

External Communications

August 2007

Final - Confidential

Assurance Level: Satisfactory in most respects

Members/ Staff Interviewed: Communications Committee
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Ladds

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Accountants &
business advisers

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Project timescales

Date project commenced	02/07/07
Date field work completed	24/08/07
Date draft report issued	29/08/07
Date management comments received	30/08/07
Date final report issued	30/08/07

1 Introduction

1.1 In accordance with the 2007/2008 internal programme that was agreed with the Audit Committee in March 2007, we have undertaken a review of the arrangements for managing external communications at the Health Professions Council (“HPC”).

Key risks

1.2 The HPC has included the following strategic risks in relation to its external communications activity in its risk register for 2007/08:

- Failure to inform the public in accordance with article 3 (13);
- Loss of support from professional bodies; and
- Inability to inform stakeholders following a crisis.

1.3 In addition to these risks, the recent White Paper setting out the Government’s vision for healthcare regulation may also have a significant impact upon the organisation. The HPC’s approach to communications will need to be robust in relation to this area so that the organisation’s position and response are effectively communicated.

Scope of our work

1.4 Our work therefore focused upon the arrangements for managing the risks that are noted above. In particular, we considered the arrangements for managing the quality, timeliness and consistency of external communications, focusing on communications with professional bodies and with the public (under Article 3(13)).

1.5 The work was carried out primarily by holding discussions with relevant staff and management, reviewing any available documentation including communications and testing controls in place to determine whether they were operating effectively. The audit fieldwork was completed in July/ August 2007.

1.6 This report has been prepared as part of the internal audit of the Health Professions Council under the terms of the contract for internal audit services. It has been prepared for the Health Professions Council and we neither accept nor assume any responsibility or duty of care to any third party in relation to it.

1.7 The conclusions and recommendations are based on the results of audit work carried out and are reported in good faith. However, our methodology is dependent upon explanations by managers and sample testing and management should satisfy itself of the validity of any recommendations before acting upon them.

2 Executive Summary

2.1 This report summarises the work undertaken by PKF and our conclusions on the arrangements for managing external communications at the HPC. The work was performed as part of our agreed internal audit plan for 2007/08.

Background

2.2 Although every member of staff may communicate with the public, registrants or other stakeholders, external communications activity is led by the Communications Department and overseen by the HPC's Communications Committee. A communications strategy and detailed work plan for the Communications Department setting out its principal aims and activities are prepared annually and approved by the Committee.

2.3 This is an important area of the HPC's activities since Article 3 (13) of the Health Professions Order (2001) which states that the HPC shall inform and educate registrants, and shall inform the public, about its work.

Our assessment

2.4 Based on the audit work carried out we concluded that the HPC's arrangements for managing its external communications were **satisfactory in most respects**.

2.5 The organisation's approach that includes a structured work plan, significant management input to external communications and the regular scrutiny of activities by the Communications Committee meet best practice. However, we noted that there may be scope for improving the effectiveness of some activities such as the HPC's attendance at external exhibitions and listening events and the resources currently deployed towards external communications may now need to be enhanced as a result of the recent White Paper.

2.6 At the time of our review, much of the work plan for 2007/08 had still to be delivered, particularly in relation to communicating with the public.

2.7 For this reason, we were unable to conclude as to whether some of the planned controls and checks over the quality, consistency and delivery were operating effectively since they were not due to come into operation until later this year, when the HPC's principal external communications activities are due to take place.

2.8 We therefore raised 3 recommendations in relation to external communications.

2.9 The principal findings of our work are set out in the following paragraphs. Our recommendations are summarised for ease of reference in Section 4 of this report.

