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## Standards of Conduct Performance and Ethics and Social Media Guidance Review

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### Executive Summary

This paper summarises proposed revisions to the standards of conduct, performance and ethics (SCPEs) and social media guidance. The paper seeks the Council's approval to launch a public consultation on these changes.

The review of the SCPEs began in May 2022. The purpose of this review is three-fold:

- a) To make any necessary updates to the current Standards that reflect changes to practice.
- b) To ensure that the current Standards are fit for practice, particularly taking accessibility and relevance into account.
- c) To gain insight into how we can better communicate the Standards and promote them to ensure they are fully understood by registrants.

As well as the SCPE themselves, we have also reviewed our guidance on social media. As part of the review, we have undertaken pre-consultation stakeholder engagement including external and internal workshops and an online survey for external stakeholders. The Education and Training Committee (ETC), Council and the EDI Forum have also been engaged throughout the review period.

We have been collaborating with Greener NHS and the office of the Chief Allied Health Professions Officer and the office of the Chief Sustainability Officer to ascertain ways that sustainability could be reflected in the SCPEs without exceeding our remit.

This paper contains the following appendices:

- A. [Consultation document on the Standards of conduct performance and ethics and the guidance on social media](#)
- B. [Comparison commentary on revised Standards of conduct, performance and ethics](#)
- C. [Revised Standards of conduct, performance and ethics](#)
- D. [Comparison commentary on revised guidance on social media](#)
- E. [Revised guidance on social media](#)
- F. [EIA Standards of conduct performance and ethics](#)
- G. [EIA Guidance on social media](#)

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Previous consideration    The review of the SCPE and social media guidance was discussed with the ETC at its meetings of March 2023 and September 2022.

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Decision	<p>Council are asked for approval to:</p> <ul style="list-style-type: none"> <li>a) Launch a consultation on the Standards and social media guidance for 12 weeks from 27 March 2023 until 16 June 2023.</li> <li>b) Arrange consultation workshops exploring six themes from the review.</li> <li>c) Set up two post-consultation working groups for the revised Standards.</li> </ul>
Next steps	<p>Following Council approval, the consultation will launch on 27 March 2023 and run for 12 weeks until 16 June 2023. We will run a series of workshops during the consultation period.</p> <p>In the post consultation period two working groups will discuss the accessibility of the SCPE by considering and providing feedback on how the revised standards may impact people because of the protected characteristics that they hold and by helping us to identify what explanatory materials will be needed to ensure the standards are accessible.</p> <p>We will begin reviewing the remaining guidance and online materials that support the SCPE, including on safeguarding and duty of candour, from September 2023 onwards.</p>
Strategic priority	<p>Strategic priority 2: enable our professions to meet our standards so they can adapt to changes in health and care practice delivery, preventing harm to service users.</p> <p>Strategic priority 4: we regulate, take and communicate decisions which are informed by a deep understanding of the environment within which our registrants, employers and education providers operate.</p>
Financial and resource implications	<p>This work is being carried out by the Policy and Standards team within existing resources and does not require further resource or financial commitment.</p>
EDI impact	<p>The Standards of conduct, performance and ethics will impact HCPC processes and our stakeholders. Included in this paper is a detailed EIA that discusses the possible impact of the proposed changes to any person with protected characteristics.</p>
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## Standards of Conduct Performance and Ethics and Social Media Guidance Review

### 1. Summary

- 1.1 We have drafted revised Standards of conduct performance and ethics (see [Appendix C](#)) and guidance on social media (see [Appendix E](#)). These revisions have been made based on evidence gathered from desk research on health and care practice and feedback received during pre-consultation stakeholder engagement.

#### *Themes for review*

- 1.2 The revisions fall under five key themes:-

1. equality diversity and inclusion;
2. communication with colleagues, service users and carers;
3. duty of candour;
4. upskilling and training responsibilities; and
5. managing existing health conditions and disabilities in the workplace.

- 1.3 An additional theme, sustainability in health and care, is discussed in the consultation to explore future revision to the Standards.

#### *Legal review*

- 1.4 We undertook a pre-consultation legal review of the Standards and the guidance on social media to better ensure that the proposed revised Standards and guidance are legally sound before consultation with the public (this approach will also save time and redrafting during the post-consultation period). We have integrated several changes in light of the legal advice.
- 1.5 In our original draft of the revised Standards, we had suggested adding a requirement that registrants notify us of cautions from the police, action taken against them, or restrictions placed on their practice within one-month. We have not integrated this change following legal advice that the reasons why registrants may fail to notify us will still arise, regardless of whether there is a duty to report in one month or as soon as possible. The legal advice also suggested that introducing a specific time limit could create a public protection risk as registrants may delay reporting which may subsequently lead to a delay in fitness to practise proceedings being taken forward. Instead, of incorporating a time limit into the consultation, we could look to develop supporting guidance/materials to clarify what we expect of registrants when applying this standard.
- 1.6 We also received advice that the word ‘appropriately’ used in our Standard 2 (Communicate appropriately and effectively) is subjective and uncertain. Whilst

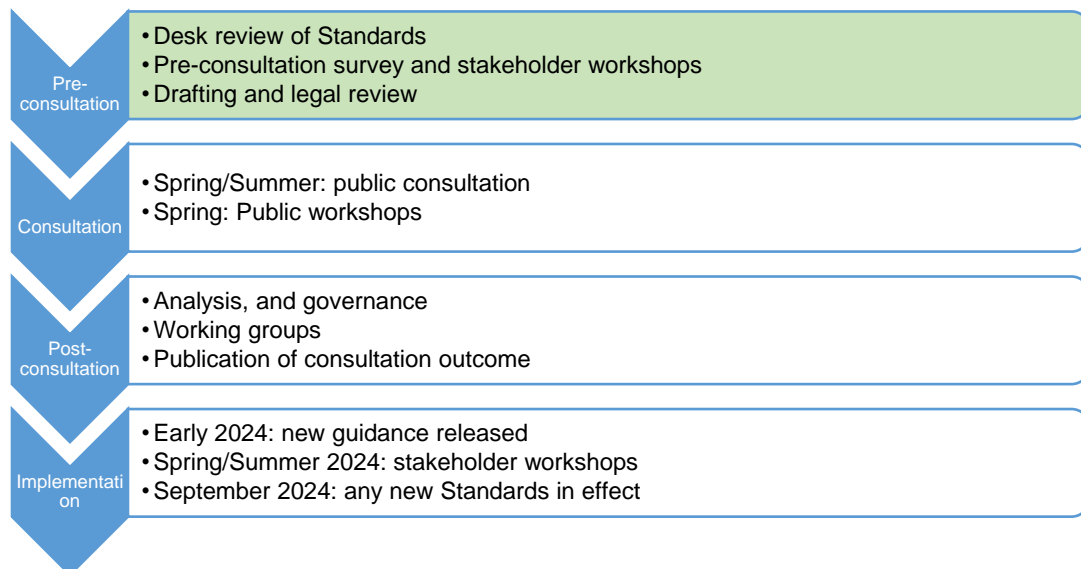
we have removed “appropriately” in the detail of the revised Standard - and instead use the word “responsibly” - we have retained it in the title of Standard 2. We have reviewed other regulators standards against ours and found that it is commonly used – for example, throughout the NMC Code. Furthermore, this was not an area raised by participants of our pre-consultation. We intend that by keeping it in the revised Standards we can test it with our stakeholders during the consultation.

### Engagement

- 1.7 Our pre-consultation engagement – workshops and online survey – have ensured that the proposed revised Standards and guidance on social media were well informed. We engaged with a range of external stakeholders including professional bodies, trade unions, Greener NHS and the Office of the Chief Sustainability Officer and the Office of the Chief Allied Health Professions Officer.
- 1.8 Our work with Greener NHS, the Office of the Chief Allied Health Professions Officer and the Office of the Chief Sustainability Officer will ensure careful consideration of incorporating sustainability within the Standards (para. 37, page 10).
- 1.9 We have taken an active approach to assessing the equality, diversity and inclusion (EDI) impacts of the Standards. We have engaged with the EDI Forum throughout the pre-consultation phase, to test ideas and our approach to the review. We will also set up two working groups in our post-consultation period (para. 38-41, page. 10).
- 1.10 The consultation on the Standards and social media guidance will be supported by a series of workshops. Each workshop will focus on one of the six identified themes. They will take place in April 2023 to promote quality engagement with the Standards.

