

**THE HEALTH PROFESSIONS COUNCIL**

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MINUTES of the nineteenth meeting of the Communications Committee held at **11:00am on Friday 27 October 2006** at the Health Professions Council, Park House, 184 Kennington Park Road, London, SE11 4BU.

Mr P Acres  
 Ms C Farrell (from item 8)  
 Mrs D Haggerty  
 Miss M MacKellar  
 Mr P McFadden (Chairman)  
 Mrs A Turner

**IN ATTENDANCE:**

Miss S Butcher, Secretary to Committees  
 Mrs J Ladds, Communications Director  
 Mr M Seale, Chief Executive

**Item 1.06/01 ELECTION OF THE CHAIRMAN**

- 1.1 The Committee was requested to nominate one of its members as Chairman of the Communications Committee.
- 1.2 Mr Acres nominated Mr McFadden as Chairman of the Communications Committee which the following committee members supported, Mrs Haggerty, Miss MacKellar and Mrs Turner.
- 1.3 The Vice-Chairman was to be elected at the Committee's next meeting in February 2007.
- 1.4 Mr McFadden's nomination as Chairman of the Communications Committee would go to Council's December 2006 meeting for approval.

**Item 2.06/02 WELCOME AND INTRODUCTION**

- 2.1 Mr McFadden thanked all members for their support of his position as Chairman of the Committee. Three new committee members were welcomed on board, Mr Altay, Mrs Haggerty and Mrs Turner. A warm welcome was also given to the new Director of Communications Mrs

Ladds who had recently been appointed.

**Item 2.06/02 APOLOGIES FOR ABSENCE**

- 3.1 Apologies for absence were received from the following committee members; Mr Altay and Mrs Clark-Glass.

**Item 3.06/03 APPROVAL OF AGENDA**

- 4.1 The Communications Committee approved the agenda.

**Item 4.06/04 MINUTES OF THE COMMUNICATIONS COMMITTEE HELD ON THURSDAY 24 MAY 2006**

- 4.1 It was agreed that the minutes of the eighteenth meeting of the Communications Committee meeting be confirmed as a true record and signed by the Chairman subject to an amendment to 6.3. (please see 5.1 and any other business 12.2)

**Item 5.06/05 MATTERS ARISING**

5.1 Item 6.3 – Matters Arising – Patient, Public Involvement

- 5.1.1 The Committee noted that the Secretary to the Committee had been advised that a written report was submitted by Ms Farrell to Secretariat on the Patient Public Involvement meeting held on 5 April 2006. Unfortunately, the Secretary to the Committee was not able to locate this and was going to ask Ms Farrell if she could provide a verbal update. However, due to unforeseen circumstances this was not possible at the meeting. (please see any other business 12.2)

5.2 Item 7.4 – Matters Arising – Customer Services

- 5.1.2 The Committee noted that the provision of customer services now sat within Registrations.

5.3 Item 8.5 – Matters Arising – Communications Strategy and Workplan

- 5.1.3 The Committee noted that the Communications Strategy and Workplan was on the agenda for today's meeting and a brainstorming session was planned.

5.4 Item 9.2 and 9.5 – Matters Arising – Stakeholder Strategy and Workplan

- 5.1.4 The Committee noted that the stakeholder strategy and workplan would be incorporated into the overall communications strategy for 07/08.

5.5 Item 10.4 – Matters Arising – Patient Public Involvement

5.1.5 The Committee noted that the audit of the HPC's Patient, Public Involvement (PPI) activities would be undertaken. This would include an analysis of current activities, and a look at what other regulators are doing. Based upon this analysis a model for PPI initiatives would be recommended.

5.6 Item 11.3 – Matters Arising – Standards of Proficiency (SOPs)

5.1.6 The Committee noted that the profile of the Standards of Proficiency (SOPs) would be reviewed in further work undertaken in consultations with Higher Education Institutions and other key stakeholders. The Committee discussed the option of including an update on the SOPs in the HPC Newsletter.

5.2.6 The Committee agreed that the message still needed to be promoted; that the SOPs went beyond threshold standards. Health professionals should utilise continuing professional development (CPD) to progress within their scope of practice. The Committee agreed that it was imperative to build this message into grandparenting groups whose education had not been built upon the SOPs. Case studies were identified as an effective way in which this could be communicated.

5.7 Item 12.4 – Matters Arising – Findings of the Internal Communications Proposal

5.1.7 The Committee noted that the internal communications strategy and workplan would be incorporated into the overall communications strategy for 07/08.

**Item 6.06/06 CHAIRMAN'S REPORT**

6.1 The Chairman had nothing to report.

**Item 7.06/07 DIRECTOR'S OF COMMUNICATIONS REPORT**

7.1 The Committee received the Director of Communications report.

7.2 The Committee noted that the first regional awareness campaign had been rolled out across Birmingham. The location of this event was based upon research findings carried out by MORI which recommended the initial targeting of urban areas in the North of England. Once the overall findings of the Birmingham campaign had been evaluated, a second campaign maybe launched in Glasgow next year.

7.3 The Committee noted that the recruitment of additional staff members to the Communications department would be undertaken shortly.

- 7.4 The Committee noted that there had been positive feedback about the electronic newsletter and agreed as the NHS was one of HPC's key stakeholders, it would be a good opportunity to promote our work to them through the medium of a newsletter.