Principal findings

- 2.10 As part of our review we undertook a limited comparison of the Communications Department's staff numbers and management structure for 2007/08 against some of our clients who in common with the HPC operate within the public sector and have a broad range of stakeholders.
- 2.11 The conclusions of this exercise were as follows:
- In common with the HPC, the benchmarked organisations had strengthened their communications teams in recent years;
 - There appears to be a trend for more managers and fewer administrators to be deployed reflecting the increasing significance of communications within the public sector; and
 - The number of staff deployed in-house by the HPC (7 staff members) was slightly below the average (8 staff members), although the HPC budgeted to spend more on external agencies than some of the other organisations and some deployed more administrative support.
- 2.12 Annual departmental costs are budgeted at just over £1.1 million for 2007/08. This is around £100,000 lower than the average amounts set aside by the organisations that we compared the HPC against. These findings suggest that the finances set aside for communications within the HPC are subject to close and robust scrutiny and are broadly consistent with other similar organisations. It is possible that additional investment in communications may be required by the HPC.
- 2.13 To determine whether the level of investment made by the HPC is sufficient, an exercise to evaluate the resources deployed in detail against the specific departmental objectives would need to be undertaken. This is beyond the scope of this review and the HPC may wish to consider undertaking its own assessment of this matter. We would of course be delighted to provide support to such a review, should management decide to take this matter forward.

Informing the public

- 2.14 Article 3 (13) of the Health Professions Order (2001) requires the HPC to inform the public about its work. In recent years, the HPC has undertaken a substantial amount of work to strengthen its arrangements for communicating with the public. The principal means through which the HPC is seeking to communicate with the public during 2007/08 continue to be:
- Media and campaigns;
 - Publications e.g. posters and leaflets; and

- Website development.

2.15 At the time of our review, much of the work planned for 2007/08 inevitably had still to be delivered. For this reason, we were unable to conclude as to whether the controls and checks over the quality, consistency and delivery were operating effectively at that stage.

2.16 However, the significant level of management input to external communications and the regular scrutiny of activities by the Communications Committee that is scheduled to take place during 2007/08 meets best practice and should ensure that the HPC's objectives for communicating with the public are achieved. We did not therefore raise any recommendations in relation to this area.

Maintaining the support of registrants

2.17 Over the last 2 years the HPC has developed its arrangements for communicating with registrants considerably. The website has been significantly developed to simplify access to data that is useful to registrants including educational pages and registration information.

2.18 An e-newsletter ("*HPC in Focus*") is also produced for registrants 6 times a year providing them with up to date information and positive news stories about the HPC.

2.19 Public campaigns and activities that have been undertaken have focused upon the difference between registered health professionals and unregulated individuals - a key concern raised by registrants in previous surveys.

2.20 The HPC seeks to maintain a regular presence at the conferences and events for the regulated professional bodies and provides articles and promotional material for their publications.

2.21 The HPC also exhibits at up to 6 external conferences each year. This work is led by the Events Manager and aims to increase the understanding of the role of the HPC and its relevance to registrants. Evaluation reports are prepared after each event by the Events Manager and are reviewed by the subsequent meeting of the Communications Committee.

2.22 At the time of our review, evaluation reports covering 2 events had been considered by the Communications Committee. Although we understand that some potentially useful contacts were made at these events, we noted that the evaluation reports for both exhibitions concluded that better opportunities for promoting the HPC's messages could be found elsewhere and the HPC had decided not to exhibit at these events in the future.

2.23 In view of these results, we suggest that management should review the HPC's exhibition programme for 2007/08 once again to confirm that attendance at the specified conferences will result in the outcomes desired by the organisation and will provide best value for money.

2.24 We therefore raised a recommendation in relation to this matter.

- 2.25 Since 2002 the HPC has also run a Listening Event programme. This work is also led by the Events Manager. Listening events are designed to give registrants – and the public – an opportunity to see and hear first-hand how the HPC is progressing, and to provide feedback on how the organisation can improve. Where possible, this feedback is incorporated into HPC strategy and future regulation of health professionals.
- 2.26 At the time of our review 2 Listening Events had already taken place during April 2007. We noted that the evaluation reports for these events concluded that although the feedback was generally positive the number of individuals in attendance was considered to be disappointing and some groups of registrants did not attend either of the events.
- 2.27 In view of these results, we suggest that management should review the HPC's Listening Events programme for 2007/08 once again to confirm that attendance at the specified events will result in the outcomes desired by the organisation and will provide best value for money.
- 2.28 We have therefore raised a further recommendation in relation to this matter.

