

Keeping The Customer Satisfied - It's OK to Ask - So Who Are We Asking and Who Participates? Further Findings from the 2013 National Cancer Patient Experience Survey

AUTHORS

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BACKGROUND

The National Cancer Patient Experience Survey (NCPES) 2013 (ref 1) includes data on 68,737 recently treated patients from the 162 NHS Trusts in England providing acute cancer services. This represents a response rate of 64%.

The survey asks about the patient experience of cancer research.

Questions include

"Since your diagnosis has anyone discussed with you whether you would like to take part in cancer research?"

"If so did you then go on to take part in research?"

METHOD

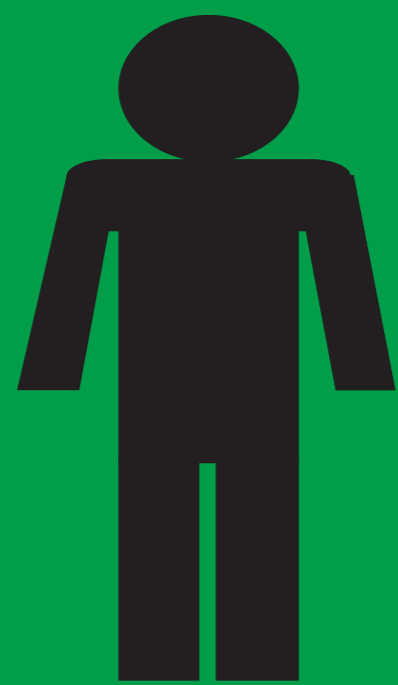
The Pearson's chi-squared test was used to test for association between gender, having a discussion and going on to participate in research; and similarly for association with age.

RESULTS

The 2013 NCPES data shows the following:

Who has a discussion?

Male
29.5%



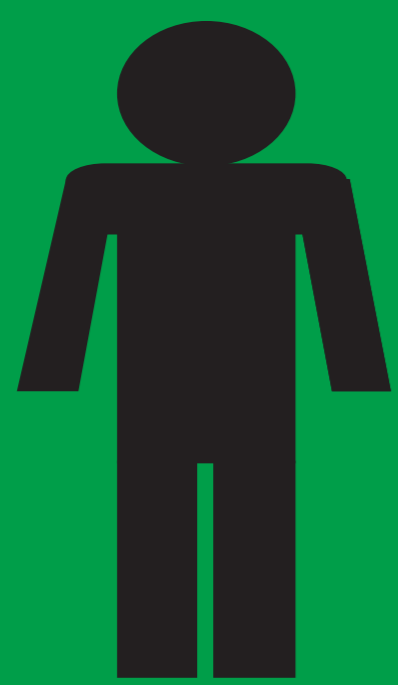
Female
30.7%



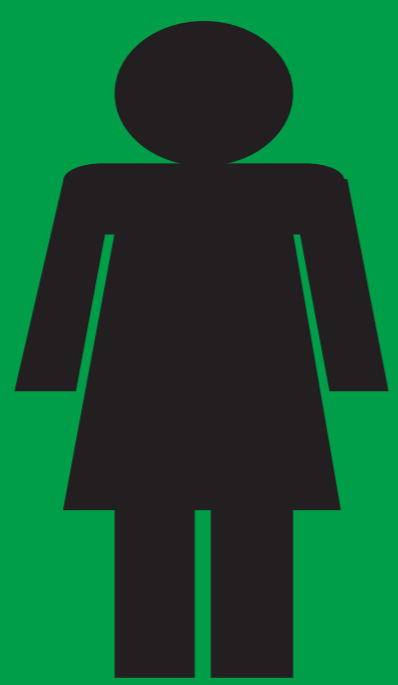
No Significant Difference

Who then went on to take part?

