Care Quality Commission

Provider Collaboration Reviews (PCR)

Cancer, Learning Disabilities, Children & Young People's Mental Health

Victoria Donner
Head of Provider Collaboration Reviews
4 August 2021

Key lines of Enquiry

1.People at the centre

2. System leadership

3. Workforce capacity and capability

4. Digital solutions and technology

We also look at Health Inequalities in each review.

Cancer PCR

We carried out this review March-April 2021 (8 x Integrated Care Systems)

Scope of Review:

- How local systems have worked to ensure continued provision of cancer services in response to COVID-19.

- Access to services and the extent to which people are being seen.

- Health inequalities – particularly the experiences of people from Black or minority ethnic populations.

- **Specifically, we looked at:**

  - The experience pre-diagnosis (including access).

  - The proportion of patients being diagnosed with cancer via the two-week wait pathway, routine referral, screening and via emergency presentation.

  - Treatment – this includes the emotional and mental health support offered

  - Ongoing care.

Key Messages – Cancer PCR

CareQuality Commission

- There are concerns about the long-term impact of the pandemic on staff – with pressure on recovery, systems point to a depleted workforce and 'staff burnout' as a real problem.

- Efforts in several systems to prioritise immunosuppressed patients for COVID-19 vaccinations.

- Systems worked together to redesign pathways in a way that enabled access - generally, this resulted in more centralised and consistent pathways which ensured equitable access for patients based on priority scores rather than their locality - for example, cancer hubs coordinated people's journeys through services – reduced back and forth communication between different services.

- We heard of collaboration between a variety of system partners, and of patients contributing to services' COVID-19 response through patient engagement groups or other feedback mechanisms.

Key Messages - Cancer PCR

- Providers collaborated to ensure information about cancer care was inclusive across different languages and that it was easy to understand.

- Diagnostics backlogs impacted on access to services.

- Fears around attending appointments in hospitals and other clinical settings.

- New and innovative ways to make cancer care more accessible.

- Digital solutions and technology have helped many people with access to the cancer services they needed during the pandemic.

Learning Disabilities PCR

Care Quality Commission

We carried out this review March-April 2021 (7 x Integrated Care Systems)

Scope of Review:

- How well people with a learning disability and their families have been supported during the pandemic.

- How providers ensured access to services was maintained.

- How providers adapted their support to protect people with learning disabilities from being exposed to the impacts of COVID-19.

- Health inequalities – particularly the experiences of people from Black or minority ethnic population.

Specifically, we looked at:

- the experiences of people with a learning disability living independently within the community. This includes people who live with/without support, people who live with families and those living in supported accommodation included shared living with other people with a learning disability.

- **As part of this review, we case tracked the journey of people with a learning disability through the health and social care system, we also collected feedback from people about their lived experience.**

Key Messages – Learning Disabilities PCR

CareQuality Commission

- Access to services – including day services, respite services and health services – was disrupted during the pandemic.

- While services tried to ensure continuity of care, people often experienced a reduction in the number of visits they received and changes in staff who did not always have the right skills and experience.

- People who usually saw their healthcare professional regularly saw them less or not at all during the pandemic. Some people missed out on annual health checks.

- However, when people did need to access health care they were able to do so quickly – usually by telephone or video call – and felt well supported by carers.

- Generally, people felt well informed about the pandemic and why they could not see friends and family, and how to stay safe.

- People understood the need to use personal protective equipment (PPE). But they sometimes found it difficult to hear or understand what was being said to them because of people needing to wear face masks.

Key Messages – Learning Disabilities PCR

- Not being able to go out or see friends and family in person led to people feeling isolated and had a negative impact on their mental health and wellbeing.

- A lack of respite care put a strain on family relationships and had an impact on both the health and wellbeing of people with a learning disability and their carers.

- The physical health care needs of people were not always taken into consideration. For example, vulnerability due to pre-existing conditions or how COVID-19 symptoms may present in a person with a learning disability.

- In some systems, we heard that people with a learning disability were given priority to receive their vaccine.

- The use of technology removed barriers, increased sharing of information/collaboration between services and enabled carers to spend more time with people.

- However, there were challenges. Not everyone had access to, or felt comfortable using, digital technology.

Children & Young People's Mental Health PCR

Care Quality Commission

We are currently carrying out reviews across 7 Integrated Care Systems for children & young people's mental health. Fieldwork was carried out in June/July 2021.

The scope of the review includes:

- A focus on children and young people (CYP) aged 0-18.

- We will focus on Black and minority ethnic children & young people for case tracking as a priority, but not exclude other equality groups.

- We will look at what providers have done in response to COVID within the system.

A condition specific focus on the following disorders:

Anxiety, including social anxiety;

Depression;

Eating disorders;

Self-harm;

Suicidal behaviours, including overdoses.

Our national report is due for publication in November 2021.

Thank you