### Timescale

1.11 The below timeline details the activities of the review since May 2022 and up to September 2024.



- 1.12 We intend to publish the updated Standards in September 2023. A year-long implementation period will follow and bring the Standards into effect in September 2024. We will work with other departments to coordinate implementation.
- 1.13 This paper provides a summary of the revised Standards and guidance, the planned consultation activities and the post-consultation activities. We have provided further information in the following appendixes:
- H. Consultation on the Standards of conduct performance and ethics and the guidance on social media
  - I. Commentary on revised Standards of conduct, performance and ethics
  - J. Revised Standards of conduct, performance and ethics
  - K. Commentary on revised guidance on social media
  - L. Revised guidance on social media
  - M. Standards of conduct performance and ethics EIA
  - N. Guidance on social media EIA

## **2. Revised Standards and guidance**

### *Equality diversity and inclusion*

- 2.1 We have made proposed changes to the Standards that promote an active approach to ensuring EDI in registrants' practice. This is in line with changes to the Standards of Proficiency, which make the implementation of standards more active for registrants. This means that the standards support registrants in being autonomous and caring professionals.
- 2.2 In the changes that we have proposed, registrants are asked to take action to ensure they are meeting equality, diversity and inclusion commitments. This action can include but is not limited to reading and education on matters relating to EDI, completing training on EDI, and creating EDI action plans for their practice.
- 2.3 We have also promoted EDI in the proposed changes to our social media and communication Standards. These state that registrants must be respectful and considerate when communicating.
- 2.4 In the proposed changes to our social media guidance, we have made it clear that registrants should think about the impact of their posts before they share them. These changes better reflect the limits of HCPC interest in social media posts on a personal account and protects people's access to services against discrimination.

### *Interacting with colleagues, service users and carers*

- 2.5 We have proposed changes to the Standards that better set out registrant responsibilities concerning professional boundaries and how registrants interact with colleagues, service users and carers. These changes are in line with feedback received during our pre-consultation engagement.

- 2.6 In the revised Standards we have set out actions that registrants must take to maintain boundaries. For example, we have set out how we expect them to manage their personal relationships –relationships with spouses, family, friends or housemates – in a professional setting.
- 2.7 Many participants throughout our workshops and survey responses were concerned about the way that colleagues treat each other. We have expanded our Standards on communication to make it clear that registrants must use all forms of communication appropriately and responsibly when communicating with service users and colleagues.
- 2.8 We have also proposed changes that ascertain how registrants must raise concerns if their colleagues have experienced bullying, harassment and discrimination. This promotes a supportive and inclusive environment that avoids disrespect, bullying or harassment between colleagues.

#### *Duty of candour*

- 2.9 Our proposed changes set out a process for registrants to follow when things go wrong. This better aligns with our guidance and gives registrants clear steps to follow in a time that is often challenging and stressful.
- 2.10 The changes also highlight the centrality of apologising when things go wrong. Setting out the need to apologise in a separate standard recognises apologising as a professional duty. This better correlates with the messaging in our guidance.

#### *Upskilling and training responsibilities*

- 2.11 During the covid-19 pandemic we witnessed many registrants fulfilling new roles outside of their original scope of practice. We received many queries from registrants changing their practice in this way. The changes we have proposed ensure that registrants understand the actions they can take to widen their scope of practice.
- 2.12 We continue to receive questions from registrants regarding their scope of practice. Following review of these queries, we have added reference to “safely and effectively” within our Standards on scope of practice. This will ensure that registrants better understand how and why their scope of practice is limited.

#### *Managing existing health conditions and disabilities in the workplace*

- 2.13 The changes that we have proposed make it clear that registrants’ responsibilities are to actively assess the impact their health has on their practice. They are intended to encourage registrants to take an active role in maintaining their registration.
- 2.14 These proposed changes also set out what a registrant must do if their physical or mental health detrimentally impacts their practice. This provides a clearer link between our Standards on health declarations and our fitness to practice procedures. These proposals support disabled registrants in their experience of registering with us.

## *Sustainability in health and care*

- 2.15 We have been collaborating with Greener NHS and the Office of the Chief Allied Health Professions Officer and the Office of the Chief Sustainability Officer to ascertain ways that sustainability could be introduced as a Standard without overextending our remit. This follows The Health and Care Act 2022, which sets out new government commitments towards considering climate change when making decisions in health and care.
- 2.16 Under the Act, the NHS is required to be compliant with the Climate Change Act 2008 and the Environment Act 2021. This significantly extends the government's responsibility towards ensuring sustainability in health and care practice.
- 2.17 Unlike in other areas of the health and care sector, there have been no amendments relating to sustainability made to the legislation that underpins HCPC Rules – the Health Professions Order 2001. It is therefore important to exercise caution throughout the review and drafting of any new Standards to ensure that we do not overextend our remit.
- 2.18 Exploring sustainability within the Standards relates to HCPC's strategic objective 5.

## *Other considerations*

- 2.19 We received feedback from a minority of respondents to our online survey stating that they were concerned about the protection of gender critical views and their belief that sex matters. We have not made changes to the Standards in relation to this feedback. The proposed Standards prioritise ensuring that all people have access to the health and care that they require no matter the views and opinions of their health and care practitioner.
- 2.20 Throughout our pre-consultation workshops and online survey, we heard concerns about how service users treat health and care practitioners. Some participants asked that the Standards better protect health and care practitioners from abuse by service users. We have not made revisions in this area since it falls outside the scope of our remit as a regulator. Instead, during our review of the guidance that supports the Standards, we will integrate material that supports registrants in situations where they have been harmed or have witnessed harm to another health and care practitioner.

## **3. Proposed consultation**

- 3.1 We propose that the consultation document include a draft of the new Standards, and a commentary document on the revised Standards. We also propose that we include a set of questions to guide responses.
- 3.2 These were previously approved by Council in September 2022 (Council paper 28 September 2022). These have been further amended following advice from ELT in March 2023. The questions that will be included in the consultation to guide responses are below:

- a. Do the Standards make it clear what the appropriate boundaries are between a registrant and service users or carers?
- b. Do the Standards support registrants in maintaining their own well-being?
- c. Do the Standards ensure that registrants maintain a practice that promotes equal, fair, and inclusive treatment?
- d. Are the Standards clear about what registrants must do when things go wrong?
- e. Is the language used in the Standards accessible and clear?
- f. Does the structure of the Standards promote understanding and digestibility?
- g. Are the Standards clear about the appropriate use of social media and how this relates to registrant practice?
- h. Should improving sustainability in health and care practice be a part of these Standards?
  - i. If so, what ought to be included in the Standards?
- i. Do you consider there are any aspects of our proposals that could result in equality and diversity implications for groups or individuals based on one or more of the following protected characteristics – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation – as defined by the Equality Act 2010?
- j. Do you have additional comments about the Standards of conduct performance and ethics?

3.3 To facilitate discussion of social media in the consultation, we propose that a full draft of the updated social media guidance be included in the consultation alongside a commentary document. We will also include the below consultation questions:

- a. Do the proposed updates to the HCPC social media guidance provide sufficient advice regarding the application of Standard 2.7 in practice?
- b. Do the proposed updates make it clear the circumstances that could lead to a registrant's social media posts to be considered by HCPC?
- c. Do the proposed updates make clear the circumstances in which a registrant's social media posts may call into question their fitness to practice?
- d. Do the proposed updates make it clear how a registrant must use social media in a way that protects a service user's privacy?



- e. Do the proposed updates make it clear how a registrant must use social media in a way that does not lead to the unfair treatment of service users or their carers?
- f. Do the proposed updates make it clear that HCPC supports a registrant's right to freedom of expression?
- g. Do the proposed updates clearly distinguish between the use of social media in a professional and non-professional capacity?

#### **4. Consultation and post consultation engagement**

- 4.1 To support the consultation period, we will host six workshops in April 2023. We will work with our Strategic Relationships Lead to coordinate these workshops and our EDI Lead to ensure that they are carried out keeping in mind our EDI strategic objectives. These workshops will explore each key theme of the consultation with a range of different stakeholders from the following groups:
- Professional bodies
  - Education Providers
  - Trade Unions
  - Employers
  - EDI Forum
  - Service users and service user representatives
- 4.2 The aim of these workshops will be to encourage discussion of each key theme and communication of our rationale for the proposed changes that we have made to the Standards and guidance on social media.
- 4.3 We are also working with our Strategic Relationships Lead to develop a plan for targeted engagement with service users.
- 4.4 Finally, following discussions with the Office of the Chief Sustainability Officer and the Office of the Chief Allied Health Professions Officer, we are working with them to produce a report to suggest how the HCPC could incorporate environmental sustainability within the Standards. We will use this report as part of the consultation process and include it within our consultation analysis to contribute towards our final draft of the Standards.
- 4.5 Following the consultation, we will create two working groups to facilitate our commitment to EDI through the Standards:
- Pre-launch EDI assessment group
  - Explanatory materials design group
- 4.6 The purpose of the pre-launch EDI assessment group will be to read and assess the Standards before their publication. Members will be asked to consider and provide feedback on how the revised Standards may impact people because of the protected characteristics that they hold. The group will be made up of ten members who may be impacted by the revised Standards because of their race, nationality, age or disability.
- 4.7 The purpose of the explanatory materials design group will be to identify what explanatory materials will be needed to ensure the Standards are accessible.

The group will advise on the structure and topics of explanatory materials and support the policy team in their drafting of the explanatory materials.