Responding to the White Paper

- 2.29 Since the issue of the White Paper "*Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century*", the HPC has needed to consider its impact upon the organisation and respond accordingly.
- 2.30 The HPC has therefore developed a Public Affairs Strategy, which sets out how the organisation proposes to approach this important development.
- 2.31 Our review of the strategy indicated that it sets out the political and regulatory context, the HPC's broad objectives, the opportunities and threats facing the organisation, key stakeholders, planned activities and timescales. The strategy considers the White Paper specifically and the wider public affairs agenda of the HPC.
- 2.32 In our view, this structured approach meets best practice and should ensure that the HPC is well placed to address these matters during 2007/08.
- 2.33 Since the details of the White Paper were not known at the time when the HPC's communications strategy and work plan were developed, the potential additional activities arising were not included these documents and may not therefore be sufficiently resourced.
- 2.34 At this stage, the level of additional inputs is difficult to quantify and much of the work may be able to be absorbed without further costs arising or by deferring other planned activities.
- 2.35 Nevertheless, there is a risk that the budget and resources deployed for the Communications Department may therefore no longer be sufficient to meet HPC's communications requirements. We therefore raised a recommendation in relation to this matter.

Crisis management

- 2.36 In our view, the HPC's arrangements for informing stakeholders in the event of a crisis should prove sufficient to enable them to be kept up to date should such an event arise. We understand that the website and network can be accessed remotely from the recovery site or from individuals' homes. Templates for the press releases have been developed and we understand that a full list of key external stakeholders is also accessible remotely. These arrangements meet best practice for external communications. We did not therefore raise a recommendation in relation to this area.
- 2.37 Finally, we wish to thank all members of staff for their availability, co-operation and assistance during the course of our review.

PKF (UK) LLP
August 2007

3 Detailed Findings

Background

- 3.1 External communications activity is led by the HPC's Communications Department and overseen by the organisation's Communications Committee.
- 3.2 A communications strategy and detailed work plan for the Communications Department setting out its principal aims and activities are prepared annually and approved by the Committee.
- 3.3 The principal objectives set out in the HPC's communications strategy are:
- Raising awareness of the HPC's role in regulation across all of its audiences;
 - Extending the HPC's reach to the public enabling them to easily access information about the HPC;
 - Influencing the regulatory agenda through ongoing dialogue and engagement with key stakeholders;
 - Engaging with registrants to ensure that they understand the benefits of regulation, the work of the HPC and what is required of them; and
 - Supporting effective internal communications within the organisation.

Resources

- 3.4 The Communications Department has changed and grown at a rapid rate since its inception in April 2002. Originally consisting of just one person, the team had grown to eight by 2006/07.
- 3.5 The Communications Department has been further strengthened since 2006/07 following the appointment of a new Director. The number of management posts within the department has increased from 4 to 5 managers who are now covering events, communications, the HPC website, publications and public affairs.
- 3.6 The number of administrative staff has been reduced to one Team Administrator (compared with 3 Communications Officers in 2006/07).
- 3.7 As part of our review we undertook a limited comparison of the staff numbers and Communications Department management structure for 2007/08 against some of our clients who in common with the HPC operate within the public sector and have a broad range of stakeholders. The conclusions of this exercise were as follows:

- The main components of the HPC Communications Department budget for 2007/08 are as follows:

Budget component	Budget 2007/08 £'000
In-house staff costs	296
Campaign expenditure, events, stakeholder communications, surveys, research, agency costs.	748
Other departmental costs	71
Total budgeted expenditure	1115

- Annual budgeted departmental costs at the HPC for 2007/08 therefore amount to just over £1.1 million. This is around £100,000 lower than the average amounts set aside by the organisations that we compared the HPC against;
 - In common with the HPC, the benchmarked organisations had strengthened their communications teams in recent years;
 - There appears to be a trend within all the benchmarked organisations for more managers and fewer administrators to be deployed reflecting the increasing significance of communications within the public sector; and
 - The number of staff deployed in-house by the HPC (7 staff members) was slightly below the average (8 staff members), although the HPC budgeted to spend more on external agencies than some of the other organisations and some deployed more administrative support.
- 3.8 These findings suggest that the finances set aside for communications within the HPC are subject to close and robust scrutiny and are broadly consistent with other similar organisations. It is possible that additional investment in communications may be required by the HPC.
- 3.9 To determine whether the level of investment made by the HPC is sufficient, an exercise to evaluate the resources deployed in detail against the specific departmental objectives would need to be undertaken. This is beyond the scope of this review and the HPC may wish to consider undertaking its own assessment of this matter. We would of course be delighted to provide support to such a review, should management decide to take this matter forward.

