



Survey Handbook

Under 16 Cancer Patient Experience Survey

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The Under 16 Cancer Patient Experience Survey Programme is run by Picker on behalf of NHS England and NHS Improvement

www.picker.org



Picker

Picker is an international charity dedicated to ensuring the highest quality health and social care for all, always. We are here to:

- Influence policy and practice so that health and social care systems are always centred around people's needs and preferences.
- Inspire the delivery of the highest quality care, developing tools and services which enable all experiences to be better understood.
- Empower those working in health and social care to improve experiences by effectively measuring, and acting upon, people's feedback.

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For more information about the Under 16 Cancer Patient Experience Survey, please visit the survey website:

http://www.under16cancerexperiencesurvey.co.uk



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Introduction

The Under 16 Cancer Patient Experience Survey is being carried out by the NHS England and NHS Improvement and Picker to understand the experiences of cancer and tumour care among children under the age of 16 and their parents/carers, in England. The results of the survey will be used to understand and improve cancer care both nationally and locally.

The survey was developed after the Independent Cancer Taskforce published its report 'Achieving World-Class Cancer Outcomes: A Strategy for England 2015-20'. The Strategy highlighted the importance of patient experience data in service development and improvement. Although a national survey of cancer patient experience exists in England for adults (the National Cancer Patient Experience Survey), there was no equivalent programme for children. It was therefore recommended that data was collected on patient experience for under 16s with cancer. This commitment to improvement was also restated in the NHS Long Term Plan.

Survey Information

How was the survey developed?

The survey was developed in 2020 with the support of a wide range of key stakeholders including young patients, parents, clinicians, commissioners, cancer charities and data analysts. An advisory group provide ongoing expert advice on the development and implementation of the survey. The fieldwork for the first survey (Under 16 Cancer Patient Experience Survey 2020) was completed in 2021 and invited patients and their parents/carers who received cancer or tumour treatment or care in 2020 to take part.

Who is carrying out the survey?

Picker is carrying out the survey on behalf of NHS England and NHS Improvement. NHS England and NHS Improvement is the organisation that leads the National Health Service (NHS) in England. Picker is a healthcare research charity based in Oxford.

The survey testing, fieldwork, analyses and reporting are completed by Picker. You can find out more about Picker on our website: https://www.picker.org/about-us/.

What does the survey look like?

The survey asks under 16s and their parents/carers about key areas of their cancer care including information provision, communication and support.

Three surveys have been created for different age groups:

- A survey for parents/carers of 0-7 year olds;
- A survey for 8-11 year olds, with a separate section for their parents/carers to complete;



 A survey for 12-15 year olds, with a separate section for their parents/carers to complete.

Please see the 2020 surveys for example, please note these will be updated to the 2021 versions in February 2022.

https://www.under16cancerexperiencesurvey.co.uk/survey-support-materials

The surveys are printed and posted by Picker to the patients' parent or carer. An access code is printed on the covering letter included with the survey. By entering this unique access code or the QR code, children and parents can complete the survey online via the survey website if they prefer this over paper completion.

Included with the survey is a multi-language leaflet providing a helpline number where non-English speaking participants can access an interpretation service for help completing the survey, if needed.

Up to two reminders will also be sent to the patients' named parent or carer who have not responded to encourage response. If a patient does not wish to participate in the survey, a Freephone number and email address have been provided in the covering letters to enable them to opt out. They do not need to give a reason for opting out.

Who will be included in the survey?

The survey is sent to a selection of parents/carers of children under 16 who have a confirmed primary diagnosis of cancer or of a non-malignant brain, other central nervous system or intracranial tumour, or non-cancerous blood disease, and who have received NHS care and/or treatment in 2021 (elective and non-elective) in England. This includes those admitted to hospital as inpatients and those seen as day case patients. Both children and parents/carers will be invited to give feedback.

Patients who were diagnosed with cancer a long time ago and have since gone into remission will receive the survey if they have received care or treatment related to their cancer during the sampling period (e.g. if they have had check-ups).

