

Shaping the future: CQC's strategy for 2016 to 2021

Equality and human rights impact analysis

1. Introduction

CQC makes sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve. As part of that, we have a unique role to promote and protect equality and human rights for everyone who uses health and social care services. We also have an additional responsibility to protect the human rights of people whose circumstances make them vulnerable, such as people who are being cared for under the Mental Health Act or the Mental Capacity Act Deprivation of Liberty Safeguards.

Our human rights approach means that our commitment to equality and human rights is embedded in the way we regulate services and how we work as an organisation. For instance, we assess how effectively providers are promoting and protecting equality and human rights for people who use their services; we take action where we find people's human rights are at risk; and we value the diversity of our own workforce as we know that this will make us a more effective organisation.

Our strategy sets out our ambition and priorities for the next five years. As part of this we must consider the impact that any changes to our work may have on the equality or human rights of people who use services and on providers of services. This equality and human rights impact analysis describes how our strategy could affect equality and human rights and what we will do about it.

As we implement our strategy, we will continue to assess how equality and human rights will be affected. Where appropriate, we will publish further impact analyses.

This impact analysis should be read alongside our strategy, [*Shaping the future: CQC's strategy for 2016 to 2021*](#) and the accompanying document, [*What our strategy means for the health and adult social care services we regulate*](#), that describes how we will regulate and encourage improvement in each sector.

2. Our ambition and priorities for 2016 to 2021

Our ambition is for a more targeted, responsive and collaborative approach to regulation, so more people get high-quality care. We want people to trust and use our expert, independent judgements about the quality of care. We want people to have confidence that we will identify good and poor care and that we will take action where necessary so their rights are protected. We want to encourage organisations

that deliver care to improve quality and to use resources as efficiently as possible to deliver high-quality care.

We will achieve this by continuing to deliver our purpose and our statutory objectives, as well as refining our approach so that we respond to the changing needs of people who use services and the changing environment in which providers deliver care. We will build on the strong foundations we have established so we can continue to strengthen our approach to equality and human rights.

We will focus on four priorities to deliver our ambition:

1. Encourage improvement, innovation and sustainability in care

We will work with others to support improvement, adapt our approach as new care models develop, and publish new ratings of NHS trusts' and foundation trusts' use of resources.

2. Deliver an intelligence-driven approach to regulation

We will use our information from the public and providers more effectively to target our resources where the risk to the quality of care provided is greatest and to check where quality is improving, and we will introduce a more proportionate approach to registration.

3. Promote a single shared view of quality

We will work with others to agree a consistent approach to defining and measuring quality, collecting information from providers, and working together towards a single vision of high-quality care.

4. Improve our efficiency and effectiveness

We will work more efficiently, achieving savings each year, and improving how we work with the public and providers.

3. Understanding the impact of our strategy on equality and human rights

To help us understand how our strategy could affect equality and human rights, we have listened to people who use services, providers, members of CQC staff, and other organisations who have an interest in equality and human rights issues.

During the consultation on our new strategy, we also asked people to tell us how they thought our proposals could affect equality and human rights and what action we should take as a result. Of the roughly 200 respondents who expressed a view, approximately half said that they believed the impact of the proposals would be positive. A very small number of respondents thought that the proposals would have a negative impact on equality and human rights, while most others thought there would not be a particular impact either way. We have taken this feedback into account and used it to inform this analysis. The full consultation analysis and the consultation response can be found at

<http://www.cqc.org.uk/2016strategyconsultation>.

4. Our equality and human rights priorities in our strategy

Our analysis of equality and human rights opportunities and risks (as laid out in section 5) can be summarised as seven priorities for advancing equality and human rights through our strategy.

Our seven priorities for advancing equality and human rights through our strategy

1. Ensure that equality and human rights are an important part of a single shared view of quality across the system.
2. Develop our approach to gathering the experiences of people who are more at risk of having their rights breached and our ability to identify equality and human rights issues from qualitative information – especially from what people who use services, the public and staff working in services tell us.
3. Continue to identify ways to improve equality and human rights indicators that show changes in quality.
4. Do more to encourage improvement in equality and human rights by sharing what we have learned through our work, for example learning from inspections.
5. Develop our work to assess quality for population groups and how well care is coordinated to help us understand care quality issues for different groups of people and equality and human rights issues beyond the remit of a single provider.
6. Draw on the strengths of our diverse CQC workforce and support our people to learn, reflect and act to promote equality and human rights in their work.
7. Continue to consider equality and human rights opportunities and risks when developing the detail of our model.