- 4.8 Members of the explanatory materials design group will also be asked to consider and advise what further guidance will be necessary to ensure understanding and appropriate implementation of the Standards. The group will be made up of ten members who may be impacted by the revised Standards because of their race, nationality, age or disability.

## **Appendix A: Consultation on the Revised Standards of conduct performance and ethics and guidance on social media**

### **Consultation on revised standards of conduct, performance and ethics and guidance on social media**

Foreword.....	<b>12</b>
Introduction .....	<b>13</b>
The HCPC .....	<b>13</b>
This consultation .....	<b>14</b>
The Standards of conduct, performance and ethics review ....	<b>14</b>
About the Standards of conduct, performance and ethics ..	<b>14</b>
About the revised Standards .....	<b>15</b>
Consultation questions – Standards of conduct performance and ethics.....	<b>16</b>
The review of the HCPC guidance on social media.....	<b>17</b>
About the HCPC guidance on social media .....	<b>17</b>
The revised guidance on social media .....	<b>18</b>
Consultation questions – HCPC guidance on social media .....	<b>19</b>
How to respond to the consultation.....	<b>20</b>

## Foreword

The HCPC's Standards of conduct, performance and ethics, and the guidance that accompanies them, are integral to ensuring high quality professional practice in the 15 professions we regulate. The Standards require periodic review, with the most recent review completed in 2016. In 2022, we began the Standards' next periodic review.

This consultation provides information on the HCPC Standards of conduct, performance and ethics and the guidance on social media that sits alongside them. It discusses the key themes that we have heard throughout our discussions with registrants, service users, trade unions, professional bodies, employers, other regulatory bodies and our HCPC colleagues.

Drawing on these discussions, we propose for your consideration, an updated set of Standards of conduct, performance and ethics. Following consultation, these Standards will be accompanied by more detailed explanatory materials that aid understanding. We also propose updated social media guidance that clearly establishes how the HCPC Standard on social media can be applied in practice and the way that the Standard protects both registrants' and service users' rights.

The purpose of this review is:

1. To make any necessary updates to the current Standards that reflect changes to practice.
2. To ensure that the current Standards are fit for practice, particularly taking accessibility and relevance into account.
3. To gain insight into how we can better communicate the Standards and promote them to ensure they are fully understood by registrants.
4. To make any necessary updates to our guidance on social media to keep pace with the developments in the use of social media over the past few years.

We are grateful to the external and internal stakeholders that have participated in the review so far and provided the valuable insights that have informed the changes to the Standards and guidance. The pre-consultation workshops and online survey have been integral to our understanding of how the Standards and guidance are used in practice and how they can be improved.

This consultation lays out the results of our pre-consultation engagement and we look forward to your responses and to further engaging with your views on the updated Standards and social media guidance. The implementation of these Standards and the guidance will greatly serve registrants' ability to provide a safe and effective service to service users and enhance our ability to protect the public.

This review fits into a wider review of our Standards, which began with the Standards of Proficiency in 2019. Following the review of the Standards of conduct, performance and ethics we will review the guidance and online materials that support them. We will also commence a review of our Standards of Education and Training early next year.

## **Introduction**

### **The HCPC**

The HCPC's statutory role is to protect the public by regulating healthcare professionals in the UK. We promote high quality professional practice, regulating over 300,000 registrants across 15 different professions by:

- setting standards for professionals' education and training and practice;
- approving education programmes which professionals must complete to register with us;
- keeping a register of professionals, known as 'registrants', who meet our standards;
- acting if professionals on our Register do not meet our standards;
- and stopping unregistered practitioners from using protected professional titles

### **This consultation**

This consultation seeks the views of our stakeholders on draft revised Standards of conduct, performance and ethics ('the Standards') and the social media guidance that accompanies it. The Standards are an essential part of our regulatory framework and set out how we expect our registrants to behave.

They are important to all our stakeholders, from registrants and service users to education providers and trade unions and they are also essential to how the HCPC carries out its work as a regulator.

Regular review of the Standards is essential so that we can ensure that they are relevant to current practice, that they meet our regulatory goals, including the ambitions of our Corporate Strategy and EDI Strategy, and that they are clearly understood by those who use them. The guidance on social media provides information on how to implement Standard 2.7 on social media in practice.

In this document, you can find out information about the Standards and guidance, the changes we are proposing and how to respond to this consultation. The draft standards for consultation are published in this document and on our website.

The consultation runs for 12 weeks from Monday 27 March – Friday 16 June 2023.

## **About the Standards of conduct, performance and ethics**

The Standards of conduct, performance and ethics are essential Standards that form part of our regulatory framework and set out the standards our registrants must meet.

The Standards are important because they:

- set out, in general terms, how we expect our registrants to behave.
- outline what the public should expect from their health and care professional.
- help us to make decisions about the character of professionals who apply to our Register.
- are used if someone raises a concern about a registrant's practice.
- when things go wrong, they help us to decide whether it is necessary to act.

Throughout the review we have retained the overall structure of the Standards and updated the content of their subheadings.

The current Standards of conduct performance and ethics can be found at the HCPC website: [Standards of conduct, performance and ethics | \(hcpc-uk.org\)](https://www.hcpc-uk.org/standards-of-conduct-performance-and-ethics).

## **The Standards of conduct, performance and ethics review**

The Standards require periodic review, with the most recent review completed in 2016. In 2022, we began the Standards' next periodic review. We have been engaging with our internal and external stakeholders since July 2022. Throughout the review we have sought to understand:

- a. How the Standards are used by our stakeholders
- b. What changes to health and care practice ought to be reflected in the Standards
- c. Any concerns that our stakeholders have regarding the Standards
- d. Challenges that the health and care sector is facing and how these impact the Standards and their application.

As part of the review, we conducted desk research, hosted workshops, and conducted an online survey. The central themes throughout our pre-consultation engagement were challenging discrimination, maintaining appropriate boundaries, social media and scope of practice.

During our pre-consultation research we reviewed the Standards in relation to changes in the health and care sector since the last review in 2016. We also discussed the Standards with other health and care regulators to understand their experiences and changes they were making to their ethics and behavioural standards.

The key themes that arose from this research included:

- The importance of equality, diversity and inclusion in health and care and challenging discrimination in health and care settings
- Maintaining professional boundaries and safeguarding service users and carers
- The use of social media and social networking
- Sustainability in health and care settings

We also hosted pre-consultation workshops with 7 stakeholder groups and a conducted a public online survey (see appendix 1 for more information).

The key themes evident throughout our pre-consultation workshops were:

- Accessibility of the Standards and the need for additional materials that accompany them
- The subtle balance between simple and inclusive language and nuanced culturally inclusive language
- The growing variety of social networking applications including WhatsApp and LinkedIn and the impact that could have on privacy and confidentiality.
- How registrants apply equality, diversity and inclusion commitments, particularly appropriate ways to challenge discrimination.
- Alignment with other HCPC Standards such as the Standards of Proficiency as well as with the Standards of other regulators.

The key themes from our pre-consultation survey were:

- Registrant well-being and mental health
- Appropriate conduct between registrants/colleagues
- Guidance and support for whistle-blowers
- Tackling misinformation on social media

These themes were prevalent throughout our stakeholder engagement exercises and as a result, have been reflected in the changes that we are proposing to the Standards. We are appreciative of the time and energy that all our stakeholders dedicated to engaging with us on this topic.

### **About the revised Standards**

The changes that we have made to the Standards are reflective of the themes discussed throughout our pre-consultation engagement with stakeholders. They have also been guided by internal research regarding the current Standards and changes in the health and care sector. To ensure that these changes are fully understood, we have produced a commentary document that lists each change and discusses the rationale for each change, you can find it here [\[add hyperlink when published\]](#). You can also download a full version of the revised Standards here [\[add hyperlink when published\]](#). Below, you will find a set of questions to guide your response to the consultation.

### **Consultation questions – Standards of conduct performance and ethics**

1. Do the revised Standards make it clear what the appropriate boundaries are between a registrant and service users or carers?
2. Do the revised Standards support registrants in maintaining their own well-being?
3. Do the revised Standards ensure that registrants maintain a practice that promotes equal, fair, and inclusive treatment?
4. Are the revised Standards clear about what registrants must do when things go wrong?
5. Is the language used in the revised Standards accessible and clear?
6. Does the structure of the revised Standards promote understanding and digestibility?
7. Are the revised Standards clear about the appropriate use of social media and how this relates to registrant practice?

8. Should improving sustainability in health and care practice be a part of the Standards?
  - a. If so, what ought to be included in the Standard?
9. Do you consider there are any aspects of our proposals that could result in equality and diversity implications for groups or individuals based on one or more of the following protected characteristics – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation – as defined by the Equality Act 2010?
10. Do you have additional comments about any of the proposed changes to the Standards, or regarding the Standards of conduct performance and ethics in general?



