

Equality impact assessment

We are committed to promoting equality in all our regulatory activity, see our [equality objectives 2021 to 2025](#). We want to tackle inequality to make sure everyone has good quality care. Also everyone should have equal access, experience and outcomes from health and social care services.

As a public body, we are subject to the public sector equality duty which requires us to have due regard to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Equality Act 2010
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

There are 9 protected characteristics covered within the Equality Act 2010. These are:

- age
- disability
- gender reassignment
- pregnancy and maternity
- race
- religion or belief

- sex
- sexual orientation
- marriage or civil partnership.

The public sector equality duty sets out the list of 'relevant protected characteristics' for the second and third needs of the duty. This includes all 9 protected characteristics except marriage and civil partnership. In this equality impact assessment we consider the:

- protected characteristics
- potential impact of our work for carers and in relation to human rights.

We considered equality impact of every stage of our consultation development:

- developing our proposed approach
- considering a range of alternative options to recover our regulatory cost
- making the consultation accessible.

We are keen to understand:

- whether you consider there are other equality impacts for our proposed approach
- ways to mitigate these impacts.

We will use the consultation responses to develop our view. We will publish a final equality impact assessment along with our consultation outcome.

Developing our proposed approach

Integrated care boards are statutory bodies created by the Health and Care Act 2022. So they must comply with the public sector equality duty and equalities legislation.

Tackling inequalities is a core purpose of integrated care systems. Our proposed approach for calculating a regulatory fee is proportionate to the running cost allowance for integrated care boards. It is the same calculation for all 42 integrated care boards. We do not anticipate our proposed approach will have a particular impact on any group with protected characteristics. We will make the consultation process accessible. We will review our equality impact assessment using consultation findings to check our approach.

Considering alternative options

We do not propose the alternative option to charge all integrated care boards an equal regulatory fee. While assessing this option we considered how the regulatory fee may not be proportionate to the population of an integrated care system's area. Smaller integrated care boards would have proportionately less money than larger ones to achieve their objectives, including tackling inequalities.

We do not propose the alternative option to charge integrated care boards along with health and social care providers and/or local authorities a fee. While assessing this option, we considered how some partners already pay a fee for our regulatory oversight. We expect to use partner inspection and assessment findings as an evidence source within our approach to integrated care system assessments. We have existing funding arrangements in place to carry out these functions. Some partners may consider they are paying twice for our regulatory oversight. Also an additional regulatory fee would reduce money available to tackle health inequalities.

We considered the do-nothing option in our option assessments, which assesses whether we need to take any action. We appreciate taking no action would mean the integrated care system has more money available to achieve objectives, including tackling inequalities. If we took no action our fee model would not comply with section 6 of managing public money, as we wouldn't recover our full chargeable regulatory costs. As a regulator we are expected to comply with section 6 of managing public money.

Making the consultation accessible

We have published this consultation information as [accessible web content](#). [Contact us](#) if you need this information in a different format and we'll consider your request.

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