Please note that outpatients and those who received care from exclusively at Paediatric Oncology Shared Care Units (POSCUs) and other specialist cancer treatment centres are not included, but we are committed to continuing to explore their inclusion for future surveys, as we recognise that to fully understand experiences of care for children with cancer, we should broaden the inclusion to these groups.

Has the survey been reviewed by the Data Coordination Board?

The Data Coordination Board have reviewed and approved the survey.

This collection is mandated for all acute cancer services. NHS Foundation Trusts are mandated under schedule 6 of their Terms of Authorisation.



Does the survey have Section 251 approval?

The Section 251 approval allows the common-law duty of confidentiality to be set aside and data to be transferred to Picker for the purpose of mailing out materials for the survey. Section 251 approval has been granted by the Confidentiality Advisory Group (CAG) at the Health Research Authority. Approval letters are available on the survey website: https://www.under16cancerexperiencesurvey.co.uk/survey-support-materials

How will the survey findings be reported?

We will publish a national report of the responses across England, plus reports by Principal Treatment Centres. These will appear on the survey website https://www.under16cancerexperiencesurvey.co.uk/technical-reports. Free text responses will also be shared directly with Trusts.

Survey responsibilities

Setting up a project team

The best way to ensure that the survey is a success for your trust is to involve those people who have the most impact on patients' experiences and who will be responsible for responding to the survey results.

As a minimum, you will need the following people involved:

- A survey lead a day to day contact to deal with any queries during fieldwork, and to disseminate results to.
- A person from your data team, who will draw your patient sample. You need to share
 the sampling instructions with them and give them enough time to ensure that the
 appropriate resources will be in place when the sample needs to be drawn.
- A member of your clinical cancer team to check and validate the patient sample.

Advertising the survey and recording dissenters

Participating NHS Trusts should have a system in place to inform patients about the survey and provide an option for them to opt-out if they don't want to receive the survey. In late 2019, NHS England and NHS Improvement provided trusts with a dissent poster and website wording for displaying in the trust. Picker have since updated the dissent poster. As the survey is annual and the sampling is continuous (i.e. the survey samples patients over a 12-month period, year on year), the poster should be continually displayed until further notice. If you are unable to display the dissent poster at your trust, please add this information to your website so that patients are aware of the upcoming survey and can opt-



out. A copy of the dissent poster can be found on the survey website: https://www.under16cancerexperiencesurvey.co.uk/survey-support-materials

The poster provides basic details of the survey and space to add the contact details of a nominated person within the trust that patients could contact, should they wish to opt-out of the survey. This nominated person may have been the paediatric matron or a member of your Patient Advise and Liaison Services (PALS). The staff member drawing the sample should check with a member of the cancer care team about whose contact details were provided on the dissent poster and reach out to this designated contact regarding opt-outs, to ensure they are removed from the patient sample list ahead of submission.

Patients opting out should be advised they are being removed from the mailing list for this survey at this trust only, and not future surveys or other research taking place (either at your trust or other NHS trusts where they may also receive care).

Trusts should have a way to record the details of patients who have opted out, for example using a password protected spreadsheet that is securely shared with the staff member drawing the sample. Patients who have opted out will need to be removed when compiling the patient list before it is submitted to Picker for approval. You will be asked to report how many patients have been removed on the Patient List Declaration Form.

The survey leads will need to work closely with the person who compiles the patient list and check carefully that all patients who have opted out are removed from the sample. The patient list must be signed off by the trust's nominated survey lead before it is submitted to Picker.

Drawing a sample

Trusts are required to draw the patient sample list in accordance with the sampling instructions. These are available here:

https://www.under16cancerexperiencesurvey.co.uk/survey-support-materials.

Providing a signature for the survey covering letter

The survey will be accompanied by a covering letter. Trusts are required to provide Picker with the signature they would like to include at the bottom of the covering letter. This may be from the Chief Executive, a Lead Cancer Clinician or a Lead Cancer Specialist. This should be sent to Picker in JPEG format via Picker's secure file transfer site. Please submit these before submitting your sample list, to ensure the trust does not cause a delay in starting fieldwork. The survey will be sent out once all samples have been approved from all trusts.