## **About the HCPC guidance on social media**

The HCPC guidance on social media sets out information about how we expect our registrants to behave on social media and networking platforms. It is a valuable resource to registrants, as well as other HCPC stakeholders such as trade unions and service users. It helps them to understand what 'appropriate and responsible' social media use looks like in practice and how to operationalise our Standards.

The current guidance sets out five key areas for stakeholders to understand about appropriate and responsible social media use:

- Respect confidentiality
- Communicate appropriately
- Be honest and trustworthy
- Maintain appropriate boundaries
- Benefits of social media

It provides examples on how to use social media appropriately. It does not address all scenarios a registrant may experience when using social media. Instead, we aim to provide enough examples and additional information for registrants to use their judgement to determine the appropriate action throughout their practice and use of social media.

The guidance is also accompanied by additional online resources such as case studies. Throughout our pre-consultation stakeholder activities, we heard from a range of stakeholders – particularly registrants – that these case studies are especially valuable tools in building a better understanding of the application of the Standards.

## **The review of the HCPC guidance on social media**

HCPC guidance requires periodic review to ensure that it is up to date and in line with current Standards. We felt it was particularly important to review our social media guidance alongside our Standards to reflect any changes we make to the Standards and to capture changes to how health and care professionals use social media.

Social media has greatly expanded in recent years to include a wider variety of platforms – for example the rise of media sharing platforms such as Instagram and TikTok and networking platforms such as WhatsApp. Alongside this expansion, there are more health and care professionals using social media, and audiences on social media have grown.

These changes bring new challenges to the forefront. For example, ensuring that registrant rights to freedom of speech are protected when they are using social media platforms. Our social media guidance requires strengthening to ensure that these changes and the new challenges they bring, are appropriately reflected.

Throughout the review we wanted to ensure that we understood:

- How registrant use of social media has changed
- Stakeholder use of the guidance and whether it meets its intended purpose effectively
- Any concerns that HCPC stakeholders have in relation to the use of social media by registrants
- Recent case law and the impact on how registrants ought to use social media

Some of the comments we heard from stakeholders include:

- *“Use of social media and networking needs to reflect the reality of communication – for example WhatsApp groups are not social networks, nor social media – but are also not necessarily private communications. How is this addressed?”*
- *“It is not clear how to use it [social media] outside a work environment and what [registrants] can share without breaching confidentiality.”*
- *“More guidance is needed on Social Media usage, especially in respect of equality diversity and inclusion.”*

We also heard that the guidance is a valuable tool to registrants and other stakeholders such as education providers, trade unions and HCPC colleagues to help them better apply the HCPC Standards to real life scenarios.

### **The revised guidance on social media**

The proposed revisions to the guidance on social media are reflective of the feedback we received from stakeholders during our pre-consultation engagement. The key themes evident within the changes are maintaining boundaries, communicating responsibly, challenging discrimination and tackling misinformation. The proposed changes also reflect the changes that we have made to the Standards.

We have retained the original purpose of the guidance – to explain how registrants can use social media in a way that meets HCPC Standards. It is focused on putting our proposed new Standards into practice. Specifically:

2.7 You must use media sharing networks appropriately and responsibly, ensuring that information shared is accurate and true to your knowledge;

2.8 You must use social networking sites appropriately and responsibly, maintaining professional boundaries and protecting service user/carer privacy.

We have changed the guidance to refer to different kinds of social media including social networks and media sharing sites. This includes updates to the top tips and examples of how to use social media. This better captures the current nature of social media use.

We have also added new references to registrant rights to freely express themselves on social media within the limits of meeting their legal obligations to other social media users, their colleagues, and service users. This ensures that registrants understand when their fitness to practice may be called into question by their social media use.

Other changes we have made include an explanation of the importance of registrants protecting social media users from misinformation. We have provided examples of how registrants can ensure all information they share is – to their knowledge – accurate and true. We have also added examples of the impact on social media audiences when misinformation is spread.

To ensure that these changes are fully understood, we have produced a commentary document that lists each change and discusses the rationale for each change, you can find it here [\[add hyperlink\]](#). You can also download a full version of the revised guidance here [\[add hyperlink\]](#). Below, you will find a set of questions to guide your response to the consultation.

## **Consultation questions – HCPC guidance on social media**

1. Do the proposed updates to the HCPC social media guidance provide sufficient advice regarding the application of Standard 2.7 in practice?
2. Do the proposed updates make it clear the circumstances that could lead to a registrant's social media posts to be considered by HCPC?
3. Do the proposed updates make clear the circumstances in which a registrant's social media posts may call into question their fitness to practice?
4. Do the proposed updates make it clear how a registrant must use social media in a way that protects a service user's privacy?
5. Do the proposed updates make it clear how a registrant must use social media in a way that protects a service user's protected characteristics?
6. Do the proposed updates make it clear how a registrant must use social media in a way that does not lead to the unfair treatment of service users or their carers?
7. Do the proposed updates make it clear that HCPC supports a registrant's right to freedom of expression?
8. Do the proposed updates clearly distinguish between the use of social media in a professional and non-professional capacity?

## How to respond to the consultation

Whether you are a registrant, service user or are responding on behalf of an organisation such as a professional body, employer or trade union, we welcome your views on the proposed Standards. Your feedback will be used to develop the Standards before their final publication in September 2023.

To respond to this consultation and find out more information please visit our website: [\[add website\]](#). We encourage responses from all interested parties.

This consultation will close at **23:59 on Friday 16 June 2023**.

If you are unable to respond using the online platform, or would like a version in Welsh or in an alternative format, please email [consultation@hcpc-uk.org](mailto:consultation@hcpc-uk.org) or write to:

Health and Care Professions Council,  
Park House, 184-186 Kennington Park Road  
London, SE11 4BU

## Appendix 1

The external stakeholder groups that we engaged with include:

- a. Professional bodies
- b. Education Providers
- c. Trade Unions
- d. NHS Employers
- e. EDI Forum
- f. Service users and Patient Interest Groups
- g. Other health regulators

Our pre-consultation engagement activities were:

- a. Presentation to professional bodies quarterly meeting in June 2022: this outlined the approach for the review and asked professional bodies for any early views. Responses were positive and encouraging around the review taking place and they were eager for further engagement.
- b. A workshop discussion at the EDI Forum in July 2022: the approach to the review was discussed with attendees and through polling and breakout groups they were encouraged to give their views of the current Standards. Engagement was positive and provided valuable data for inclusion in our analysis of the Standards.
- c. Pre-consultation workshops with each stakeholder group took place from 1 September 2022 until 7 September 2022. These workshops supported understanding of the Standards and promoted quality engagement with proposed areas of change. They were held online and attended by 109 people across a range of stakeholder groups.
- d. A pre-consultation online survey for external stakeholders ran from 12 August 2022 until 9 September 2022 and received 146 responses. It gathered information regarding stakeholder understanding of the Standards and provided an opportunity for them to raise any concerns.

## Appendix B: Commentary on the revised Standards of conduct, performance and ethics commentary

The extent of the changes we are proposing to the structure and content of the existing standards would make tracked changes difficult to read. So we have produced this document to provide more information about the differences between the draft standards for consultation and the existing standards. We have identified where the content of the existing standards can be found in the consultation draft. We have also provided a short commentary of the main changes we have made.

Note: In the commentary column, references in brackets are to the current Standards of conduct, performance of ethics.

Existing standard	Draft standard	Commentary
<b>1. Promote and protect the interests of service users and carers</b>		
<p><b>Treat service users and carers with respect</b></p> <p>1.1 You must treat service users and carers as individuals, respecting their privacy and dignity.</p> <p>1.2 You must work in partnership with service users and carers, involving them, where appropriate, in decisions about the care, treatment or other services to be provided.</p> <p>1.3 You must encourage and help service users, where appropriate, to maintain their own health and well-being, and support them so they can make informed decisions.</p>	<p><b>Treat service users and carers with respect</b></p> <p>1.1 You must treat service users and carers as individuals, respecting their privacy and dignity.</p> <p>1.2 You must work in partnership with service users and carers, involving them, where appropriate, in decisions about the care, treatment or other services to be provided.</p> <p>1.3 You must empower and enable service users, where appropriate, to play a part in maintaining their own health and well-being and support them so they can make informed decisions.</p>	<p>We have proposed changes that align with the revised Standards of Proficiency. These changes ensure that the support registrants offer to service users promotes informed decision-making.</p> <p><a href="https://www.hcpc-uk.org">Download the revised standards of proficiency   (hcpc-uk.org)</a></p> <p>It is also in line with using active language throughout the Standards.</p>
<p><b>Make sure you have consent</b></p> <p>1.4 You must make sure that you have consent from service users or other appropriate authority before you provide care, treatment or other services.</p>	<p><b>Make sure you have consent</b></p> <p>1.4 You must make sure that you have valid consent, which is voluntary and informed, from service users who have capacity to make the decision or other appropriate</p>	<p>We have proposed changes to Standard 1.4 to reflect the changes made to the Standards of Proficiency. These changes ensure that registrants understand that for consent to be valid, it must be voluntary and informed, and the person consenting must have the capacity to make the decision.</p>

