

The Public Experience: Delays to Treatment





November 2021





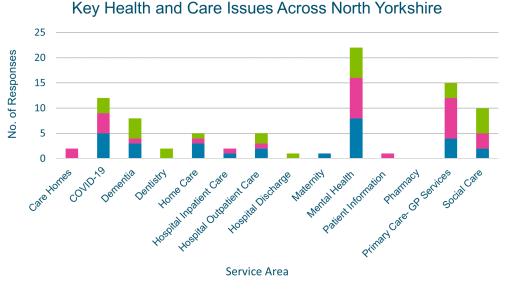
Introduction

Welcome to our first Pulse Report, these quarterly reports will provide you with a snapshot of people's experiences of health and care services across North Yorkshire, with a specific focus on a different topic each quarter. In this instance, our focus is delays to treatment and/or care as a result of the COVID-19 pandemic.

We have gathered feedback from local organisations and individuals, receiving 104 valid responses to our surveys, with 31 responses for our organisation survey and 73 responses for our individual survey.

Key health and care issues

We asked organisations to identify the top three issues facing their service users or members (as below). Of the 14 areas listed, the majority of organisations indicated **mental health** as the top current issue, closely followed by **GP services**, **COVID-19** and **social care**. (Note, if the three different aspects of care (care homes, home care and social care) are aggregated, care would rank higher than COVID-19 and GP services as the second most pressing issue). It is not surprising to see the ongoing impact of COVID-19 on health and care services in our first Pulse Report.



Mental health

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Issues surrounding mental health were found to be the most prominent concern amongst organisations, with many indicating that the COVID-19 pandemic has not only increased the number of mental health problems but also exacerbated existing mental health issues. However, despite increasing mental health concerns, a number of organisations highlighted the absence of support available.

"Lots of anxiety & depression - some ongoing but some new as a result of the challenges of COVID".

"Poor mental health exacerbated further by ongoing COVID issues".





"Lack of mental health capacity, people falling into gaps since not meeting criteria for IAPT (Increasing Access to Psychological Therapy) nor VCS (Voluntary and Community Sector) services (or full to capacity)".

"Patchy, confusing and inconsistent statutory mental health support".

GP services

The concerns surrounding GP services centred around access and appointments, with people finding it difficult to obtain not only face to face appointments but telephone appointments too. Concerns have also been raised for those who are digitally excluded and are unable to access online services. The topic of misdiagnosis due to telephone or online appointments was also mentioned. This echoes the current national conversation, with the recent NHS Digital monthly report stating that 39% of GP appointments in September were not held face to face, with most being conducted over the phone or online¹.

"Difficulty accessing face-to-face GP appointments to discuss mental health issues. Many find face-to-face a better setting than talking on the phone but because they don't need to be examined, are often told this is not possible. Also difficulty getting through to GP surgeries on the phone to book appointments".

"Annoyed that everything is expected to be done online which is not possible for many elderly and certainly not for those with early stage dementia".

"My partner died last December from a heart disease (massive attack) after being diagnosed over the phone for indigestion".

COVID-19

Whilst the COVID-19 pandemic is a key standalone issue in itself, especially as COVID cases continue to rise, it is important to note the ripple effect COVID-19 is continuing to have across all areas of health and care. Many of the concerns raised around the other 13 areas focused on the COVID-19 impact on these services. Alongside these, responses reflected staff burnout and isolation.

"We are struggling to deal with the relentless issues associated with the pandemic, staff are struggling with burnout and mental health issues related to the impact of the pandemic at work and home". "COVID still an issue with people afraid to go out, to resume previous life - anxiety and also lack of independence, reliance on others, lack of resilience".

1 NHS Digital. Appointments in General Practice - NHS Digital. Accessed 29 October 2021.





Social care

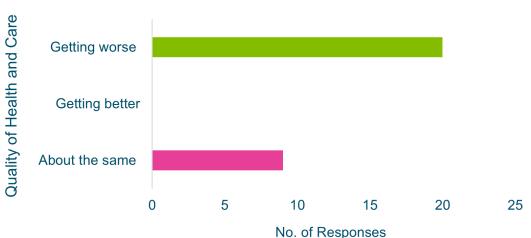
Social care was highlighted as another key issue. Problems surrounding care were mainly related to staff shortages and lack of capacity which is resulting in people being admitted into care homes when they could be cared for at home.

"Lack of home care and social care is forcing people into long term care, who could be cared for at home with dignity if the services were available".

"Struggle to recruit - lack of capacity across all Home Care settings clients going in to care homes rather than being discharged home due to lack of capacity – COVID has meant all sectors are stretched".

Health and Care

When asked if they think health and care services are getting better or worse, 65% of organisations responded worse, with no one believing services to be getting better. This finding is not surprising considering the pervasive impact COVID-19 is continuing to have on all aspects of health and care.



Health and Care Getting Better or Worse?

Experiences of those with protected characteristics

Those organisations who work with people with protected characteristics felt the issues people face tend to be worse for this group. Many organisations felt that for older people, those with learning disabilities or mental health issues, health and care services were poorer.

"Social anxiety prevents some participants from being able to access the support they require. Sometimes the support won't make reasonable adjustments to help the participants to access the service".

"There has always been a distinct lack of ability within the acute health services to support people with a learning disability, this is getting worse due to staffing shortages and stress in the acute services teams".

Focus issue: treatment delays

The focused questions for this quarter were surrounding delayed treatment and/or care as a result of COVID-19.

Delays to treatment are a rising national concern, with the recent CQC State of Care report finding 5.7 million people waiting for elective treatment².

Based on organisation and individual responses on this topic, four main themes emerged.