Keeping everyone informed

Notify as many people as possible about the survey. All cancer departments in the trust should be made aware when a survey is being conducted in case patients ask staff questions about the questionnaire they have received. Survey lead(s) should be prepared to



respond to queries quickly. Patients and their parents who may have questions can be directed to the following:

- The survey Freephone number (08000 720 069) this will be live during the fieldwork period when we contact parents about taking part in the survey
- The survey team email address (under16cancersurvey@PickerEurope.ac.uk)
- The survey website (<u>www.under16cancerexperiencesurvey.co.uk</u>).

What are Picker's responsibilities?

All survey fieldwork will be carried out by Picker. This includes sending out the surveys and reminders, hosting the online survey versions, capturing the survey data, analysing the results and producing reports.

Picker will also undertake deceased checks. The Demographic Batch Service (DBS) checks will be undertaken at least three times during the fieldwork period: before initial send out; and before each of the two reminders. Picker guarantees that the send out of the initial mailing and the reminders will take place within 24 hours of the DBS deceased check completed. This arrangement will make the process more efficient and will ensure that the number of deceased patients in the sample will be minimised. It will also reduce the amount of work that trust staff have to undertake. However if a trust wishes to do a local check before the second and third mailing, then this is definitely welcomed. The mailing dates will be shared with Trusts once they are confirmed. If a Trust needs to inform Picker of a deceased patient, they will need to contact Picker (see contact details on page 3 of this document) with the unique Patient Record Number(s) so we can ensure they are removed from the mailing. This will need to be at least 24 hours before the mailing date.

Key dates for the survey

Please make the survey team at your trust are aware of the key dates shown in the table below. Delays to samples being submitted will impact on the start of fieldwork. This will lead to data and reports being published later than planned.

Table 1: Key Survey Dates



Dates	Task	Responsibility (Trusts/ Picker)
Mid Dec 2021	Sampling instructions available to Trusts	Picker
12th Jan 2022 10-11:30am	Webinar to discuss sampling with Trusts	Picker
w/c 17 th Jan 2022	Patient list submission start date – date for Trusts to aim towards for submitting their sample (Trusts can submit earlier than this if their list is ready).	Trusts
4 th Feb 2022	Last date for patient declaration form and patient sample (with deceased patients removed) to be submitted to Picker.	Trusts
17 th Jan - 4 th Mar 2022	Picker to check samples. Trusts to respond to queries	Picker and Trusts
18 th Feb 2022	Final date patient samples can be approved for inclusion in the survey	Picker and Trusts
4th March 2022*	Patient list finalised	Picker
31st March 2022*	Picker to conduct DBS trace and send the first survey invite	Picker
21 st April 2022*	Picker to conduct DBS trace and send the first reminder	Picker
12 th May 2022*	Picker to conduct DBS trace and send the final reminder	Picker
June 2022	Fieldwork closes	Picker
Jun/July 2022	Analysis and reporting begins	Picker

^{*} These are estimated dates – final dates will depend on the timely submission of patient samples and resolution of queries across all Trusts

Submitting your patient list

Picker is happy to support you and work with you through any sampling issues and queries you may have during the sampling period. Picker will be in regular contact (via email and phone) from the start of this period until your sample has been approved for mailing. Please do not hesitate to contact us if you should have any questions in the meantime. If there are any issues or delays in submitting your patient list, please contact Picker immediately.

Submission: For the U16 Cancer Patient Experience Survey, there is a deadline for approval of the sample list. Therefore, it is important for you to submit your patient list as early as possible. Approval can take 2-3 weeks due to sample queries and/or resubmissions. Submitting early will help to ensure that the survey can start on time and that results can be reported back to you in a timely manner.

Patient list queries: It is equally important to respond swiftly to any queries Picker raises regarding your submitted patient list. Picker will follow up on any unresolved queries within two working days. As the survey cannot begin until all samples are approved, if queries are still unresolved after two further working days, NHS England and NHS Improvement will contact the survey lead to offer support in resolving outstanding queries.