	authority before you provide care, treatment or other services.	<a href="https://www.hcpc-uk.org">Download the revised standards of proficiency   (hcpc-uk.org)</a>
<p><b>Challenge discrimination</b></p> <p>1.5 You must not discriminate against service users, carers or colleagues by allowing your personal views to affect your professional relationships or the care, treatment or other services that you provide.</p> <p>1.6 You must challenge colleagues if you think that they have discriminated against, or are discriminating against, service users, carers and colleagues.</p>	<p><b>Challenge discrimination</b></p> <p>1.5 You must treat people fairly and be aware of the potential impact that your personal values biases and beliefs may have on the care, treatment or other services that you provide to service users and carers and your interactions with colleagues.</p> <p>1.6 You must take action to ensure that your personal values, biases and beliefs do not lead you to discriminate against service users, carers or colleagues. Your personal values, biases and beliefs must not detrimentally impact the care, treatment or other services that you provide.</p> <p>1.7 You must raise concerns about colleagues if you think that they are treating people unfairly and/or their personal values biases and beliefs have led them to discriminate against service users, carers and/or colleagues or they have detrimentally impacted the care, treatment or other services that they provide. This should be done following the relevant procedures within your practice and maintain the safety of all involved.</p>	<p>We have proposed changes to the language in this Standard 1.6 and 1.7 (Standard 1.5 and 1.6) that is more active and added a standard, Standard 1.5 (new). This is in line with changes to the Standards of Proficiency, which make the implementation of standards more active for registrants. This means that the standards support registrants in being autonomous and caring professionals.</p> <p><a href="https://www.hcpc-uk.org">Active implementation of the standards   (hcpc-uk.org)</a></p> <p>Standard 1.5 retains a simple duty not to discriminate, by including a duty to treat people fairly.</p> <p>The proposed changes to Standard 1.6 (Standard 1.5) ensure that registrants are being asked to take action to ensure they are meeting equality, diversity and inclusion commitments.</p> <p>Changes to Standard 1.7 (Standard 1.6) provides registrants with clearer requirements to raise concerns about colleagues whom they think are discriminating against service users, carers or other colleagues. This is in line with feedback from stakeholders during the pre-consultation period workshops and survey.</p> <p>We have removed the duty for registrants to challenge colleagues. This was following feedback</p>

		<p>during our stakeholder workshops that challenging colleagues could put registrants at risk of harm.</p> <p>We received feedback through our pre-consultation online survey from that a minority of registrants were concerned about the protection of gender critical views and their belief that sex matters. The proposed Standards prioritise ensuring that all people have access to the health and care that they require no matter the views and opinions of their health and care practitioner. Accordingly, we have not made changes to the Standards in relation to the feedback.</p>
<p><b>Maintain appropriate boundaries</b></p> <p>1.7 You must not use your professional relationship to pursue a personal, sexual or emotional relationship with a service user and carer.</p>	<p><b>Maintain appropriate boundaries</b></p> <p>1.8 You must be aware of the potential impact that the position of power and trust you hold as a health and care professional may have on individuals when in social or personal settings.</p> <p>1.9 You must take action to set and maintain appropriate professional boundaries with service users and/or carers and colleagues.</p> <p>1.10 You must use appropriate methods of communication to provide care and other services related to your practice</p> <p>1.11 You must ensure that existing personal relationships do not impact professional decisions.</p>	<p>We have added four new Standards (1.8, 1.9, 1.10 and 1.11) to include more active language regarding maintaining professional boundaries. This will support registrants in being autonomous and caring professionals.</p> <p><a href="https://hpcp.org.uk">Active implementation of the standards   (hpcp.org.uk)</a></p> <p>We have adjusted the language in Standards 1.9, 1.10 (new), 1.11 and 1.12 (Standard 1.7) to provide better clarity regarding maintaining boundaries.</p> <p>The proposed Standard 1.11 (new) makes it clear that registrants must ensure that any personal relationships between colleagues should not influence their professional decisions.</p> <p>In Standard 1.12 (Standard 1.7) we have changed the wording from “use” to “abuse” and added reference to colleagues in Standard 1.12.</p>



	<p>1.12 You must not abuse your position as a health and care practitioner to pursue personal, sexual, emotional or financial relationships with service users and/or carers or colleagues.</p>	<p>These changes are in line with stakeholder feedback received during our pre-consultation workshops and survey that the previous Standard (1.7) did not make clear the boundary between the personal and professional.</p> <p>For example, registrants were unsure how to respond to personal requests from service users. Participants were also unsure of how to manage their personal relationships within a professional setting i.e., where colleagues were spouses. We had also received multiple questions during our #myhpcstandards webinars asking for clarity regarding boundaries between the personal and professional.</p>
<p><b>2. Communicate appropriately and effectively</b></p>		
<p><b>Communicate with service users and carers</b></p> <p>2.1 You must be polite and considerate.</p> <p>2.2 You must listen to service users and carers and take account of their needs and wishes.</p> <p>2.3 You must give service users and carers the information they want or need, in a way they can understand.</p> <p>2.4 You must make sure that, where possible, arrangements are made to meet service users' and carers' language and communication needs.</p>	<p><b>Communicate with service users and carers</b></p> <p>2.1 You must be polite and considerate.</p> <p>2.2 You must listen to service users and carers and take account of their needs and wishes.</p> <p>2.3 You must give service users and carers the information they want or need, in a way they can understand.</p> <p>2.4 You must make sure that all practicable steps are taken to meet service users' and carers' language and communication needs.</p>	<p>We propose to add a new Standard 2.5 to make clear that in all communication with service users and carers, registrants must communicate responsibly.</p> <p>This standard was previously under social media and networking. Following stakeholder requests that we make our standards on social media clearer, we have separated the requirement to use all forms of communication appropriately from social media communications. This makes it clear that registrants must use forms of communication that are not social media responsibly when communicating with service users.</p> <p>We have proposed changes to Standard 2.4 (Standard 2.4) to better reflect statutory principles to</p>

	<p>2.5 You must use all forms of communication responsibly when communicating with service users and their carers.</p>	<p>meet service user's and their carer's communication needs.</p> <p>Throughout our pre-consultation workshops and online survey, we heard concerns about how service users treat health and care professionals. Some participants asked that the Standards better protect health and care professionals from abuse by service users.</p> <p>The HCPC is only empowered to set standards for registrants and not for the public. Abuse from service users is a very serious issue and we know that registrants face difficulties in handling these situations.</p> <p>Our registrants should never have to tolerate abuse and during our review of the guidance that supports the SCPEs, we will integrate material that supports registrants in situations where they have been harmed or have witnessed harm to another health and care practitioner.</p>
<p><b>Work with colleagues</b></p> <p>2.5 You must work in partnership with colleagues, sharing your skills, knowledge and experience where appropriate, for the benefit of service users and carers.</p> <p>2.6 You must share relevant information, where appropriate, with colleagues involved in the care, treatment or other services provided to a service user.</p>	<p><b>Work with colleagues</b></p> <p>2.6 You must work in partnership with colleagues, sharing your skills, knowledge and experience where appropriate, for the benefit of service users and carers.</p> <p>2.7 You must share relevant information, where appropriate, with colleagues involved in the care, treatment or other services provided to a service user.</p>	<p>Many participants throughout our workshops and survey responses were concerned about the way that colleagues treat each other. They asked for clearer standards to avoid disrespect, bullying or harassment between colleagues.</p> <p>In response, we have proposed Standard 2.8 (new) to require more clearly that registrants must interact with their colleagues in a professional, respectful and considerate way.</p>

	<p>2.8 You must treat your colleagues in a professional manner showing them respect and consideration.</p> <p>2.9 You must use all forms of communication with colleagues and other health and care professionals responsibly including media sharing networks and social networking sites.</p>	<p>We have also proposed Standard 2.9 (Standard 2.7). This new standard ascertains to registrants that they must use all forms of communication appropriately and responsibly when communicating with colleagues.</p> <p>This standard was previously under social media and networking. Following stakeholder requests that we ensure our standards on social media are clearer, we have separated the requirement to use all forms of communication responsibly from social media communications. This makes it clear that registrants must use forms of communication, including but not limited to social media, responsibly when communicating with service users.</p>
<p><b>Social media and networking sites</b></p> <p>2.7 You must use all forms of communication appropriately and responsibly, including social media and networking websites.</p>	<p><b>Social media and networking sites</b></p> <p>2.10 You must use media sharing networks and social networking sites responsibly.</p> <p>2.11 You must make reasonable checks to ensure information is accurate, true, does not mislead the public and is in line with your duty to promote public health when sharing information on media sharing networks and social networking sites.</p> <p>2.12 You must use media sharing networks and social networking sites responsibly, maintaining professional boundaries at all times and protecting service user/carer privacy.</p>	<p>Many of our stakeholders throughout our pre-consultation stages referred to social media and the lack of relevance to how social media is used in practice and protection against misinformation.</p> <p>We have proposed changes to Standard 2.10 (Standard 2.7) and proposed new Standards 2.11 and 2.12 to make registrant responsibilities on social media sites and applications clearer.</p> <p>We have referred to media sharing networks and social networking sites to ensure that the range of social media applications and sites is referred to within the Standards.</p> <p>The proposed new Standard 2.11 tackles the increased occurrence of misinformation shared on social media. It ensures that registrants understand</p>