Key risks

- 3.10 The HPC has included the following strategic risks in relation to its external communications activity in its risk register for 2007/08:
- Failure to inform the public in accordance with article 3 (13);
 - Loss of support from professional bodies; and
 - Inability to inform stakeholders following a crisis.
- 3.11 In addition to these risks, the recent White Paper setting out the Government's vision for healthcare regulation may also have a significant impact upon the organisation. The HPC's approach to communications also needs to be robust in relation to this area so that the organisation's position and response are effectively communicated.
- 3.12 Our work focused upon the arrangements for managing the quality, timeliness and consistency of external communications, focusing on communications with professional bodies and with the public (under article 3 (13)). In particular, we considered the arrangements for managing the risks that are noted above.
- 3.13 As agreed with management and the Audit Committee, we did not therefore review internal communications as part of this project. The findings of our work are set out in the following paragraphs.

Our findings

Informing the public

- 3.14 Article 3 (13) of the Health Professions Order (2001) requires the HPC to inform the public about its work. In recent years, the HPC has undertaken a substantial amount of work to strengthen its arrangements in relation to this area.
- 3.15 The approach adopted by the organisation has been largely based upon a public perception survey undertaken on the HPC's behalf by MORI in 2005.
- 3.16 The key findings of the survey were as follows:
- Just over 10% of the public had heard of the HPC;
 - Consistent with other MORI research of Government regulatory bodies, awareness of the HPC's regulatory role was very low with only 5% of the public stating that they would turn to the HPC if they had a complaint about a health practitioner; and

- Checking the qualifications of health practitioners was rare, with only 2% of the members of the public surveyed stating that they had checked these with the relevant regulatory body.
- 3.17 Following the survey, the HPC recognised that a more proactive approach to engaging the public was required to convey its key messages.
- 3.18 In November 2005, www.HPCheck.org, a website dedicated to the public, was launched. It hosts the HPC Register on the home page and consists of further pages providing concise information about the HPC to members of the public. This formed the basis of a campaign to inform the public about the HPC by asking them to check the professional they were using or intending to use is registered.
- 3.19 An “advert e-kit” was launched during 2006/07, which is an initiative aimed at registrants. The ‘kit’ is available to download from the HPC website free of charge.
- 3.20 It permits registrants to download the HPCheck logo, a visual identity guide, together with examples of how to use the logo in their advertising, stationery and business cards.
- 3.21 This initiative uses the health professionals on the register, who are working in private practice encouraging them to display the logo in their practices, on advertising and on appointment cards thereby increasing public awareness. We understand that the HPCheck logo has also been trademarked to avoid misuse by non-registered people. Registrants working within the NHS and other settings have been encouraged to display promotional materials such as posters, leaflets and car stickers, which will also raise awareness of the HPC.
- 3.22 For 2006/07, the HPC also introduced a programme of regional campaigns with the main objective of promoting HPCheck the public and raising awareness of the organisation’s role and activities at a local level. The regional campaigns engaged local celebrities, MPs and journalists. Targeted advertising was also undertaken at the local hospitals, GP surgeries, private clinics and public information agencies such as the Citizen’s Advice Bureau. These developments built upon the national activities and advertising campaigns that had previously been undertaken by the HPC.
- 3.23 The HPC has updated its approach recently and has set out the steps that it proposes to take to engage with the public in its communications strategy covering the period from 2007 to 2011 and the Communications Department work plan for 2007/08.
- 3.24 The principal means through which the HPC is seeking to communicate with the public during 2007/08 continue to be:
- Media and campaigns;

- Publications e.g. posters and leaflets; and
 - Website development.
- 3.25 The HPC's Communications Manager leads its public media and campaign activity. We noted that campaigns are planned to be undertaken at a national and regional level during 2007/08, promoting the HPC's public protection role and reinforcing the HPCheck message. At the time of our review in July 2007, the main public media campaign for the year was not scheduled to be run until late 2007. In preparation for this activity, a press agency had been appointed to work with the Communications Department on developing the HPC's media programme for the year.
- 3.26 We understand that the Director of Communications will oversee this project to ensure quality and consistency with the messages that the HPC wishes to convey and that a report on the planned media campaign is scheduled to be considered by the Communications Committee in October 2007.
- 3.27 We were also pleased to note that an evaluation of the impact of the exercise upon public awareness is to be undertaken after the campaign has been completed.
- 3.28 Our review indicated that these arrangements were consistent with the timescales set out in the agreed Communications work plan for 2007/08 and in our view the senior management and committee review of the work should ensure that the quality, consistency and delivery of the campaign is subjected to appropriate challenge and scrutiny when it takes place.
- 3.29 We noted that press releases have continued to be issued by the HPC in relation to its work regarding Fitness to Practise and other topical matters. The HPC's Communications Manager also leads this aspect of departmental activity. All press releases are published on the HPC's web site. An external agency provides the HPC with details of the organisation's press coverage. Our review indicated that monthly reports have been produced and distributed throughout the HPC setting out the articles and reports appearing in the national and regional press and professional publications. These are monitored by the Communications Department.
- 3.30 Management has recognised that there is scope for raising the HPC's profile in some areas of the press and for improving journalists' understanding of the issues facing the HPC and its regulatory role.
- 3.31 As a result, the Communications Department work plan includes the milestone of identifying key journalists during 2007/08 and building relationships with them through one to one meetings and press events. At the time of our review, this work was at an early stage of development.

- 3.32 The HPC's Publications Manager leads the Communications Department's work in managing the publications process for the organisation. Recent work has included reviewing the Approvals and Monitoring, Fitness to Practise and Corporate annual reports as well as various guidance and consultation documents.
- 3.33 The Publications Manager is also responsible for controlling the issue of the various stickers, posters and leaflets that the HPC uses to publicise its work.
- 3.34 In December 2006, an external design agency was appointed to undertake an audit of all HPC publications. Following on from this, the agency has worked with the Communications Department and the HPC Executive to develop a refreshed visual identity (with accompanying guidelines) for the organisation.
- 3.35 The benefits from these developments are expected to be as follows:
- Improved legibility of all publications;
 - Complete consistency of design/artwork across all publications and any item displaying the HPC corporate logo;
 - More efficient and cost effective production of publications; and
 - Good practice in relation to equality, accessibility and environmental issues.
- 3.36 At the time of our review, the work to implement the new visual identity had only just begun and was scheduled to be introduced on a phased basis throughout 2007/08. We noted that a progress report on this area was considered by the February 2007 meeting of the Communications Committee.
- 3.37 Further developments are also planned to the organisation's website, building upon the significant enhancements that have been made in recent years. The activities scheduled for 2007/08 include:
- Enhancing the website and extranet in line with the refreshed visual identity- this will ensure that any pages that contain out of date information will be updated;
 - Market researching the website to ensure that it is accessible and relevant to all the HPC's audiences;
 - Developing the website content by working with other departments to support their requirements and opportunities for development; and
 - Providing statistics and reports to inform activities and strategies for developing content.
- 3.38 The Website Manager leads the Communications Department's work in relation to this area.

- 3.39 At the time of our review, much of this work had only recently started, although we noted that an initial paper on website development and statistics was considered by the May 2007 meeting of the Communications Committee.
- 3.40 Finally, the impact of the activities to communicate with the public that are set out above is to be assessed by a follow up to the 2005 MORI survey, which is scheduled to be undertaken during autumn 2007 and will also include registrants.
- 3.41 The 2007 survey will provide the HPC with an indication as to whether its efforts since the last survey have resulted in improved public awareness of the HPC and its role. In our view it is therefore the key test of the effectiveness of the approach adopted by the organisation since the last survey. At the time of our review, we were advised that management was beginning to make the necessary preparations, including organising the process, appointing the agency to conduct the survey, identifying key measures of performance and developing the questions to be asked of potential respondents.
- 3.42 We understand that the HPC proposes to continue to conduct such surveys every 2 years so that any changes to its approach following each survey have the opportunity to have an impact and to maximise the cost effectiveness of the exercise. Although some regulatory organisations undertake such surveys less frequently (every 3-5 years), we concur with the current approach adopted by the HPC in view of the low level of public awareness noted in the 2005 survey.