5. The opportunities and risks for equality and human rights

The tables summarise, for each of the four priorities in our strategy, the opportunities for improving equality and human rights and the risks to equality and human rights. We explain how we will maximise these opportunities and mitigate the risks.

Priority 1 (opportunities): Encourage improvement, innovation and sustainability in care	
Opportunities for improving equality and human rights	Ways of maximising the opportunities
A stronger focus on encouraging improvement provides an opportunity for us to encourage providers to improve the way they protect and promote equality and human rights.	Consider how we can encourage improvement specifically in equality and human rights. For example, we could do this by sharing examples of providers who have demonstrated outstanding practice in equality and human rights.

	Continue to use and help to improve other established mechanisms for encouraging improvement in equality and human rights, for example the Workforce Race Equality Standard and the Equality Delivery System used in the NHS.
New models of care may have the potential to promote and protect equality and human rights more effectively. CQC assessments will contribute to our understanding of how these new models can protect and promote equality and human rights.	<p>Ensure that equality and human rights continues to be an important component of CQC's regulatory approach as it assesses new models of care, working with other national and local organisations and sharing learning.</p> <p>Share learning and good practice about how new models of care can protect and promote equality and human rights, for example through case studies and inspection reports.</p>
Through the use of resources assessment for NHS trusts and foundation trusts, there is an opportunity, over time, to show how good use of resources can contribute to improved access, experience and outcomes for all. Equally, there is an opportunity to strengthen equality and human rights where the use of resources assessment highlights where inefficiencies have a negative impact on access, experience or outcomes.	<p>Consider how the use of resources assessment for NHS trusts and foundation trusts could highlight whether inefficiencies have particular impacts on access, experience or outcomes.</p> <p>Over time, demonstrate how the good use of resources for NHS trusts and foundation trusts can contribute to improved outcomes for all.</p>
Inspection and assessment approaches that look at quality of care for particular populations, across care pathways, or in particular places, can highlight care quality issues or equality and human rights issues for some equality groups. This can also help to highlight equality and human rights issues that are beyond the remit of one provider, such as the impact of how well people move between care services.	<p>As we develop detailed plans for our future inspections, consider how best to use different inspection approaches that look at populations, pathways or place in order to identify care quality issues or equality and human rights issues for specific equality groups.</p> <p>In developing this work, consider how we identify equality and human rights issues that extend beyond the remit of individual providers.</p>
Priority 1 (risks): Encourage improvement, innovation and sustainability in care	
Risks to equality and human rights	Mitigating actions
As new models of care are emerging, we do not yet know what impact they might have on equality and human rights. This means it may be difficult to determine the most effective way of regulating for equality and human rights.	Ensure that equality and human rights continues to be a core component of CQC's regulatory approach as we assess new models of care.
If the measures for use of resources in NHS trusts and foundation trusts are too limited, unintended incentives could be created for some providers to act in ways that might be at the expense of equality and human rights. For example, providers might give a lower priority to a personal approach to care or	As the assessment of NHS trusts' and foundation trusts' use of resources is developed, consider how it could help to identify and incentivise economy and efficiency improvements that enhance or maintain care quality for all people who use services.

reasonable adjustments that are more likely to protect human rights such as dignity.	
Not all equality groups are population groups, so care quality for these groups may not be immediately clear from work focused on populations.	Continue to identify which equality groups are omitted from a populations approach. Where possible, when our work is looking at a particular population group, we should consider looking at quality of care for equality groups within that population.