		<p>they have a responsibility to check the accuracy of the information they share.</p> <p>The proposed new Standard 2.12 ensures that registrants responsibilities to maintain professional boundaries and protect service user information on social media is stated clearly.</p>
<p><b>3. Work within the limits of your knowledge and skills</b></p>		
<p><b>Keep within your scope of practice</b></p> <p>3.1 You must keep within your scope of practice by only practising in the areas you have appropriate knowledge, skills and experience for.</p> <p>3.2 You must refer a service user to another practitioner if the care, treatment or other services they need are beyond your scope of practice.</p>	<p><b>Keep within your scope of practice</b></p> <p>3.1 You must only practice in the areas where you have the appropriate knowledge, skills and experience to meet the needs of a service user safely and effectively.</p> <p>3.2 You must undertake additional training to update your knowledge, skills and experience if you wish to widen your scope of practice.</p> <p>3.3 You must refer a service user to an appropriate practitioner if the care, treatment or other services they need are beyond your scope of practice. This person must hold the appropriate knowledge, skills and experience to meet the needs of the service user safely and effectively.</p>	<p>We have proposed changes to Standard 3.1 to add reference to “safely and effectively”. We often receive questions from registrants regarding their scope of practice. The changes we have proposed will ensure that registrants better understand the limits of their scope of practice.</p> <p>We propose to add Standard 3.2 (new) to ensure that registrants understand the actions they can take to widen their scope of practice. Many of the queries we receive from registrants are asking for further guidance on taking on new roles. These changes provide clarity on this and reflect the changing nature of health and care work and the flexibility that many health and care professionals need.</p> <p>The changes that we have proposed to Standard 3.3 (Standard 3.2). These changes follow queries we receive from registrants about who to refer their service user’s to when a service users care or treatment falls outside their scope of practice. The changes make it clear that they must refer to another practitioner whose scope of practice fits the service user’s needs.</p>

<p><b>Maintain and develop your knowledge and skills</b></p> <p>3.3 You must keep your knowledge and skills up to date and relevant to your scope of practice through continuing professional development.</p> <p>3.4 You must keep up to date with and follow the law, our guidance and other requirements relevant to your practice.</p> <p>3.5 You must ask for feedback and use it to improve your practice.</p>	<p><b>Maintain and develop your knowledge and skills</b></p> <p>3.4 You must keep your knowledge and skills up to date and relevant to your scope of practice through continuing professional development.</p> <p>3.5 You must keep up to date with and follow the law, our guidance and other requirements relevant to your practice.</p> <p>3.6 You must ask for feedback and use it to improve your practice.</p>	<p>No changes made.</p>
<p><b>4. Delegate appropriately</b></p>		
<p><b>Delegation, oversight and support</b></p> <p>4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.</p> <p>4.2 You must continue to provide appropriate supervision and support to those you delegate work to.</p>	<p><b>Delegation, oversight and support</b></p> <p>4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.</p> <p>4.2 You must continue to provide appropriate supervision and support to those you delegate work to.</p>	<p>No changes made.</p>
<p><b>5. Respect Confidentiality</b></p>		
<p><b>Using information</b></p> <p>5.1 You must treat information about service users as confidential.</p>	<p><b>Using information</b></p> <p>5.1 You must treat information about service users as confidential.</p>	<p>No changes made</p>
<p><b>Disclosing information</b></p> <p>5.2 You must only disclose confidential information if:</p>	<p><b>Disclosing information</b></p> <p>5.2 You must only disclose confidential information if:</p>	<p>No changes made</p>

<ul style="list-style-type: none"> <li>• you have permission;</li> <li>• the law allows this;</li> <li>• it is in the service user's best interests; or</li> <li>• it is in the public interest, such as if it is necessary to protect public safety or prevent harm to other people.</li> </ul>	<ul style="list-style-type: none"> <li>• you have permission;</li> <li>• the law allows this;</li> <li>• it is in the service user's best interests; or</li> <li>• it is in the public interest, such as if it is necessary to protect public safety or prevent harm to other people.</li> </ul>	
<b>6. Manage risk</b>		
<p><b>Identify and minimise risk</b></p> <p>6.1 You must take all reasonable steps to reduce the risk of harm to service users, carers and colleagues as far as possible.</p> <p>6.2 You must not do anything, or allow someone else to do anything, which could put the health or safety of a service user, carer or colleague at unacceptable risk.</p>	<p><b>Identify and minimise risk</b></p> <p>6.1 You must take all reasonable steps to reduce the risk of harm to service users, carers and colleagues as far as possible.</p> <p>6.2 You must not do anything, or allow someone else to do anything, which could put the health or safety of a service user, carer or colleague at unacceptable risk.</p>	No changes made.
<p><b>Manage your health</b></p> <p>6.3 You must make changes to how you practise, or stop practising, if your physical or mental health may affect your performance or judgement or put others at risk for any other reason.</p>	<p><b>Manage your health</b></p> <p>6.3 You must take responsibility for assessing whether changes to your physical and/or mental health will detrimentally impact your ability to practice safely and effectively.</p> <p>6.4 You must adjust your practice if your physical and/or mental health will detrimentally impact your ability to practice safely and effectively. These adjustments must promote safe and effective practice. Where it is not possible to make these adjustments within your scope of practice, you must stop practicing.</p>	<p>We have received feedback from some of our registrants with a disability that this Standard can cause delays to their registration and thereby create distressing situations. The changes we propose address this issue and make the link between this standard and our fitness to practice procedures clearer.</p> <p>The proposed changes to Standard 6.3 (Standard 6.3) make it clear that registrant's responsibilities are to actively assess the impact their health has on their practice.</p> <p>The proposed Standard 6.4 (new) lays out what a registrant must do if their physical or mental health detrimentally impacts their practice. It specifically</p>

		makes clear that they must stop practicing <i>only</i> if adjustments to make their practice safe and effective are not possible. The changes are also in line with the guidance that we have written on health and character declarations.
<b>7. Report concerns about safety</b>		
<p><b>Report concerns</b></p> <p>7.1 You must report any concerns about the safety or well-being of service users promptly and appropriately.</p> <p>7.2 You must support and encourage others to report concerns and not prevent anyone from raising concerns.</p> <p>7.3 You must take appropriate action if you have concerns about the safety or well-being of children or vulnerable adults.</p> <p>7.4 You must make sure that the safety and well-being of service users always comes before any professional or other loyalties.</p>	<p><b>Report concerns</b></p> <p>7.1 You must report any concerns about the safety or well-being of service users promptly and appropriately.</p> <p>7.2 You must support and encourage others to report concerns and not prevent anyone from raising concerns.</p> <p>7.3 You must take appropriate action if you have concerns about the safety or well-being of children or vulnerable adults.</p> <p>7.4 You must make sure that the safety and well-being of service users always comes before any professional or other loyalties.</p> <p>7.5 You must raise concerns about colleagues if you witness bullying, harassment or intimidation of a service user, their carer or another colleague. This should be done following the relevant procedures within your practice and maintaining the safety of all involved.</p>	<p>We have proposed Standard 7.5 (new) to ascertain registrant responsibilities to report bullying, harassment and intimidation. This is in line with feedback from participants in our pre consultation work who expressed their concern about bullying in the workplace, particularly between colleagues.</p>
<b>Follow up concerns</b>	<b>Follow up concerns</b>	No changes made.