Maintaining the support of registrants

- 3.43 The 2005 MORI survey also obtained the views of registered health professionals regarding the services provided by the HPC. The key findings were as follows:
- Health practitioners felt that the HPC needed to concentrate its efforts upon making the public aware of the difference between health professionals operating under registered and regulated titles and those that are not;
 - The HPC was perceived as a relatively new organisation that needed to build up confidence among its registrants. Knowledge of the HPC's specific functions was low and health professionals still felt a strong allegiance to their profession- specific bodies. there was a concern that insufficient consideration was given by the HPC to the complexities and differences between the various registered health professions; and
 - Registrants consistently stated that the HPC needs to communicate more and do more for its members i.e. they felt they did not get enough from the HPC for their money, and see it as a regulator with the power to strike them off, rather than as an organisation which supports them/gives them information.

- 3.44 Over the last 2 years the HPC has developed its arrangements for communicating with registrants considerably. The issues noted in the MORI survey are being addressed in the following ways.
- 3.45 Firstly, as is described above the HPC has undertaken a wide range of campaigns and activities to engage and inform the public more effectively. These activities have specifically focused upon the difference between registered health professionals and unregulated individuals and we understand it is planned that they will continue to do so in the future.
- 3.46 The website has been significantly developed over the last 2 years to simplify access to data that is useful to registrants including educational pages and registration information.
- 3.47 An e-newsletter ("*HPC in Focus*") is also produced for registrants 6 times a year providing them with up to date information and positive news stories about the HPC.
- 3.48 Our review indicated that registrants are still able to download the HPCCheck logo, together with examples of how to use the logo in their advertising, stationery and business cards. The use of the logo enables them to differentiate themselves from unregulated individuals and increases public awareness of the registration process. We also noted that some (but not all) registrants are using the logo to promote their services. Many practitioners still prefer to refer to their relevant professional body in their publicity.
- 3.49 In our view this will continue to be the case until the HPC, its functions and its logo become more embedded in the public consciousness thereby enhancing the value of registration to practitioners. Nevertheless, the development of a clearly identifiable logo supported by an easy to use web-based checking mechanism should ensure that this position improves over time.
- 3.50 The HPC seeks to maintain a regular presence at the conferences and events for the regulated professional bodies and provides articles and promotional material for their publications. In particular, we noted that the Director of Communications reported to the May 2007 meeting of the Communications Committee that several talks across the UK had been undertaken with groups of students and registrants including University College London (speech and language therapists), University of Leicester (chiropractors/ podiatrists) and The National Hospital for Neurology and Neurosurgery (registrants).
- 3.51 The HPC also exhibits at up to 6 external conferences each year. This work is led by the Events Manager and aims to increase the understanding of the role of the HPC and its relevance to registrants.
- 3.52 We noted that the HPC planned to exhibit at the following external conferences during 2007/08:
- Primary Care (May 2007);

- Institute of Biomedical Sciences (September 2007);
- NHS Employers (October 2007);
- Health and Wellbeing (March 2008); and
- UK Public Health Association (April 2008).

3.53 Evaluation reports are prepared after each event by the Events Manager and are reviewed by the subsequent meeting of the Communications Committee.

3.54 At the time of review, evaluation reports covering the following events had been considered by the Communications Committee:

- Patient Information Forum (February 2007); and
- Managing long term conditions (March 2007).

3.55 Although we understand that some potentially useful contacts were made at these events, we noted that the evaluation reports for both exhibitions concluded that better opportunities for promoting the HPC's messages could be found elsewhere and the HPC had decided not to exhibit at these events in the future.

3.56 In view of these results, we suggest that management should review the HPC's exhibition programme for 2007/08 once again to confirm that attendance at the specified conferences will result in the outcomes desired by the organisation and will provide best value for money.

3.57 We therefore raised the following recommendation.

Recommendation

R1. Management should reassess what the HPC aims to achieve by exhibiting at the conferences specified in its programme for 2007/08 and review whether these events provide the best opportunities for promoting the organisation.

3.58 Since 2002 the HPC has also run a Listening Event programme. This work is also led by the Events Manager. Listening events are designed to give registrants – and the public – an opportunity to see and hear first-hand how the HPC is progressing, and to provide feedback on how the organisation can improve. Where possible, this feedback is incorporated into HPC strategy and future regulation of health professionals.

3.59 Each meeting consists of a 30 minute presentation on the HPC, followed by a 90 minute question and answer session. Attendees are given the opportunity to put questions and comments to a panel of HPC Council members. In every location a meeting is held from 2-4pm and is then repeated from 6-8pm.

3.60 At the time of our review 2 Listening Events had already taken place in Portsmouth and Folkestone during April 2007. Evaluation reports were prepared by the Events Manager and considered by the May meeting of the Communications Committee.

