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Covid-19 pandemic is magnifying healthcare inequalities, says England's regulator

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Existing “fault lines” in health and social care services could be made much worse by the covid-19 pandemic, but the overall quality of care has been maintained so far despite the impact of the coronavirus, says England's healthcare regulator.

In its annual State of Care report¹ for England, published on 16 October, the Care Quality Commission (CQC) said that covid-19 was magnifying inequalities despite the impressive performance of the NHS to date.

This year's report differs from previous years, because CQC routine inspections were suspended in March as a result of the pandemic, so its assessment is based on inspections and ratings data from 31 000 services and providers as at 31 March 2020.

Pre-covid-19 care was generally good, said the CQC, but there had been little overall improvement on the previous year.

There were some concerns over some areas of care: 41% of maternity services were rated as “requires improvement” for safety, for example, while more than half (51%) of urgent and emergency care services were rated as “requires improvement” or “inadequate.”

In primary care, the overall ratings remained almost unchanged, with 89% of GP practices rated “good” and 5% “outstanding” compared with 90% and 5% respectively in last year's report. But the regulator said this “masked a more volatile picture” as 173 GP practices had deteriorated from their previous rating of “good,” while 192 practices had improved to get a “good” rating.

In mental health services, inspectors continued to find poor care in inpatient wards for people with a learning disability or autism, while social care was described as “fragile” because of the lack of a long term funding solution, and in need of investment and workforce planning.

The CQC praised service providers and staff for transforming the way care had been delivered in recent months, citing new ways of working, often taking advantage of technology. The challenge now was to keep and develop the best aspects of these new ways of delivering services, it said.

The impact of covid-19 on the NHS in terms of elective, diagnostic, and screening work had been huge, with some operations still not rescheduled and people whose cancer had not yet been diagnosed or treated.

Ian Trenholm, chief executive of CQC, said, “One of the things that we find as we go into these many and varied services is extraordinary professionalism.

“Covid-19 is magnifying inequalities across the health and care system—a seismic upheaval which has disproportionately affected some more than others and risks turning fault lines into chasms. As we adjust to a covid age, the focus must be on shaping a fairer health and care system.”

Asked about peoples' ability to access care during the pandemic, Rosie Benneyworth, CQC chief inspector of primary care, told *The BMJ*, “We know that people haven't been able to access care and, for example, the number of people being referred for two week wait referrals for cancer has significantly dropped.

“We also know the number of people seeing their GP significantly dropped during the first wave of the pandemic and we must make sure that people can access the appropriate care to meet their needs. We are following up where we hear any concerns being raised about access to general practice.”

Jennifer Dixon, chief executive of think tank the Health Foundation, said, “The CQC's report illustrates the heavy toll the pandemic has taken on NHS and social care services despite heroic efforts from health and care workers.”

¹ Care Quality Commission. The state of health care and adult social care in England 2019-20. 16 October 2020. www.cqc.org.uk/publications/major-report/state-care.