### **Item 8.06/08 COMMUNICATIONS STRATEGY AND WORKPLAN**

- 8.1 The Communications Committee held a brainstorming session on the Communications Committee strategy and workplan which was to be devised for Council's approval in March 2007.
- 8.2 The Committee discussed what the key message was that they wished to communicate to HPC's stakeholders. The following key messages were brainstormed :
- Protection of patients/public
  - Importance of regulation to (the public)
  - Safe care / caring about....
  - We protect the people in a healthcare environment via the regulation of 180,000 health professionals
  - We protect your healthcare by protecting the services of health professionals
- 8.3 The Committee considered that the HPC's message needed to be elevated further into the public consciousness building on the work that had already been undertaken via the hpcheck campaign. Members of the public had been alerted to the importance of visiting registered health professionals by logging onto the specially dedicated website [www.hpcheck.org](http://www.hpcheck.org).
- 8.4 The Committee agreed that a simple message from HPC needed to be conveyed to groups such as MP's and government officials. These groups were identified as the portals through which HPC's key message could be filtered down to the wider population. The Committee considered the employment of external creative agencies to further the HPC's campaign work. In addition, alliances with other health regulators was debated (General Medical Council (GMC), Nursing and Midwifery Council (NMC) and General Dental Council (GDC) for example) so that a consistent and powerful message was given. The Committee noted that a Joint Regulator's Group was already in existence who were working on the production of a leaflet for the purposes of signposting the public to the appropriate healthcare regulator.
- 8.5 Kitemarking and accreditation of the HPC Register was also considered and linked into the public's desire to seek health professionals that were 'safe'. There had been a huge growth in the independent sector that

increasingly required some level of guidance to be provided in assisting the public in their choice of health professional. The HPCCheck campaign was already promoting registered health professionals to download the HPCCheck logo for use on their letterheaded paper, and was a form of visual accreditation.

### **STAKEHOLDERS**

- 8.6 The previous Communications Stakeholder document was reviewed with the intention of integrating this into the wider communications strategy as a whole. The Committee considered who the HPC's key and most influential stakeholders were so that resources could be effectively allocated. It was agreed that two of HPC's key stakeholders, the public and employers needed to be categorised further as these were multi-facted groups that were informed by varying factions. It was agreed that the media was an influencer rather than a stakeholder with vested interests. The media was used as the mechanism through which messages were successfully communicated to HPC's stakeholders. The Department of Health was identified as a key stakeholder with sub-divisions that were all encompassing within the different feedback chains. The NHS were therefore the gatekeepers to HPC's potential service users.
- 8.7 The Committee discussed the meetings which were held between the HPC and the professional bodies and identified these as potential vehicles through which the communications strategy could be fed. A communications briefing pack for example could be provided at the meetings for the professional bodies information.
- 8.8 The Committee discussed the need to target Higher Education Institutions as there was seemingly an ever growing choice of courses on offer, some of which led to registration by the HPC and others which did not. The students therefore needed to be better informed in these areas.
- 8.9 A draft communications strategy and workplan would be devised and sent to all committee members for their comment and review before Christmas. This was so that it could be adequately budgeted for and timetabled into Council's March 2007 meeting where approval would be sought.

**Action: JL**

### **Item 9.06/09 COMMUNICATIONS COMMITTEE'S TERMS OF REFERENCE**

- 9.1 The Communications Committee received a paper for discussion/approval from the Secretary to the Committee.
- 9.2 The Committee approved the following terms of reference to be included

Date	Ver.	Dept/Cmte	Doc Type	Title	Status	Int. Aud.
2006-10-30	a	SEC	MIN	Communications Committee Minutes 27 October 2006	Final DD: None	Public RD: None

in the Communications Committee Standing Orders, subject to one amendment in the fourth bullet point (see italics):

- To advise the HPC and its Executive on its overall communications strategy in pursuit of its aims and objectives.
- To review regularly the communications strategy in the light of ongoing developments.
- To advise the Council on its priorities in relation to the Committees strategies.
- *To monitor the delivery and evaluate the outcomes of the communications strategy.*
- To recommend the procedures by which the Council can communicate its various processes.

**Action: SB**

**Item 10.06/10 DATES OF COMMUNICATION COMMITTEE MEETINGS  
2007/08**

- 10.1 The Communications Committee received a paper to note from the Secretary to the Committee.
- 10.2 The Chairman was in agreement with the forthcoming dates proposed for the Communications Committee meetings in 2007-08.
- 10.3 The Committee noted the dates of the Communications Committee for 2007/08.

**Item 11.06/11 UPDATE ON COMMITTEE MEMBERSHIP**

- 11.1 The Communications Committee received a paper to note from the Secretary to the Committee.
- 11.2 Three new members had joined the Communications Committee following the disbandment of the Registration Committee. These were, Mr Altay, Mrs Haggerty and Mrs Turner. Council had ratified their membership at their September 2006 meeting.
- 11.3 The Committee noted that a Mr Peter Douglas had been appointed by the NHS Appointments Commission as the new lay member on Council. Mr Douglas' appointment would be approved by Council in December 2006. It was likely that Mr Douglas would be asked to sit on the Communications Committee.

**Item 12.06/12 ANY OTHER BUSINESS**

- 12.1 There was one item of any other business.
- 12.2 The Committee were alerted to the fact that there was an error in the May 2006 Communications minutes at 6.3. where it stated that the Patient, Public Involvement report had not been submitted by Ms Farrell, when in fact it had been sent to the Secretariat department on the 25 April by email. Unfortunately, the Secretary to the Committee had not been in receipt of the email. All were in agreement that the May 2006 Communications Committee minutes should be updated to reflect the fact that the report had nevertheless been sent.

**Action: SB**

**Item 13.06/13 DATE AND TIME OF THE NEXT MEETING**

- 13.1 The next meeting of the Communications Committee would be at 11:00am on Tuesday 27 February 2007.

CHAIRMAN:

DATE: