

Yeovil District Hospital NHS Foundation Trust

**2013 Chemotherapy Patient Experience Survey
Results**



Survey results

This section sets out the full results from the 2013 Chemotherapy Survey ordered in exactly the same way as in the survey questionnaire sent to patients.

Reading the columns of figures

The results are shown firstly in absolute numbers then as percentages. The first two columns show the results for the Trust (Trust) and the second two columns show the results for all of the Trusts who took part in the survey (All).

Conventions

The percentages are calculated after excluding those patients who did not answer that particular question and neutral responses e.g. 'don't know' or 'can't remember'. All percentages are rounded to the nearest whole number. When added together, the percentages for all answers to a particular question may not total exactly 100% because of this rounding.

On some questions there are also some figures which are italicised. The percentages on these questions have been recalculated to exclude responses where the question was not applicable to the patient's circumstances. The italicised percentages will add up to 100%.

The 'Missing' figures show the number of patients who did not reply to a particular question. In some cases, the 'Missing' figure is quite high because it includes patients who did not answer that question or group of questions because it was not applicable to their circumstances (e.g. question 7).

Changes made to the data

There are a number of questions which are 'routed' (i.e. where patients are directed to a subsequent question depending on their answer to the lead question). Sometimes there are conflicts in the answers that patients give to these questions and the data is corrected to account for this. For example, if response option 1 in question 6 is ticked and the patient goes on to answer question 7, then any data between question 6 and question 8 (where the patient was directed) will be deleted as question 7 should not have been answered by the patient.

BEFORE YOUR CHEMOTHERAPY		Total	Trust	Total	All
1.	When did you sign the consent form for your chemotherapy?				
	I signed the consent form when I was first told I needed chemotherapy	17	41%	6308	41%
	I signed the consent form before I had my first chemotherapy treatment	20	49%	6176	40%
	I signed the consent form when I had my first chemotherapy treatment	0	0%	585	4%
	I did not sign a consent form	0	0%	213	1%
	Don't know / can't remember	4	10%	2285	15%
	Missing	0		435	
2.	Do you think you were given enough time to ask questions between being told you needed chemotherapy and signing the consent form?				
	<i>Yes plenty of time</i>	37	97%	13235	95%
	<i>I would have liked more time</i>	1	3%	576	4%
	My case was urgent so I did not have time	2	5%	667	4%
	<i>No I did not have enough time</i>	0	0%	123	1%
	Don't know / can't remember	1	2%	1103	7%
	Missing	0		298	
3.	Were you offered a written record or summary of the discussion about your treatment?				
	Yes	25	89%	8072	66%
	No	3	11%	4189	34%
	Don't know / can't remember	11	28%	3468	22%
	Missing	2		273	
4.	Before you started your treatment, did anyone talk to you about whether you would like to take part in clinical trials?				
	Yes	22	61%	5985	42%
	No	14	39%	8273	58%
	Don't know / can't remember	4	10%	1537	10%
	Missing	1		207	
5.	Were you told clearly why you needed chemotherapy?				
	<i>Yes very clearly</i>	38	95%	14218	90%
	<i>Yes to some extent</i>	2	5%	1460	9%
	No	0	0%	131	1%
	Don't know / can't remember	1	2%	80	1%
	Missing	0		113	
6.	Were you given a choice about where you would have your chemotherapy? (e.g. hospital, home, GP surgery, community clinic)				
	Yes	14	36%	3924	26%
	No	25	64%	11193	74%
	Don't know / can't remember	2	5%	576	4%
	Missing	0		309	

