

Equally outstanding: Equality and human rights – good practice resource

How can a focus on equality and human rights improve the quality of care in times of financial constraint?

1. Often people see equality and human rights as a problem – not a solution. Especially in times of financial constraint.

Yet, there are ethical, business, economic and legal arguments for providers to pay attention to equality and human rights. Human rights principles of fairness, respect, equality, dignity and autonomy are at the heart of good care provision.

There is a strong link between the quality of care and equality for staff that requires work on basic fairness and building an inclusive culture that recognises and celebrates diversity. There is also a link between the quality of care and whether people who use services say their human rights are upheld.

Research shows that money spent on reducing health inequalities is the most efficient way of improving health outcomes for a local population. Equality and human rights is likely to become more important over time because of demographic and system changes, as well as financial constraint.

2. Many providers could learn from the best providers in using equality and human rights to improve the quality of care.

This work involves promoting human rights and ensuring equity in access, experience and outcomes. Importantly, it means empowering people who use services, their families and friends – and staff working in services.

Outstanding care providers build on strong person-centred care and inclusive leadership. Attention to equality and human rights at a service level is also needed to tackle specific quality improvement issues.

None of the common 'success factors' in the best providers took a large amount of resources. Their success was based on changing behaviours and thinking about issues. In particular:

- Leadership committed to equality and human rights
- Putting equality and human rights principles into action
- Developing a culture of staff equality
- Applying equality and human rights thinking to improvement issues
- Putting people who use services at the centre
- Using external help and demonstrating courage and curiosity.









3. Providers may still face challenges in times of constraint.

There might be a need to reduce costs, reduce service demand or increase income – such as through fees or charges.

However, there are ways to minimise the impact of these changes on people who use services or staff, if careful attention is paid to mitigating any negative impacts on equality and human rights.

4. Providers cannot do this work alone.

- **Commissioners** can help by building equality and human rights into contracts and monitoring. They also need to mitigate any potential negative impacts of the way they commission services. They can also consider commissioning to meet the needs of specific groups.
- **Regulators** need to build equality and human rights into their regulatory frameworks. They need to ensure there are no "unintended consequences" of regulation, e.g. risk aversion. They should reward people acting in an innovative way around equality and human rights. A focus on outcomes for people will help this.
- **Policy makers** need to support providers through ensuring they embed equality and human rights into national policy and system wide co-ordination.

5. Empowering people and communities is essential to advance equality and human rights.

To do this, health and social care leaders need to look beyond provider boundaries. They need to ensure the community involvement of individuals – especially those facing the greatest disadvantage. This will enhance people's wellbeing by enabling them to take control of their health and their lives.

Leaders need to develop broader, more holistic services that meet the needs of diverse communities. So, a range of people using services and their representative organisations must be involved in developing health and social care services at a local level.

Local system leadership is important too. Sustainability and transformation partnerships (STPs) have an important role to play in reducing health inequalities. There is some emerging good practice about how to look at equality in STP work.

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