 Heart problem, such as angina
- 7 Joint problem, such as arthritis
- 8 Kidney or liver disease
- 9 Learning disability
- 10 Mental health condition
- 11 Neurological condition
- 12 I do not have any of these conditions

71. To which of these ethnic groups would you say you belong? **(Tick ONE only)**

a. WHITE

- 1 Welsh / English / Scottish / Northern Irish / British
- 2 Irish
- 3 Gypsy or Irish Traveller
- 4 Any other White background (Please write in box)

b. MIXED / MULTIPLE ETHNIC GROUPS

- 5 White and Black Caribbean
- 6 White and Black African
- 7 White and Asian
- 8 Any other Mixed / Multiple ethnic background (Please write in box)

c. ASIAN OR ASIAN BRITISH

- 9 Indian
- 10 Pakistani
- 11 Bangladeshi
- 12 Chinese
- 13 Any other Asian background (Please write in box)

d. BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH

- 14 Caribbean
- 15 African
- 16 Any other Black / African / Caribbean background (Please write in box)

e. OTHER ETHNIC GROUP

- 17 Arab
- 18 Any other ethnic group (Please write in box)

72. Could we send you a survey in the future to ask about your health and healthcare?

- 1 Yes, and I understand that this does **NOT** mean that I would have to take part in the future survey
- 2 No, I would prefer you not to contact me again

OTHER COMMENTS

Is there anything you would like to tell us about how your care and treatment was affected by the COVID-19 pandemic?

Please note that the comments you provide in the boxes that follow will be looked at in full by NHS Wales, Macmillan, Local Healthboards and researchers analysing the data. We will remove any information that could identify you before publishing any of your feedback.

If there is anything else you would like to tell us about your experiences as a cancer patient in Wales, please do so here.

Was there anything particularly good about your care?

Was there anything that could be improved?

Any other comments?