BEFORE YOUR CHEMOTHERAPY		Total	Trust	Total	All
7.	If you were not given a choice were you told why not?				
	Yes	7	33%	2570	25%
	No	14	67%	7518	75%
	Don't know / can't remember	4	16%	878	8%
	Missing	16		5036	
8.	Were you told about any risks or side effects that there might be with the chemotherapy that you would be having?				
	Yes very clearly	30	73%	12722	81%
	Yes to some extent	8	20%	2654	17%
	No	3	7%	329	2%
	Don't know / can't remember	0	0%	166	1%
	Missing	0		131	
9.	Were you told you could choose not to have chemotherapy if you did not want it?				
	Yes	31	76%	9634	70%
	No	10	24%	4153	30%
	Don't know / can't remember	0	0%	1969	12%
	Missing	0		246	
10.	Patients should have a chemotherapy 'treatment plan' which should include information about the number of cycles, how often the chemotherapy would be, how long the treatment plan would last etc. Were you told clearly about your treatment plan?				
	Yes very clearly	34	83%	13162	85%
	Yes to some extent	7	17%	1995	13%
	No	0	0%	291	2%
	Don't know / can't remember	0	0%	181	1%
	I didn't have a treatment plan	0	0%	219	1%
	Missing	0		154	
11.	Were you told you could bring someone with you to your appointments if you wanted to?				
	Yes	37	93%	14014	92%
	No	3	8%	1243	8%
	Don't know / can't remember	1	2%	576	4%
	Missing	0		169	
12.	If you had any worries about the chemotherapy, were you able to talk about these with the staff?				
	Yes completely	37	90%	13285	84%
	Yes to some extent	3	7%	2211	14%
	No	1	2%	231	1%
	Don't know / can't remember	0	0%	123	1%
	Missing	0		152	

BEFORE YOUR CHEMOTHERAPY	Total	Trust	Total	All
13. Before your treatment began, were you given the opportunity to talk to someone about any of the following issues:				
Emotional concerns				
Yes	25	71%	8804	62%
No	10	29%	5472	38%
Missing	6		1726	
Practical concerns				
Yes	31	84%	8983	65%
No	6	16%	4886	35%
Missing	4		2133	
Financial concerns				
Yes	21	64%	5697	44%
No	12	36%	7299	56%
Missing	8		3006	
Psychological concerns				
Yes	21	62%	6260	48%
No	13	38%	6713	52%
Missing	7		3029	
Spiritual concerns				
Yes	16	50%	4009	32%
No	16	50%	8372	68%
Missing	9		3621	
14. Were you given written information about the chemotherapy and its side effects?				
Yes	35	92%	14531	95%
No	3	8%	724	5%
Don't know / can't remember	3	7%	545	3%
Missing	0		202	

BEFORE YOUR CHEMOTHERAPY	Total	Trust	Total	All
15. If you were given written information, did it tell you what to do if you had any of the following serious side effects:				
Temperature / fever				
Yes	32	97%	13757	97%
No	1	3%	396	3%
Missing	8		1849	
Persistent vomiting				
Yes	26	90%	12830	95%
No	3	10%	705	5%
Missing	12		2467	
Persistent diarrhoea				
Yes	24	83%	12623	94%
No	5	17%	827	6%
Missing	12		2552	
16. Were you told about the importance of sharing this information with your family / next of kin / carers?				
Yes	31	94%	10534	85%
No	2	6%	1848	15%
Don't know / can't remember	0	0%	1476	11%
Missing	8		2144	
17. Were you given a contact number to ring if you had any questions about your care?				
Yes	41	100%	15355	98%
No	0	0%	288	2%
Don't know / can't remember	0	0%	222	1%
Missing	0		137	
18. Were you given a card which included a 24 hour helpline number to call if you felt worried or unwell at any time during your chemotherapy?				
Yes	37	93%	14623	95%
No	3	8%	803	5%
Don't know / can't remember	1	2%	424	3%
Missing	0		152	
19. If you or a relative called the 24 hour helpline, did you get the help or advice you needed?				
<i>Yes completely</i>	9	64%	6946	79%
<i>Yes to some extent</i>	4	29%	1554	18%
No	1	7%	259	3%
I did not need to call the helpline	22	61%	5513	38%
Don't know / can't remember	0	0%	88	1%
Missing	5		1642	

BEFORE YOUR CHEMOTHERAPY		Total	Trust	Total	All
20.	After you were told you were ready to start chemotherapy, how long did you have to wait for your first treatment?				
	Less than 2 weeks	15	39%	6312	41%
	Between 2 and 4 weeks	19	50%	6421	41%
	More than 4 weeks	1	3%	1262	8%
	Don't know / can't remember	3	8%	1550	10%
	Missing	3		457	
21.	If you had tests before your chemotherapy, were you told what these tests were for?				
	Yes	25	100%	11187	96%
	No but I would have like to be told	0	0%	508	4%
	It was not necessary	10	26%	2227	14%
	Don't know / can't remember	3	8%	1580	10%
	Missing	3		500	
22.	If you had blood tests on the same day as your chemotherapy, how long did you have to wait for the results?				
	Up to 1 hour	13	57%	3535	45%
	More than 1 hour but less than 2 hours	10	43%	2832	36%
	More than 2 hours but less than 4 hours	0	0%	1231	16%
	More than 4 hours	0	0%	287	4%
	I didn't have blood tests the same day	13	34%	5982	40%
	Don't know / can't remember	2	5%	1275	8%
	Missing	3		860	
23.	If you had the choice, where and when would you like to have your blood taken?				
	At the hospital on the day of treatment	22	58%	6428	42%
	At the hospital a day or two before treatment	6	16%	4129	27%
	At my GP practice a day or two before treatment	10	26%	4151	27%
	Don't know / not sure	0	0%	549	4%
	Missing	3		745	

HAVING YOUR CHEMOTHERAPY		Total	Trust	Total	All
24. Did you have all or most of your chemotherapy as an oral treatment?					
Yes		4	10%	3526	23%
No		36	90%	11765	77%
Missing		1		711	
25. If you did have oral chemotherapy, were you given written information about the following:					
What to do if you missed a dose (including vomiting it up)					
Yes		3	75%	2669	83%
No		1	25%	539	17%
Missing		37		12794	
How to handle the oral chemotherapy safely					
Yes		2	67%	2592	86%
No		1	33%	420	14%
Missing		38		12990	
26. Where did you have your chemotherapy?					
I had all or most of my chemotherapy as an inpatient in hospital (planned stay overnight)		0	0%	779	5%
I had all or most of my chemotherapy as a day or outpatient at the hospital		38	95%	12519	81%
I had all or most of my chemotherapy at home		2	5%	2108	14%
Missing		1		596	
27. If you were an inpatient, were you told how long you would be in hospital each time you went for chemotherapy?					
<i>Yes very clearly</i>		0	0%	624	73%
<i>Yes to some extent</i>		0	0%	182	21%
<i>No</i>		0	0%	54	6%
Don't know / can't remember		0	0%	34	4%
Missing		41		15108	
28. Has your chemotherapy appointment ever been changed because of staff shortages?					
<i>Yes a lot of times</i>		0	0%	108	1%
<i>Only once or twice</i>		5	14%	1086	8%
<i>No never</i>		32	86%	12094	91%
Don't know / can't remember		1	3%	224	2%
Missing		3		2490	
29. Have you ever had to miss your chemotherapy for other reasons such as your pre-meds or chemotherapy not being ready for you at the hospital?					
<i>Yes a lot of times</i>		0	0%	62	0%
<i>Only once or twice</i>		0	0%	1196	9%
<i>No never</i>		37	100%	12121	91%
Don't know / can't remember		0	0%	112	1%
Missing		4		2511	

HAVING YOUR CHEMOTHERAPY		Total	Trust	Total	All
30.	While you were waiting to have your most recent chemotherapy, was the place where you had to wait comfortable?				
	Yes	38	100%	12841	95%
	No	0	0%	634	5%
	Don't know / can't remember	0	0%	51	0%
	Missing	3		2476	
31.	While you were waiting to have your most recent chemotherapy, were there enough seats for patients?				
	Yes	37	97%	12363	92%
	No	1	3%	1034	8%
	Don't know / can't remember	0	0%	113	1%
	Missing	3		2492	
32.	While you were waiting to have your most recent chemotherapy, was there somewhere to get something to drink or eat nearby?				
	Yes	37	97%	12792	96%
	No	1	3%	578	4%
	Don't know / can't remember	0	0%	161	1%
	Missing	3		2471	
33.	While you were waiting to have your most recent chemotherapy, were there staff available to answer any questions you had?				
	Yes	38	100%	12634	95%
	No	0	0%	672	5%
	Don't know / can't remember	0	0%	234	2%
	Missing	3		2462	
34.	Before your last treatment, did the nurse giving your chemotherapy ask about any side effects (e.g. sickness, problems with mouth or throat) that you might have been experiencing?				
	Yes	34	92%	11639	91%
	No	3	8%	1205	9%
	Don't know / can't remember	1	3%	645	5%
	Missing	3		2513	
35.	If your treatment has been changed for any reason, were you given a clear explanation about why this was?				
	Yes very clear	14	100%	4396	84%
	Yes to some extent	0	0%	631	12%
	No	0	0%	192	4%
	My treatment has not been changed	22	58%	7977	60%
	Don't know / can't remember	2	5%	137	1%
	Missing	3		2669	
36.	When you had your most recent chemotherapy were you:				
	In a room on your own	2	5%	1108	8%
	In a room with other patients	36	95%	12274	92%
	Missing	3		2620	