Priority 2 (opportunities): Deliver an intelligence-driven approach to regulation	
Opportunities for improving equality and human rights	Ways of maximising the opportunities
An increased focus on the views of people who use services and the professionals and staff who provide services can lead to a more rounded picture of risk that incorporates equality and human rights issues. This is currently difficult to capture with just quantitative data.	<p>Improve our ability to identify equality and human rights risks and issues from information received from staff and people who use services, using new technology and consistent groupings of data.</p> <p>Continue to work with Experts by Experience to gather the views of people who use services on equality and human rights issues, and specialist advisors who help us to gather views from professionals and staff during inspections.</p>
This is an opportunity to improve risk monitoring of equality and human rights issues, both for people who use services and for staff working in health and social care.	Continue to develop and evaluate indicators relating to equality and human rights in order to improve our ability to identify risks both to quality of care for people who use services and to staff equality.
If more targeted and tailored inspections enable more efficient regulation without a risk to equality and human rights in some service types, this could free up more CQC resources to focus on services where there may be a greater risk to human rights.	Analyse information about providers so we understand the level of risk to equality and human rights in different types of services. This will enable us to target our inspection resources where there is a heightened risk to people who use services, including a risk to their equality and human rights.
This is an opportunity to encourage providers to strengthen their data collection around the 'protected characteristics' (under the Equality Act 2010) to ensure care quality can be understood from the perspective of all groups.	Ensure our approach to data collection prompts providers to consider how they would collect information against the protected characteristics, and explains why it is important from the perspective of achieving good quality care (including the relationship between a fair and equal staff culture and care quality).
Changes to the registration process that lead to greater accountability at all levels of leadership may help to embed a more consistent approach to equality and human rights in organisations.	When changes are made to the registration process, consider how we encourage providers to embed a more consistent approach to equality and human rights.

Priority 2 (risks): Deliver an intelligence-driven approach to regulation

Risks to equality and human rights	Mitigating actions
<p>There is a risk that our indicators may not effectively highlight changes to quality of care relating to equality or human rights.</p>	<p>Continue to evaluate existing indicators and identify opportunities for improvement, linking closely with wider CQC work to address data gaps.</p>
<p>People in some equality groups may be less able or less likely to give us their views on the services that they use, and these groups may also be more likely to have their human rights breached (for example older people and people with a learning disability).</p>	<p>Our new Public Engagement Strategy will publish later in 2016/17 and will develop our approach to gathering information about people’s experiences of services – including people who are less able or likely to give us their experiences of care services, and particularly those who are most likely to have their human rights breached.</p> <p>In addition, we will continue to use and develop the approaches we already use to capture the views and experiences of people who might be more at risk of breaches of human rights – for example:</p> <p>a) Encourage and enable people from equality groups to be engaged in our work, including giving us their experiences of care between inspections, through:</p> <ul style="list-style-type: none"> • Our work with voluntary and community sector organisations representing equality groups. • Building and strengthening our relationships and information sharing with the Healthwatch network. This will increase the feedback we hear from local communities and people using services, some of who will be from people from equality groups and those in the most vulnerable circumstances. • Targeted promotion of our online form for gathering the views of people about their experiences of using services. <p>b) Gathering information during inspections, including through:</p> <ul style="list-style-type: none"> • Our Experts by Experience programme that involves people from equality groups in our inspection teams and enables us to talk to more people on inspections including those who might find other ways of communicating difficult. • Our equality and diversity specialist advisors – expert health and social care professionals who support our

	<p>hospital inspections and gather qualitative information from professionals and staff.</p> <ul style="list-style-type: none"> • Interpreting services on inspections and accessible versions of all important CQC publications so that people with different communication needs can talk to us during inspections.
Some risks to equality and human rights are more difficult to measure from quantitative data than through direct observation or talking to people.	<p>Ensure that we complement quantitative information about providers with qualitative information from people who use services, from professionals and staff, and from our ongoing programme of inspections.</p> <p>Improve our ability to identify equality and human rights risks and issues from information received from staff and people who use services, using new technology and consistent groupings of data, as well as developing new indicators.</p> <p>Continue to develop the way we support inspectors to gather evidence about equality and human rights risks on inspections, including risks that are less likely to be captured through quantitative data.</p>
Risks to human rights can increase rapidly in some service types, or for some groups of people, if there is a negative change to the service.	<p>Consider the effect on human rights of any changes to the frequency and intensity of inspections, with particular emphasis on those areas where risks to human rights can increase rapidly.</p> <p>Ensure that we continue to respond quickly to new or emerging issues, such as increased risks to human rights, or poor quality of care for a particular group of people using a service.</p>
Services that are seen to be generally low risk may still have equality or human rights issues, for example poor accessibility for disabled people.	<p>Ensure that when changes are made to registration processes, any potential risks to equality and human rights in low risk services are addressed.</p> <p>Through our new insight model, ensure that risks to equality and human rights are identified. Ensure that these risks are considered when changing the overall risk status of a service.</p>

