

Top 10 things you need to know about equality and human rights in CQC's regulatory role in health and social care

1. The diversity of our society means that providers have to be responsive to the needs of different groups and individuals. Providers have to treat people who use services as individuals – this is a requirement under the Health and Social Care Act 2008 (Regulated Activities Regulations 2010). Regulation 17 states that care and treatment must be provided to people with due regard to:

- Sex (gender)
- Religion
- Sexual orientation
- Racial origin, cultural and linguistic background
- Disability, and
- Age.

This relates to Outcome 1 in the essential standards – respecting and involving people who use services.

These are also all 'protected characteristics' under the Equality Act 2010, which also covers pregnancy and maternity, marriage and civil partnership. The Equality Act 2010 recognises gender reassignment as a separate protected characteristic (previously this was partially included in the definition of gender) and recognises people's beliefs, as well as religions.

Inspectors should have due regard to eliminating discrimination, advancing equality and fostering good relations when carrying out their work, as part of CQC's equality duty obligations under the Equality Act 2010.

Age discrimination in service provision will not become illegal until 2012. However, public sector providers (and providers delivering services on behalf of public bodies) have a duty to have due regard to advancing age equality and fostering good relations from April 2011.

You can find more information about the links between CQC's regulatory role and equality law in [*Equality and human rights in the essential standards of quality and safety: An overview.*](#)

2. Basing service provision on individuals' human rights will promote better outcomes for people and avoid discrimination. Protecting and promoting human rights is at the heart of good care for people. The key principles underpinning human rights in providing services are:

- Fairness.
- Respect.
- Equality.
- Dignity.
- Autonomy.

Sometimes universality and participation are added to this list.

You can find more information about the links between CQC's regulatory role and human rights in [*Equality and human rights in the essential standards of quality and safety: An overview.*](#)

3. Monitoring compliance on equality and human rights is integral to monitoring compliance with the essential standards of quality and safety. Outcomes relating to equality and human rights are embedded in the Health and Social Care Act 2008 associated regulations and in the essential standards – they are not only in Outcome 1. The important task is to ensure that information about equality and human rights is collected and contributes to judgments and regulatory actions. Human rights are listed as a factor for assessing impact on people who use services in the guidance about compliance judgment framework. Key questions are:

- Are outcomes different for people with different protected characteristics?¹
- Does this indicate non-compliance with the essential standards?
- Are any outcomes related to human rights principles?
- If there are concerns with these outcomes, what is the human rights impact on people who use services?
- How does this affect our judgment on the level of concern?

Specific equality and human rights prompts for each outcome in the essential standards can be found in: [*Equality and human rights in the essential standards of quality and safety: Equality and human rights in outcomes.*](#)

4. Competent equality and human rights practice will help us to achieve the challenge of meeting people's expectations during leaner times in public services. Meeting the needs of a diverse population from the outset often results in fewer subsequent changes needed as a result of a poorly-designed service or policy. Given that diversity is a majority in our population – that is, most people come under one or more of the protected characteristics - good equality and human rights practice should help providers to meet the needs of people who use their services more efficiently. Good equality and human rights practice in the planning

¹ See point 1 for a definition of 'protected characteristics'.

and commissioning of services should particularly help providers to meet people's needs during a time of economic restraint.

5. **Equality and human rights law provides a route to equality and human rights outcomes**, which closely align to the essential standards of quality and safety. For example, under equality law public sector bodies need to understand the actual or potential effects of their decisions on equality for different groups of people and use this information in decision-making. This can also help providers to meet the requirements in the essential standards.
6. **Your role as an inspector or assessor is vital to this challenge** because you have access to providers to monitor their services and to make a judgment about whether they are breaching the Health and Social Care Act regulations that relate to equality and human rights. When these regulations are breached, CQC can take regulatory action.
7. **You will find the guidance on equality and human rights, produced jointly by CQC and the Equality and Human Rights Commission, useful at various steps in the regulatory model.** The flowchart on the last page shows how you can use the overview guidance, outcomes guidance, appendix and this document ('top 10') at various steps in CQC's regulatory model.

Detailed charts are in [Equality and human rights in the essential standards of quality and safety: Appendix of charts mapping the essential standards to protected characteristics under the Equality Act 2010 and to the Human Rights Act 1998](#). You do not have to use this appendix to use the rest of the guidance, but you may find it useful when considering equality and human rights in a particular outcome.

8. **You need to use the guidance on equality and human rights in outcomes to plan how you use the inspection and assessment tools** that help to capture information on equality and human rights – such as the set of observational tools that have a strong focus on observing equality and human rights in day-to-day practice in services.
9. **As we focus on outcomes, an important source of evidence must be the views of people using services** because we need to find out from them whether their human rights have been upheld and whether services are removing the barriers that they face to equality. We need to use methods and tools to find out the views of people who have communication or cognitive impairments or do not speak English – as nobody should be excluded from expressing their views because we do not have the tools to do this.
10. **If you have concerns that a provider may be in breach of law on equality and human rights** there is a process in place to raise these issues, including sharing information with the Equality and Human Rights Commission in certain circumstances. More details of this process are given in [Equality and human rights in the essential standards of quality and safety: An overview](#).

Suggested uses of the equality and human rights (E&HR) guidance