HAVING YOUR CHEMOTHERAPY	Total	Trust	Total	All
37. If you were in a room with other patients did you feel comfortable speaking to staff about your treatment or other issues?				
Yes	36	95%	11767	93%
No	2	5%	918	7%
Missing	3		3317	
38. If you had the choice, would you prefer to have your chemotherapy:				
In a room on your own	6	16%	2919	22%
In a room with other patients	32	84%	10171	78%
Missing	3		2912	
39. If you needed help (e.g. getting a drink, taken to the toilet) while you were having your most recent chemotherapy, was there a member of staff there to help you?				
<i>Yes all or most of the time</i>	29	91%	7571	86%
<i>Yes but only some of the time</i>	3	9%	1081	12%
No	0	0%	164	2%
I did not need help from staff	6	16%	4480	34%
Missing	3		2706	
40. If you were given any drugs to take home with you, were you given a clear explanation about how to take them?				
<i>Yes very clear</i>	38	97%	12151	93%
<i>Yes to some extent</i>	0	0%	687	5%
No	1	3%	174	1%
Don't know / can't remember	0	0%	126	1%
Missing	2		2864	
41. After your last treatment did you feel sick (nauseous)?				
No I did not feel sick (nauseous)	18	44%	7829	51%
Yes I felt a little sick (nauseous)	14	34%	4872	32%
Yes I felt sick (nauseous) quite a lot	6	15%	1909	12%
Yes I felt severe sickness (nausea)	3	7%	853	6%
Missing	0		539	
42. After your last treatment were you sick (did you vomit)?				
No I was not sick (did not vomit)	35	85%	12860	83%
Yes I was sick (vomited) a little	2	5%	1685	11%
Yes I was sick (vomited) quite a lot	3	7%	550	4%
Yes I was sick (vomited) severely	1	2%	326	2%
Missing	0		581	
43. After your last treatment did you have any problems with your mouth or throat?				
No I did not have any problems with my mouth or throat	24	59%	8965	58%
Yes I did have a few problems with my mouth or throat	11	27%	4760	31%
Yes I did have quite a lot of problems with my mouth or throat	3	7%	1151	7%
Yes I did have severe problems with my mouth or throat	3	7%	565	4%
Missing	0		561	

HAVING YOUR CHEMOTHERAPY		Total	Trust	Total	All
44.	Did the nurses who gave you your chemotherapy know about the side effects you experienced after the treatment?				
	<i>Yes completely</i>	28	85%	8948	75%
	<i>Yes to some extent</i>	4	12%	2257	19%
	<i>No</i>	1	3%	655	6%
	I did not have any symptoms	6	15%	2763	18%
	Don't know / not sure	1	3%	466	3%
	Missing	1		913	
45.	Did the nurses give you advice on how to manage these side effects?				
	<i>Yes completely</i>	24	75%	8294	75%
	<i>Yes to some extent</i>	8	25%	2420	22%
	<i>No</i>	0	0%	275	3%
	I did not have any symptoms	0	0%	131	1%
	Don't know / not sure	0	0%	91	1%
	Missing	9		4791	

