

Council, 27 March 2014

## Communications Strategy

### Executive summary and recommendations

#### **Introduction**

The communications strategy outlines key operational and strategic issues, the communications objectives, key messages and audiences as well as communications tools. It highlights implementation of the strategy and how it will be measured. The strategy was first developed in 2007 and subsequently updated annually. Some further amendments have been made to the document to bring it up to date in 2014.

#### **Decision**

The Committee is invited to discuss and approve the Strategy document.

#### **Background information**

None

#### **Resource implications**

Resources have been set out in the departmental workplan and are linked to the department's budget.

#### **Financial implications**

As above.

#### **Appendices**

Communications Strategy

#### **Date of paper**

17 March 2014

**Health and Care Professions Council**

**Communications Strategy  
(updated March 2014)**

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## **1 Introduction**

- 1.1 Good communication is essential for the HCPC to engage effectively with its audiences and to fulfil its primary role of protecting the public. As a regulator of health and care professionals, it is important that we tell the public about our role in protecting their wellbeing, inform and educate our registrants as to the benefits of regulation and what we require of them and communicate our public protection role to stakeholders.

## **2 This document**

- 2.1 This document is divided into several sections. It sets out the principles and purpose of our communications and shows how the communications work supports Strategic Intent. It also provides a high level view of who we are communicating with, what our core messages are, the channels we will use and how we will measure the effectiveness of our communications activity.

## **3 Communications principles**

- 3.1 The HCPC's vision and values are set out in the Strategic Intent 2012-15. The communications strategy and workplan will adhere to these principles and will ensure that all our published communication will be

- Accessible
  - Accurate
  - Clear
  - Honest
  - Open and transparent
  - Professional
  - Timely
- 
- In accordance with the HCPC's house style and visual identity
  - Meet Plain English guidelines where applicable

## **4 Communications and Strategic Intent 2012-15**

- 4.1 The HCPC's Strategic Intent 2012-15 identifies key external and internal drivers and sets out six strategic objectives. These include good governance; efficient business processes; communication; build the evidence base of regulation; influence the policy agenda; and engagement in the four countries. The Strategic Intent 2012-15 also highlights the work the organisation needs to undertake to meet these objectives.
- 4.2 The communications strategy, which is underpinned by departmental annual workplans, seeks to support the core work of the Council as well as the objectives and priorities set out in the HCPC's Strategic Intent 2012-15.

## **5 Communications – a statutory responsibility**

- 5.1 The overarching purpose of the HCPC's communications work is set out in Article 3 (13) of the Health and Social Work Professions Order (2001) which states
- The Council shall inform and educate registrants, and shall inform the public, about its work

5.2 The main purpose of our communications work is to fulfil this statutory obligation and we will do this by:

- Engaging with registrants to increase understanding of the benefits of regulation, the work of Council and what is required of them
- Extending engagement with the public through improved access to information about the HCPC
- Increase awareness of HCPC's role in regulation amongst all stakeholder audiences
- Engage with employers, government, educators, professional bodies and other regulators
- Continue to build relationships and increase understanding through meetings with stakeholders in England, Scotland, Wales and Northern Ireland
- Continue to participate in UK and international regulatory forums
- Ensure employees are informed and updated on all key organisational activities

## **6 Core messages**

6.1 In all our communication activities we will promote the following core messages:

- The HCPC's primary role is to protect the public.
- We are a multi-professional regulator, regulating over 320,000 professionals including radiographers, physiotherapists, paramedics, biomedical scientists, dietitians, practitioner psychologists and podiatrists and social workers in England.
- We protect the public by setting national standards of education, conduct and performance for the professionals we regulate, by dealing with complaints and by ensuring that professionals who do not meet our standards are held to account.
- We are a modern, efficient and effective regulator which aims to be at the forefront of professional regulation.
- We actively contribute to the regulation agenda and promote good practice and standards.

6.2 These core messages are not fixed. They can be modified in line with changes in the organisation and its strategic intent as well as being refined for specific projects and activities.

## **7 Stakeholder audiences**

7.1 The HCPC has a complex stakeholder map, but it is important that we communicate efficiently and effectively with stakeholders. Set out below is a summary of the main groups we communicate with. It is not exhaustive and is designed to give an overview of the groups who have a vested interest in what we do.

- Public: including members of the public; patient groups; consumer associations; referrers; and service users and carers
- Registrants: existing registrants; new registrants; and prospective registrants
- Key stakeholders across the four nations: parliamentarians; professional bodies; employers; other regulators; trade unions; higher education institutions; other education providers and education organisations; and other health and social care organisations
- Internal: employees; partners; and council

## **8 Communication channels and resources**

8.1 The HCPC has a range of channels and tactics for communicating and engaging with stakeholders. These include face to face through meetings, HCPC events, talks and presentations as well as attendance at professional and consumer conferences. Media channels including social media as well as web and digital activities, publications and newsletters and stakeholder liaison. For internal communications, this includes team meetings, all employee meetings, employee newsletter and web channels.

## **9 Implementing communications**

9.1 It should be recognised that whilst the communications strategy is the primary contributor to delivering recognition of the HCPC's public protection role, the consistent high quality delivery of operations and activities is also an essential factor in how the organisation is perceived by its key audiences.

9.2 The Communications Department is responsible for the day to day management of the strategy and its related annual workplan. However, it is the responsibility of everyone in the organisation to communicate effectively and, therefore, the success of the strategy also rests with the Council and Executive.

## **10 Measurement and evaluation**

10.1 The effectiveness of our communications work will be gauged through continuous measurement and evaluation. Qualitative and quantitative methods used will include: feedback from HCPC events; participation and evaluation of exhibitions; attendance and feedback from talks, presentations and conferences; web statistics; surveys; and media coverage. We will also undertake market research and opinion polling to gain a better understanding of perceptions of the HCPC and our processes.

10.2 The HCPC's strategy is to continually improve the organisation, and the information gathered through this measurement will be used to formulate further activities and strategies.