3.61 We noted that the evaluation reports concluded the following:

- Of 17,768 registrants invited, there were 144 attendees at the events;
- 171 individuals registered their intention to attend before the event took place;
- The feedback was generally positive and feedback form scores averaged at a score of 3 out of 4 where 4 was equivalent to excellent;
- However, the number of individuals in attendance was considered to be disappointing by management and some groups of registrants (e.g. Arts therapists, clinical scientists) did not attend either of the events.

3.62 In view of these results, we suggest that management should review the HPC's Listening events programme for 2007/08 once again to confirm that attendance at the specified events will result in the outcomes desired by the organisation and will provide best value for money.

3.63 We therefore raised the following recommendation.

R2. Management should reassess what the HPC aims to achieve from its Listening event programme and review whether the remaining scheduled events for 2007/08 will deliver the outcomes that the organisation desires.

Responding to the White Paper

3.64 Since the issue of the White Paper "*Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century*", the HPC has needed to consider its impact upon the organisation and to respond accordingly.

3.65 The HPC has therefore developed a Public Affairs Strategy, which sets out how the organisation proposes to approach this important development.

3.66 The strategy sets out a programme of public affairs and related activities to:

- enable HPC to properly manage the policy horizon arising from the White Paper;
- position itself appropriately;
- take full advantage of the opportunities presented; and
- manage any potential threats that may emerge.

- 3.67 Our review of the strategy indicated that it sets out the political and regulatory context, the HPC's broad objectives, the opportunities and threats facing the organisation, key stakeholders, planned activities and timescales.
- 3.68 The strategy considers the White Paper specifically and the wider public affairs agenda of the HPC. In our view, this structured approach meets best practice and should ensure that the HPC is well placed to address these matters during 2007/08.
- 3.69 At the time of our review the strategy was in draft form, although it was due to be finalised imminently. We understand that the probable immediate consequences for the Communications Department are as follows:
- additional communications activities will need to be delivered around the specific proposals put forward in the White Paper; and
 - the Communications Department may need to devote additional time to managing the impact of potential "collateral" damage to the HPC's reputation created by adverse campaigns by those organisations who do not wish to adopt HPC style regulation themselves e.g. the General Medical Council.
- 3.70 Since the details of the White Paper were not known at the time when the HPC's communications strategy and work plan were developed, the potential additional activities noted above were not included these documents and may not therefore be sufficiently resourced.
- 3.71 At this stage, the level of additional inputs is difficult to quantify and much of the work may be able to be absorbed without further costs arising or by deferring other planned activities.
- 3.72 Nevertheless, there is a risk that the budget and resources deployed for the Communications Department may therefore no longer be sufficient to meet HPC's communications requirements. We therefore raised the following recommendation.

Recommendation

R3. The budget and resources deployed towards communications should be reviewed to ensure that these are sufficient to meet the potential additional work load associated with managing the impact of the White Paper.

External crisis management

- 3.73 As we have previously reported following a separate review of this area (June 2007) the HPC has a detailed and well documented business continuity and disaster recovery plan.
- 3.74 Our review indicated that the need to inform all key external stakeholders following a crisis is given due priority within the plan.

- 3.75 Together with the Chief Executive, the Director of Communications is responsible for ensuring that all the HPC's key external stakeholders are contacted including the Department of Health, Privy Council and the media to inform them that the plan has been invoked, the initial location of key functions, key contacts and pessimistic time scales for recovery.
- 3.76 The Communications Manager is also responsible for this matter, ensuring that cover is provided in the event that the Director is unavailable at the time that the crisis arises.
- 3.77 The plan sets out the principal steps that need to be taken in the event of a crisis as follows:

Recovery period timescale	Principal external communications action required
Day 1 of invocation of the plan Week 1	A press release is to be sent to a specified distribution list of all key external stakeholders and article placed on HPC website home page. The press release format is saved in the Crisis Management file that is stored in the communications drive. Also saved is the distribution list for the press release.
Weeks 2 to 5	Further press releases and web site updates are to be provided to keep stakeholders informed.
Weeks 6 to 10	A mail-out to all registrants is to be completed to registrants regarding the new location of the HPC (if required) – in liaison with PrintUK or an alternative supplier. The website is to be updated to reflect the current situation and to start to rebuild the HPC operational web site. Update contact details are to be provided for the HPC; address, phone numbers, fax etc.