<p>7.5 You must follow up concerns you have reported and, if necessary, escalate them.</p> <p>7.6 You must acknowledge and act on concerns raised to you, investigating, escalating or dealing with those concerns where it is appropriate for you to do so.</p>	<p>7.6 You must follow up concerns you have reported and, if necessary, escalate them.</p> <p>7.7 You must acknowledge and act on concerns raised to you, investigating, escalating or dealing with those concerns where it is appropriate for you to do so.</p>	<p>We received feedback during our pre-consultation workshops that the Standards do not make clear a registrant's responsibility to follow up concerns that they raise until they are resolved. Upon reviewing the standards, we found that Standard 7.5 is sufficient to ensure understanding of a registrant's responsibility to follow up concerns.</p>
<p><b>8. Be open when things go wrong</b></p>		
<p><b>Openness with service users and carers</b></p> <p>8.1 You must be open and honest when something has gone wrong with the care, treatment or other services that you provide by:</p> <ul style="list-style-type: none"> <li>• informing service users or, where appropriate, their carers, that something has gone wrong;</li> <li>• apologising;</li> <li>• taking action to put matters right if possible; and</li> <li>• making sure that service users or, where appropriate, their carers, receive a full and prompt explanation of what has happened and any likely effects.</li> </ul>	<p><b>Openness with service users and carers</b></p> <p>8.1 You must be open, honest and candid when something has gone wrong with the care, treatment or other services that you provide by:</p> <ul style="list-style-type: none"> <li>• Where applicable, alerting your employer of what has gone wrong and following the relevant internal procedures.</li> <li>• Informing service users and/or where appropriate, their carer to inform them that something has gone wrong</li> <li>• Providing service users and/or their carer with a detailed explanation of the circumstances in which things have gone wrong and the likely impact</li> <li>• Taking action to correct the mistake if possible and detailing this action to the service user and/or where appropriate, their carer.</li> </ul> <p>8.2 You must apologise to a service user and/or their carer when something has gone wrong with the care, treatment or other service that you provide.</p>	<p>Participants throughout our workshops asked that registrant responsibilities when things go wrong be made clearer. They wanted to see more correlation between the Standard and our online materials on duty of candour.</p> <p>We have proposed changes to Standard 8.1 and Standard 8.2 (which sets out the requirement to apologise) requiring registrants to apologise. These changes make the processes that registrants must follow clearer and are better aligned with online materials on the duty of candour.</p> <p><a href="https://www.hcpc-uk.org">The duty of candour   (hcpc-uk.org)</a></p> <p>Setting out the need to apologise in a separate standard highlights the centrality of apologising when things go wrong and recognises it as a professional duty. This better aligns with our guidance.</p>



<p><b>Deal with concerns and complaints</b></p> <p>8.2 You must support service users and carers who want to raise concerns about the care, treatment or other services they have received.</p> <p>8.3 You must give a helpful and honest response to anyone who complains about the care, treatment or other services they have received.</p>	<p><b>Deal with concerns and complaints</b></p> <p>8.3 You must support service users and carers who want to raise concerns about the care, treatment or other services they have received.</p> <p>8.4 You must give a helpful and honest response to anyone who complains about the care, treatment or other services they have received.</p>	<p>No changes made.</p>
<p><b>9. Be honest and trustworthy</b></p>		
<p><b>Personal and professional behaviour</b></p> <p>9.1 You must make sure that your conduct justifies the public's trust and confidence in you and your profession.</p> <p>9.2 You must be honest about your experience, qualifications and skills.</p> <p>9.3 You must make sure that any promotional activities you are involved in are accurate and are not likely to mislead.</p> <p>9.4 You must declare issues that might create conflicts of interest and make sure that they do not influence your judgement.</p>	<p><b>Personal and professional behaviour</b></p> <p>9.1 You must make sure that your conduct justifies the public's trust and confidence in you and your profession.</p> <p>9.2 You must be honest about your experience, qualifications and skills.</p> <p>9.3 You must take reasonable steps to make sure that any promotional activities you are involved in are accurate and are not likely to mislead.</p> <p>9.4 You must declare issues that might create conflicts of interest and make sure that they do not influence your judgement.</p>	<p>We have amended 9.3 to make clear the extent of the registrant's duty.</p>
<p><b>Important information about your conduct and competence</b></p> <p>9.5 You must tell us as soon as possible if:</p>	<p><b>Important information about your conduct and competence</b></p> <p>9.5 You must tell us as soon as possible if:</p>	<p>During internal workshops, a trend in fitness to practice investigations was identified concerning self-referral. This showed that there was confusion amongst registrants regarding when they should</p>

<ul style="list-style-type: none"> <li>• you accept a caution from the police or you have been charged with, or found guilty of, a criminal offence;</li> <li>• another organisation responsible for regulating a health or social-care profession has taken action or made a finding against you; or</li> <li>• you have had any restriction placed on your practice, or been suspended or dismissed by an employer, because of concerns about your conduct or competence.</li> <li>• You must co-operate with any investigation into your conduct or competence, the conduct or competence of others, or the care, treatment or other services provided to service users.</li> </ul>	<ul style="list-style-type: none"> <li>• you accept a caution from the police or you have been charged with, or found guilty of, a criminal offence;</li> <li>• another organisation responsible for regulating a health or social-care profession has taken action or made a finding against you; or</li> <li>• you have had any restriction placed on your practice, or been suspended or dismissed by an employer, because of concerns about your conduct or competence.</li> </ul> <p>9.6 You must co-operate with any investigation into your conduct or competence, the conduct or competence of others, or the care, treatment or other services provided to service users.</p>	<p>notify us of a police caution, action being taken against them, or any restriction being placed on their practice.</p> <p>We considered changing the Standard to include a one-month time limit to inform us. However, registrants may fail to notify us for several reasons. These reasons will still arise, regardless of whether there is a duty to report in one-month or as soon as possible. Furthermore, our legislation does not set a specific time frame for notification. Setting a time limit for registrants to notify us is therefore beyond our scope of regulation.</p> <p>As an alternative, we expect to update our guidance on this Standard. These updates will give examples/scenarios to illustrate how this duty applies in practice. It will also discuss the time frame in which registrants must inform us.</p>
<b>10. Keep records of your work</b>		
<p><b>Keep accurate records</b></p> <p>10.1 You must keep full, clear, and accurate records for everyone you care for, treat, or provide other services to.</p> <p>10.2 You must complete all records promptly and as soon as possible after providing care, treatment or other services.</p> <p><b>Keep records secure</b></p> <p>10.3 You must keep records secure by protecting them from loss, damage or inappropriate access.</p>	<p><b>Keep accurate records</b></p> <p>10.1 You must keep full, clear, and accurate records for everyone you care for, treat, or provide other services to.</p> <p>10.2 You must complete all records promptly and as soon as possible after providing care, treatment or other services.</p> <p><b>Keep records secure</b></p> <p>10.3 You must keep records secure by protecting them from loss, damage or inappropriate access.</p>	<p>No changes made.</p>

## Appendix C: Revised Standards of conduct performance and ethics

### Standards of conduct performance and ethics

#### 1. Promote and protect the interests of service users and carers

##### *Treat service users and carers with respect*

- 1.1 You must treat service users and carers as individuals, respecting their privacy and dignity.
- 1.2 You must work in partnership with service users and carers, involving them, where appropriate, in decisions about the care, treatment or other services to be provided.
- 1.3 You must empower and enable service users, where appropriate, to play a part in maintaining their own health and well-being and support them so they can make informed decisions.

##### *Make sure you have consent*

- 1.4 You must make sure that you have valid consent, which is voluntary and informed, from service users who have capacity to make the decision or other appropriate authority before you provide care, treatment or other services.

##### *Challenge discrimination*

- 1.5 You must treat people fairly and be aware of the potential impact that your personal values, biases and beliefs may have on the care, treatment or other services that you provide to service users and carers and in your interactions with colleagues.
- 1.6 You must take action to ensure that your personal values, biases and beliefs do not lead you to discriminate against service users, carers or colleagues. Your personal values, biases and beliefs must not detrimentally impact the care, treatment or other services that you provide.
- 1.7 You must raise concerns about colleagues if you think that they are treating people unfairly and/or their personal values, biases and beliefs have led them to discriminate against service users, carers and/or colleagues or they have detrimentally impacted the care, treatment or other services that they provide. This should be done following the relevant procedures within your practice and maintain the safety of all involved.

##### *Maintain appropriate boundaries*

- 1.8 You must be aware of the potential impact that the position of power and trust you hold as a health and care professional may have on individuals when in social or personal settings.
- 1.9 You must take action to set and maintain appropriate professional boundaries with service users and/or carers and colleagues.

- 1.10 You must use appropriate methods of communication to provide care and other services related to your practice
- 1.11 You must ensure that existing personal relationships do not impact professional decisions.
- 1.12 You must not abuse your position as a health and care practitioner to pursue personal, sexual, emotional or financial relationships with service users and/or carers or colleagues.

## **2 Communicate appropriately and effectively**

### *Communicate with service users and carers*

- 2.1 You must be polite and considerate.
- 2.2 You must listen to service users and carers and take account of their needs and wishes.
- 2.3 You must give service users and carers the information they want or need, in a way they can understand.
- 2.4 You must make sure that all practicable steps are taken to meet service users' and carers' language and communication needs.
- 2.5 You must use all forms of communication responsibly when communicating with service users and their carers.

### *Work with colleagues*

- 2.6 You must work in partnership with colleagues, sharing your skills, knowledge and experience where appropriate, for the benefit of service users and carers.
- 2.7 You must share relevant information, where appropriate, with colleagues involved in the care, treatment or other services provided to a service user.
- 2.8 You must treat your colleagues in a professional manner showing them respect and consideration.
- 2.9 You must use all forms of communication with colleagues and other health and care professionals responsibly including media sharing networks and social networking sites.

### *Social media and networking sites*

- 2.10 You must use media sharing networks and social networking sites responsibly.
- 2.11 You must make reasonable checks to ensure information is accurate, true, does not mislead the public and is in line with your duty to promote public health

when sharing information on media sharing networks and social networking sites.