Priority 3 (opportunities): Promote a single shared view of quality

Opportunities for improving equality and human rights	Ways of maximising the opportunities
If equality and human rights are embedded into our single shared view of quality – as	Ensure that the equality and human rights elements of our existing regulatory

they are in our existing regulatory framework – then equality and human rights will be at the heart of care quality monitoring across the health and social care system.	framework are an important part of an agreed single shared view of quality and look at improving this where required. Learn from regulators in other sectors and other countries in order to identify whether there are other things we can do to strengthen equality and human rights in our single shared view of quality.
Collecting and analysing information from providers offers an opportunity to establish a shared view of whether equality and human rights information is currently being collected effectively by providers.	Develop a shared view of all relevant information about a provider (our new insight model) so that we can understand and act on any gaps in the information that we have about a provider, including equality and human rights information.
Priority 3 (risks): Promote a single shared view of quality	
Risks to equality and human rights	Mitigating actions
A single shared view of quality may not adequately cover equality and human rights issues.	Ensure that the equality and human rights elements of our existing regulatory framework are an important part of an agreed single shared view of quality and look at improving this where required.
If providers produce their own assessment of the quality of care they deliver, without appropriate assurance, there is a risk that they may produce equality and human rights statements that are not recognised as accurate by people using services or by representative community groups.	Make sure judgements on quality are not made solely on the basis of information received from providers. We will continue to inspect services and draw on other sources of information to analyse risk and assess quality. Consider how we validate information received from providers relating to equality and human rights.

Priority 4 (opportunities): Improve our efficiency and effectiveness	
Opportunities for improving equality and human rights	Ways of maximising the opportunities
More effective use of new technology could help us to communicate differently with people who use services, including equality groups and people whose circumstances make them vulnerable.	Consider how we use new technology to reach some groups who are currently less likely to engage with us or who face communication barriers but are frequent users of new technology. This includes, for example, younger people newly arrived to the UK, or younger disabled people. Consider how we use engaging content on equality and human rights in our communications, and use new technology to collect feedback on equality and human rights issues.

Continuing to recruit and train people to ensure we attract, develop and retain a diverse workforce is an opportunity to promote equality and diversity.	Continue to carry out focused work on equality, diversity and inclusion led by our People directorate (human resources).
Making the most of the diversity in our workforce could help CQC to be a more effective organisation.	Continue to embed CQC values (excellence, caring, integrity and teamwork) so that we respect, celebrate and utilise the diversity of CQC staff through our culture, and increase our effectiveness.
Learning and development for CQC's workforce could encourage staff to learn, reflect and act on equality and human rights issues in their day-to-day work.	Build on existing programmes, such as CQC's equality and human rights network and leads, and the CQC equality and human rights learning programme, to provide opportunities for all staff to learn about equality and human rights and how to apply our approach in their work.
Enabling CQC staff to use new technology could enable better access to guidance and support around equality and human rights issues in regulation.	Test the development of interactive equality and human rights guidance and support for CQC inspection teams.
Priority 4 (risks): Improve our efficiency and effectiveness	
Risks to equality and human rights	Mitigating actions
There is a risk that increased use of new technology to communicate with people who use services and the public means some groups of people may be less able to tell us about their experiences of care.	Continue to provide information and communicate with the public in a wide variety of ways, so we can reach a range of different groups of people, including those who may not be able to communicate through new technology.
Changes intended to improve our effectiveness or efficiency may have unintended consequences relating to equality. For example, it is possible that changes to our inspection approach could lead to changes in the structure and staffing of inspection teams, which could in turn risk reducing staff.	Continue to carry out equality impact analyses when we are planning changes to the way we work that could affect equality and diversity.

About CQC

The Care Quality Commission is the independent regulator of health and adult social care in England. We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

Our role

- We register health and adult social care providers.
- We monitor and inspect services to see whether they are safe, effective, caring, responsive and well-led, and we publish what we find, including quality ratings.
- We use our legal powers to take action where we identify poor care.
- We speak independently, publishing regional and national views of the major quality issues in health and social care, and encouraging improvement by highlighting good practice.

Our values

Excellence – being a high-performing organisation.

Caring – treating everyone with dignity and respect.

Integrity – doing the right thing.

Teamwork – learning from each other to be the best we can.

Our statutory objectives

Our strategy is based on our main statutory objectives, which remain the guiding reason for doing what we do. These are: to protect and promote the health, safety and welfare of people who use health and social care services by encouraging improvement of those services; encouraging the provision of those services in a way that focuses on the needs and experiences of people who use those services; and encouraging the efficient and effective use of resources in the provision of those services.

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