- 3.78 In practice this approach would be supported by telephone discussions and meetings with the key stakeholders during the recovery period, where required. The Communications Department has remote access to the network and would work from home during the recovery period. The Director of Communications would attend the disaster recovery site where necessary to fulfil her responsibilities with regard to the implementation of the plan.

- 3.79 In our previous report on the wider disaster recovery arrangements at the HPC (June 2007), we noted that the recovery actions for some departments had not been tested in accordance with the planned timetable. Although the Communications Department is not scheduled to conduct this testing until November 2007, management need to ensure that this matter is addressed. Since we have already raised a recommendation in relation to all departments in our report on business continuity planning, we have not repeated it in the text of this document.

4 Action Plan

Ref.	Findings	Recommendations	Priority	Management Response <i>Responsible Officer</i>	Due Date
R1	<p>Maintaining the support of registrants</p> <p>Evaluation reports covering 2 events were considered by the May 2007 Communications Committee. We noted that the evaluation reports for both exhibitions concluded that better opportunities for promoting the HPC's messages could be found elsewhere. In view of these results, we suggest that management should review the HPC's exhibition programme for 2007/08 once again to confirm that attendance at the specified conferences will result in the outcomes desired by the organisation and will provide best value for money.</p>	<p>Management should reassess what the HPC aims to achieve by exhibiting at the conferences specified in its programme for 2007/08 and review whether these events provide the best opportunities for promoting the organisation.</p>	Medium	<p>Agreed. The exhibitions programme for 2007/08 will be reconsidered by October 2007.</p> <p><i>Events Manager</i></p>	October 2007

Ref.	Findings	Recommendations	Priority	Management Response <i>Responsible Officer</i>	Due Date
R2	<p>Maintaining the support of registrants</p> <p>At the time of our review 2 Listening Events had already taken place during April 2007. We noted that the evaluation reports for these events concluded that although the feedback was generally positive the number of individuals in attendance was considered to be disappointing and some groups of registrants did not attend either of the events. In view of these results, we suggest that management should review the HPC's Listening Events programme for 2007/08 once again to confirm that attendance at the specified events will result in the outcomes desired by the organisation and will provide best value for money.</p>	<p>Management should reassess what the HPC aims to achieve from its Listening event programme and review whether the remaining scheduled events for 2007/08 will deliver the outcomes that the organisation desires.</p>	Medium	<p>Agreed. The Listening events programme for 2007/08 will be reconsidered by October 2007.</p> <p><i>Events Manager</i></p>	October 2007

Ref.	Findings	Recommendations	Priority	Management Response <i>Responsible Officer</i>	Due Date
<p>R3</p> <p>Since the details of the White Paper were not known at the time when the HPC's communications strategy and work plan were developed, the potential additional activities noted above were not included these documents and may not therefore be sufficiently resourced. At this stage, the level of additional inputs is difficult to quantify and much of the work may be able to be absorbed without further costs arising or by deferring other planned activities. Nevertheless, there is a risk that the budget and resources deployed for the Communications Department may therefore no longer be sufficient to meet HPC's communications requirements.</p>	<p>The budget and resources deployed towards communications should be reviewed to ensure that these are sufficient to meet the potential additional work load associated with managing the impact of the White Paper.</p>	<p>Medium</p>	<p>Agreed. The budget will be reviewed by October 2007 to confirm that sufficient resources are available to address any emerging issues in relation to the White Paper.</p> <p><i>Director of Communications</i></p>	<p>October 2007</p>	

5 Assurance Definitions

Assurance Level	Definition
Sound	Satisfactory design of internal control that addresses risk and meets best practice and is operating as intended.
Satisfactory	Satisfactory design of internal control that addresses the main risks but falls short of best practice and is operating as intended.
Satisfactory in Most Respects	Generally satisfactory design of internal control that addresses the main risks and is operating as intended but either has control weaknesses or is not operating fully in some significant respect.
Satisfactory Except For.....	Satisfactory design of internal control that addresses the main risks and is operating as intended in most respects but with a major failure in design or operation in the specified area.
Inadequate	Major flaws in design of internal control or significant non operation of controls that leaves significant exposure to risk.