Figure 1: Sample Submission and Follow-up Process

17th Jan

•Trusts to start submitting patient list to Picker

31st Jan

•NHS England and NHS Improvement to contact all trusts that have not responded to Picker

▼ 4th Feb

- Last day for Trusts to submit patient list to Picker
- •NHS England and NHS Improvement to contact all trusts that have not submitted their patient list

18th Feb

- All samples must be approved by this date for Picker to send out mailing one
- •Trusts that have not had their sample approved by this date risk being excluded from the survey

Data protection and confidentiality

When carrying out the survey, both Picker and the NHS Trusts will need to ensure they comply with the UK General Data Protection Regulation (UK GDPR) to ensure personal data is kept confidential. The NHS trust will also need to comply with the NHS Code of Practice on Confidentiality (2003), which incorporates the Caldicott Principles.

The guidelines in the Sampling Instructions will help to ensure that data is handled in a manner in keeping with the Data Protection Act 2018, the UK GDPR, and the Market Research Society's Guidelines for social research (2005). It will be necessary to establish appropriate data security arrangements with Picker, who will send each trust a Data Sharing Agreement governing the transfer of personal data for review and signature (see below for more details).

To find out more information about data protection, please visit the Information Commissioner's Office (ICO) website here: https://ico.org.uk/

For further guidance on adhering to the UK GDPR, see the Market Research Society website here: https://www.mrs.org.uk/standards/gdprsupport

Internet transfer of encrypted data

Trusts may send their patient list to Picker over the internet using Picker's secure sample checking platform. This is to ensure a high level of security and to protect against any accidental or intentional interception during the transfer of patients' details. This platform will also conduct a number of automatic checks on the patient list, thereby reducing the time



spent signing off the sample. Picker will provide guidance on how to use this platform to trusts. Patient lists must not be sent by email: this will be considered a breach of the survey's Section 251 approval. Please refer to the sampling instructions for more detail on the transfer process for the sample data.

The trusts are the owners of the data, so the transfer of patient data is ultimately the trust's decision, because the trust remains legally responsible for the security and processing of the information it shares.

Data Sharing Agreement

A Data Sharing Agreement will be sent digitally to the designated survey lead in each trust and will need to be signed by the trust. By signing this agreement, NHS England and NHS Improvement and Picker, acting under their instructions, are obliged to keep the information received from the trust confidential at all times and to comply with current data protection legislation. It provides the trust with some recourse if a data protection breach were to occur as a result of any actions of Picker. The agreement also ensures that Picker staff members sign and abide by the agreement, which describes how patients' personal data will be sent to Picker, how the data will be stored and how it can be accessed and used.

National Data Guardian Review and patient opt-outs

The Department for Health and Social Care has confirmed that the Under 16 Cancer Patient Experience Survey is exempt from the national data opt-out¹ (National Data Guardian). This exemption will be reviewed after the first two years. Therefore, National Data Guardian opt-outs should not be applied to this survey, and you must not exclude patients on this basis. This means that patients do not have to actively consent to their data being used for the purpose of this survey; however as mentioned above, to abide by the survey's section 251 approval, if patients choose to specifically opt-out of the latest survey (e.g. by using the contact details provided on the dissent posters) their wishes should be respected.

Picker is under the obligation to report any breaches to the survey's section 251 approval to NHS England and NHS Improvement and the Confidentiality Advisory

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¹ In July 2016 the National Data Guardian (NDG) Review on data security, consent and opt-outs was published. In July 2017 the Department of Health published "Your Data: Better Security, Better Choice, Better Care", the government's response to the NDG review. The review noted that further work was required before a decision could be made as to how the opt-out should be applied to surveys. For more information, please see: https://digital.nhs.uk/services/national-data-opt-out/operational-policy-guidance-document/policy-considerations-for-specific-organisations-or-purposes



Group. Your Trust would also have to review whether the breach needs to be recorded against your Data Security and Protection Toolkit.

[Protect]

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