WHEN CHEMOTHERAPY FINISHED	Total	Trust	Total	All
46. When your course of chemotherapy treatment finished, were you told what to do if you noticed any new symptoms or had any worries about your health?				
Yes	30	88%	9781	82%
No	4	12%	2083	18%
Don't know / can't remember	3	8%	879	7%
Missing	4		3259	
47. Were you told about any long-term side effects of your chemotherapy treatment?				
Yes completely	14	38%	5356	45%
Yes to some extent	13	35%	3309	28%
No	10	27%	3147	27%
Don't know / can't remember	0	0%	960	8%
Missing	4		3230	
48. Were you told how long it might take you to recover from the effects of the chemotherapy?				
Yes	22	65%	7353	65%
No	12	35%	3933	35%
Don't know / can't remember	2	6%	1478	12%
Missing	5		3238	

WHEN CHEMOTHERAPY FINISHED	Total	Trust	Total	All
49. After your treatment finished, were you given the opportunity to talk to someone about any of the following issues:				
Emotional concerns				
Yes	15	45%	5084	44%
No	18	55%	6360	56%
Missing	8		4558	
Practical concerns				
Yes	16	48%	4968	44%
No	17	52%	6212	56%
Missing	8		4822	
Financial concerns				
Yes	11	34%	3351	32%
No	21	66%	7244	68%
Missing	9		5407	
Psychological concerns				
Yes	14	44%	3938	37%
No	18	56%	6788	63%
Missing	9		5276	
Spiritual concerns				
Yes	11	34%	2653	26%
No	21	66%	7592	74%
Missing	9		5757	
50. If you did have any of these concerns, were you offered a care plan to specifically help with these concerns?				
Yes	8	57%	2366	63%
No	6	43%	1378	37%
Don't know / can't remember	0	0%	1177	24%
Missing	27		11081	
51. At the end of your treatment, were you offered written information about the treatment you had?				
Yes	18	58%	4359	41%
No	13	42%	6152	59%
Don't know / can't remember	5	14%	2001	16%
Missing	5		3490	

YOUR OVERALL NHS CARE

	Total	Trust	Total	All
52. Overall, how would you rate your care?				
Excellent	32	78%	9616	62%
Very good	8	20%	4523	29%
Good	1	2%	1140	7%
Fair	0	0%	253	2%
Poor	0	0%	56	0%
Missing	0		414	

ABOUT YOU	Total	Trust	Total	All
53. Age:				
16 - 25	1	3%	73	0%
26 - 35	0	0%	278	2%
36 - 50	7	18%	2023	13%
51 - 65	7	18%	5410	36%
66 - 75	14	36%	4817	32%
76+	10	26%	2519	17%
Missing	2		882	
54. Are you male or female?				
Male	15	38%	6168	40%
Female	25	63%	9219	60%
Missing	1		615	
55. Do you have any of the following longstanding conditions?				
Deafness or severe hearing impairment	3	7%	1103	7%
Missing	38		14899	
Blindness or partially sighted	0	0%	267	2%
Missing	41		15735	
A long-standing physical condition	5	12%	1849	12%
Missing	36		14153	
A learning disability	0	0%	80	0%
Missing	41		15922	
A mental health condition	2	5%	336	2%
Missing	39		15666	
A long-standing illness such as HIV diabetes chronic heart disease or epilepsy	4	10%	1846	12%
Missing	37		14156	
No I do not have a longstanding condition	27	66%	10119	63%
Missing	14		5883	

ABOUT YOU	Total	Trust	Total	All
56. Which of the following best describes your sexual orientation?				
Heterosexual / straight (opposite sex)	37	97%	14097	94%
Bisexual (both sexes)	0	0%	27	0%
Gay or Lesbian (same sex)	0	0%	130	1%
Other	0	0%	43	0%
Prefer not to answer	1	3%	678	5%
Missing	3		1027	
57. To which of these ethnic groups would you say you belong?				
White British	41	100%	14199	91%
White Irish	0	0%	242	2%
Any other White background	0	0%	357	2%
White and Black Caribbean	0	0%	29	0%
White and Black African	0	0%	8	0%
White and Asian	0	0%	30	0%
Any other mixed background	0	0%	25	0%
Indian	0	0%	160	1%
Pakistani	0	0%	71	0%
Bangladeshi	0	0%	26	0%
Any other Asian background	0	0%	83	1%
Caribbean	0	0%	158	1%
African	0	0%	106	1%
Any other Black background	0	0%	11	0%
Chinese	0	0%	52	0%
Any other ethnic group	0	0%	34	0%
Missing	0		411	