Long delays to treatment

We found the majority of individuals who were currently waiting for treatment had waited for 0-4 months. This relatively short waiting time seen in individual responses was not matched by organisation feedback. The majority of organisations said people they are in touch with have been waiting for 7-12 months or over a year for treatment.

Waiting Time: Individual Responses



Waiting Time: Organisation Responses



Although this may appear contradictory, we believe it is likely to be because people will not raise a treatment delay as a concern with an organisation they are supported by or are in touch with until they have been waiting for a considerable amount of time. Thus the organisation responses highlighted longer waiting times.

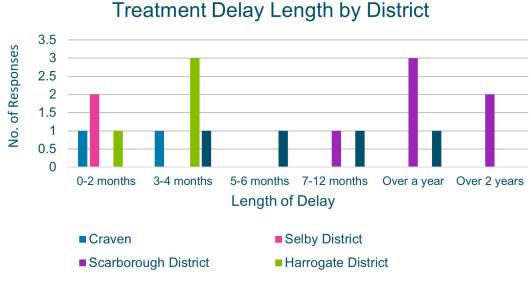
Taken together, this suggests whilst there is a proportion of people who are only having to wait a short period of time before receiving treatment, others have waited for up to or over a year. When examining what type of treatment or care people were waiting to receive, it was found that over half of respondents were waiting for either operations or consultations.

When exploring whether the treatment delay length differs based on which district in North Yorkshire people live, responses revealed that those who live in the Scarborough district were more likely to experience longer delays, with 7-12 months being the shortest length of waiting time, as shown in the graph below.

2 CQC 2021. <u>State of Care | Care Quality Commission (cqc.org.uk).</u> Accessed 29 October 2021.





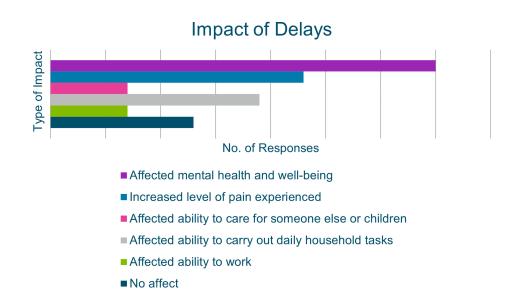


Hambleton and Richmondshire

Impact of delayed treatment

Another theme that strongly emerged across both organisations and individuals was the impact waiting for treatment was having on mental health and the level of pain people were living with.

"Delays have increased anxiety in a number of participants because they feel their doctors are not listening and following up on pain they are experiencing".



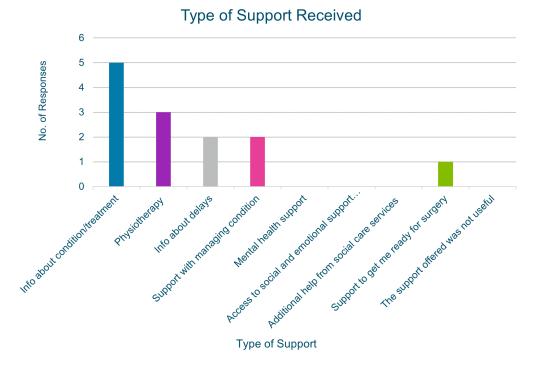
In terms of support received while waiting, around 60% of individuals said they had not received any support and of those who did receive support it tended to be information about their condition and/or treatment.

Worryingly, as shown in the graph below, no individuals said they had received mental health support or access to social and emotional support groups.





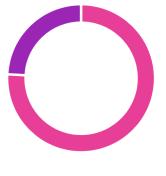
It is notable that such a large majority of both individuals and organisations highlighted the impact waiting for treatment has on mental health, yet no one who responded has received any support regarding this.



Paying for treatment

Due to the treatment delays experienced, another theme is people deciding to pay for private treatment. Around 80% of organisations said they have heard of people choosing this route, and the additional comments received from both organisations and individuals echo this claim.





Yes No

"My daughter's partner had to go private for a back operation after too many delays despite an MRI scan on the NHS showing he needed an operation to continue working".

"I have had people paying for hip replacements in order to continue being able to work. Also paying for counselling services due to wait at GP surgeries".





Travelling for treatment

Some organisations also reported that people are travelling to other areas to receive treatment due to the long delays.

"I have heard of people travelling out of the area for hip replacements".

Conclusions

- Key issues: Mental health, GP services, COVID and care have been highlighted as some of the priority issues facing people across North Yorkshire. Unfortunately, services are perceived as being worse or the same as before COVID. The issues raised appear to be even more severe for those with protected characteristics such as older people, those with learning disabilities or mental health issues.
- **Treatment Delays:** The waiting time for treatment varies, but some people have been waiting for up to or over a year and this has severely impacted their mental health. However, no mental health or emotional support has been received by those waiting for treatment in this sample. The continued delays to treatment have resulted in some people either paying for private care or travelling to receive care.

At the end of the survey we provided people with the opportunity to express any additional comments about the health and care services across North Yorkshire. The general topics that emerged from these comments fall in line with the topics frequently being raised in the ongoing feedback Healthwatch North Yorkshire is receiving.

These topics include:

- Pentistry- including difficulties in registering with a dentist practice or making an appointment to see a dentist. For more information on this topic, take a look at the dentistry report we have recently published³.
- **e** Hospital care- including delayed discharge and lack of communication between the patient's relatives and the hospital.

Due to the feedback obtained from this survey and the ongoing feedback Healthwatch North Yorkshire is receiving, the topic for our next individual survey will be people's experiences of accessing GP appointments.

³ Healthwatch North Yorkshire. 2021. <u>NHS Dentistry in North Yorkshire: 1-Year Review of Public Feedback (healthwatchnorthyorkshire.co.uk).</u>





If you would like to participate in our regular Pulse Reports, please sign up for the individual <u>network</u> or the organisation <u>network</u>.





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