Male
65.5%

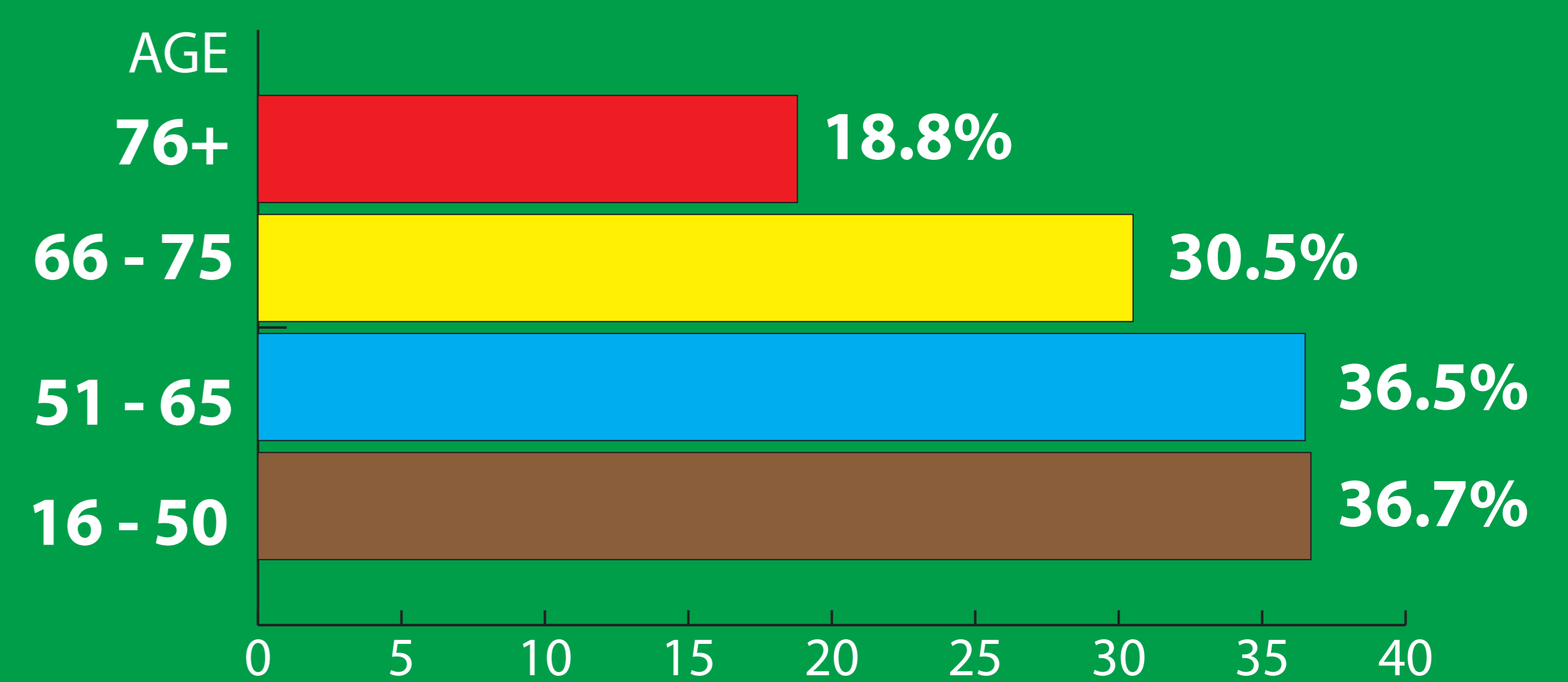


Female
62.4%



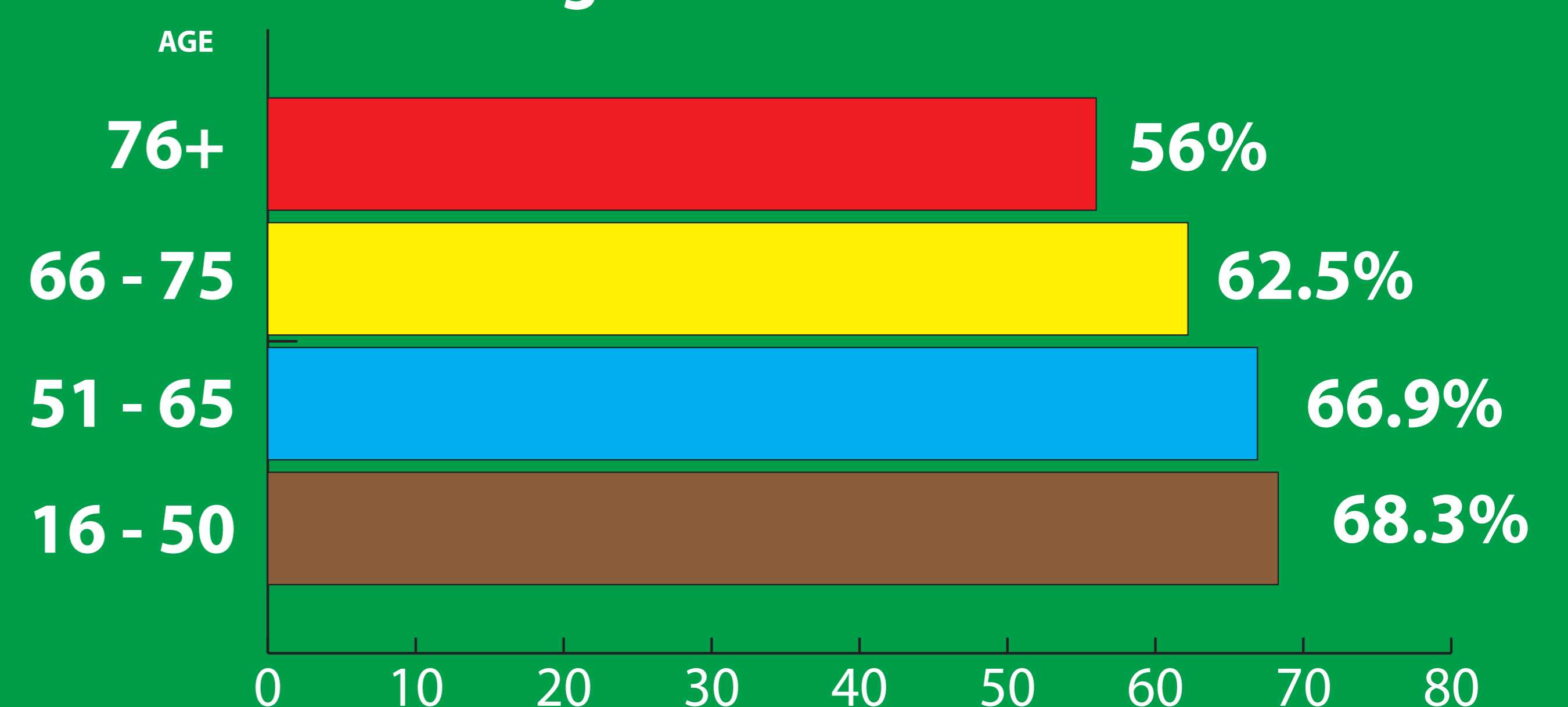
No Significant Difference

Percentage Who Had A Discussion



These variations are significant (p<0.001)

Percentage Who Went On To Take Part



These are significant differences

CONCLUSION

There is little variation by gender in whether patients report a conversation about taking part in research. There is a clear decline in being asked with age. Over the age of 75, there are fewer discussions and less participation, but over half of those over 75 who are asked do go on to participate.

DISCUSSION

We have shown elsewhere (ref 2) that both having a discussion, and going on to take part in research are associated with better experience of care overall. Among the questions these findings raise are:

Older Patients are asked less: are we pre-judging both/either their ability and/or willingness to participate?

Are we communicating the possible benefits of taking part to older people as we might?

Given our aging population and the demographics of incidence, do we need to rethink our study designs and our research priorities, and to challenge our traditional attitudes to age?