- 2.12 You must use media sharing networks and social networking sites responsibly, maintaining professional boundaries at all times and protecting service user/carer privacy.

### **3. Work within the limits of your knowledge and skills**

*Keep within your scope of practice*

- 3.1 You must only practise in the areas where you have the appropriate knowledge, skills and experience to meet the needs of a service user safely and effectively.
- 3.2 You must undertake additional training to update your knowledge, skills and experience if you wish to widen your scope of practice.
- 3.3 You must refer a service user to an appropriate practitioner if the care, treatment or other services they need are beyond your scope of practice. This person must hold the appropriate knowledge, skills and experience to meet the needs of the service user safely and effectively.

*Maintain and develop your knowledge and skills*

- 3.4 You must keep your knowledge and skills up to date and relevant to your scope of practice through continuing professional development.
- 3.5 You must keep up to date with and follow the law, our guidance and other requirements relevant to your practice.
- 3.6 You must ask for feedback and use it to improve your practice.

### **4. Delegate appropriately**

*Delegation, oversight and support*

- 4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.
- 4.2 You must continue to provide appropriate supervision and support to those you delegate work to.

### **5. Respect Confidentiality**

*Using information*

- 5.1 You must treat information about service users as confidential.

*Disclosing information*

5.2 You must only disclose confidential information if:

- you have permission;
- the law allows this;
- it is in the service user's best interests; or
- it is in the public interest, such as if it is necessary to protect public safety or prevent harm to other people.

## **6. Manage risk**

### *Identify and minimise risk*

- 6.1 You must take all reasonable steps to reduce the risk of harm to service users, carers and colleagues as far as possible.
- 6.2 You must not do anything, or allow someone else to do anything, which could put the health or safety of a service user, carer or colleague at unacceptable risk.

### *Manage your health*

- 6.3 You must take responsibility for assessing whether changes to your physical and/or mental health will detrimentally impact your ability to practise safely and effectively.
- 6.4 You must adjust your practice if your physical and/or mental health will detrimentally impact your ability to practise safely and effectively. These adjustments must promote safe and effective practice. Where it is not possible to make these adjustments within your scope of practice, you must stop practising.

## **7. Report concerns about safety**

### *Report concerns*

- 7.1 You must report any concerns about the safety or well-being of service users promptly and appropriately.
- 7.2 You must support and encourage others to report concerns and not prevent anyone from raising concerns.
- 7.3 You must take appropriate action if you have concerns about the safety or well-being of children or vulnerable adults.
- 7.4 You must make sure that the safety and well-being of service users always comes before any professional or other loyalties.
- 7.5 You must raise concerns regarding colleagues if you witness bullying, harassment or intimidation of a service user, their carer or another colleague.

This should be done following the relevant procedures within your practice and maintaining the safety of all involved.

#### *Follow up concerns*

- 7.5 You must follow up concerns you have reported and, if necessary, escalate them.
- 7.6 You must acknowledge and act on concerns raised to you, investigating, escalating or dealing with those concerns where it is appropriate for you to do so.

### **8. Be open when things go wrong**

#### *Openness with service users and carers*

- 8.1 You must be open, honest and candid when something has gone wrong with the care, treatment or other services that you provide by:
- Where applicable, alerting your employer of what has gone wrong and following the relevant internal procedures.
  - Informing service users and/or where appropriate, their carer to inform them that something has gone wrong
  - Providing service users and/or their carer with a detailed explanation of the circumstances in which things have gone wrong and the likely impact
  - Taking action to correct the mistake if possible and detailing this action to the service user and/or where appropriate, their carer.
- 8.2 You must apologise to a service user and/or their carer when something has gone wrong with the care, treatment or other service that you provide.

#### *Deal with concerns and complaints*

- 8.3 You must support service users and carers who want to raise concerns about the care, treatment or other services they have received.
- 8.4 You must give a helpful and honest response to anyone who complains about the care, treatment or other services they have received.

### **9. Be honest and trustworthy**

#### *Personal and professional behaviour*

- 9.1 You must make sure that your conduct justifies the public's trust and confidence in you and your profession.
- 9.2 You must be honest about your experience, qualifications and skills.
- 9.3 You must take reasonable steps to make sure that any promotional activities you are involved in are accurate and are not likely to mislead.

9.4 You must declare issues that might create conflicts of interest and make sure that they do not influence your judgement.

### **Important information about your conduct and competence**

You must tell us as soon as possible, and in any event, of being notified if:

- you accept a caution from the police or you have been charged with, or found guilty of, a criminal offence;
- another organisation responsible for regulating a health or social-care profession has taken action or made a finding against you; or
- you have had any restriction placed on your practice, or been suspended or dismissed by an employer, because of concerns about your conduct or competence.

9.6 You must co-operate with any investigation into your conduct or competence, the conduct or competence of others, or the care, treatment or other services provided to service users.

## **10. Keep records of your work**

### *Keep accurate records*

10.1 You must keep full, clear, and accurate records for everyone you care for, treat, or provide other services to.

10.2 You must complete all records promptly and as soon as possible after providing care, treatment or other services.

### *Keep records secure*

10.3 You must keep records secure by protecting them from loss, damage or inappropriate access.



## Appendix D: Commentary on the revised guidance on social media

The extent of the changes we are proposing to the structure and content of the existing guidance on social media would make tracked changes difficult to read. We have produced this document to provide more information about the differences between the draft guidance for consultation and the existing guidance. We have provided on a commentary on the changes made, highlighting the reasons why these changes have been made.

Existing guidance	Draft guidance	Commentary
<p>About this document</p> <p>We have written this document to provide guidance to registrants who use social media. It explains how to use social media in a way which meets our standards.</p> <p>This document cannot deal with every issue that might come up. Instead, we have focused on the issues that registrants and others told us they came across most frequently.</p> <p>This guidance is focused on our standards. Some professional bodies publish social media guidelines to support their members to get the most from this technology. If you are employed, your employer may also have relevant policies or guidance that apply to you.</p>	<p>About this document</p> <p>We have written this document to provide guidance to registrants who use social media. Registrants must meet our Standards when using social media. We explain more about how they can do this, when using professional and personal accounts, in this guidance. When using their personal accounts, registrants should be mindful of the impact their posts may have on their professional practice and their profession.</p> <p>Social media is an important way for registrants to express their opinions, beliefs and share information. Our Standards and this guidance respect and uphold registrant’s right to freedom of expression. This right, which is set out in Article 10 of the European Convention of Human Rights, is not an absolute right, and can be restricted in certain circumstances. You can find out more information about freedom of expression at the <a href="#">Equality and Human Rights Commission (EHRC) website</a>.</p> <p>This document cannot deal with every issue that might come up. The examples and information</p>	<p>We have updated this section to explicitly state the circumstances in which the guidance and our Standards apply. This includes both professional and personal use of social media.</p> <p>The HCPC respects a registrant’s right to freedom of expression and therefore will only review posts that impact a registrant’s professional practice or their profession more generally.</p> <p>We have also made changes to make it clear that registrants are expected to use this guidance to build their understanding and thereby use their professional judgement when deciding what to post.</p>

	<p>provided will enable registrants and all HCPC stakeholders to build their understanding and use their professional judgement to identify the appropriate behaviour when registered professionals use social media.</p> <p>This guidance is focused on our standards. Some professional bodies publish social media guidelines to support their members to get the most from this technology. If you are employed, your employer may also have relevant policies or guidance that apply to you.</p>	
<p>How this document is structured</p> <p>This document is divided into three sections.</p> <ul style="list-style-type: none"> <li>• Section 1 contains some top tips for using social media.</li> <li>• Section 2 provides guidance on how our standards relate to using social media and some relevant issues you may come across.</li> <li>• Section 3 contains information about how to find out more.</li> </ul>	<p>How this document is structured</p> <p>This document is divided into three sections.</p> <ul style="list-style-type: none"> <li>• Section 1 provides guidance on how our standards relate to using social media and some relevant issues you may come across.</li> <li>• Section 2 contains some top tips for using social media.</li> <li>• Section 3 contains information about how to find out more.</li> </ul>	<p>We have changed the structure of this document by bringing the guidance section forward. This makes the primary purpose of this document clear – to provide guidance to registrants on social media. The top tips section is also better understood after the guidance section.</p>
<p>Language</p> <p>Throughout this document:</p> <ul style="list-style-type: none"> <li>• ‘we’ and ‘us’ refers to the Health and Care Professions Council (HCPC);</li> </ul>	<p>Language</p> <p>Throughout this document:</p> <ul style="list-style-type: none"> <li>• ‘we’ and ‘us’ refers to the Health and Care Professions Council (HCPC);</li> </ul>	<p>We have updated our definition of social media to better reflected current usage of media sharing websites and applications and social networks.</p> <p>We heard from stakeholders that they were concerned about the use of modern</p>

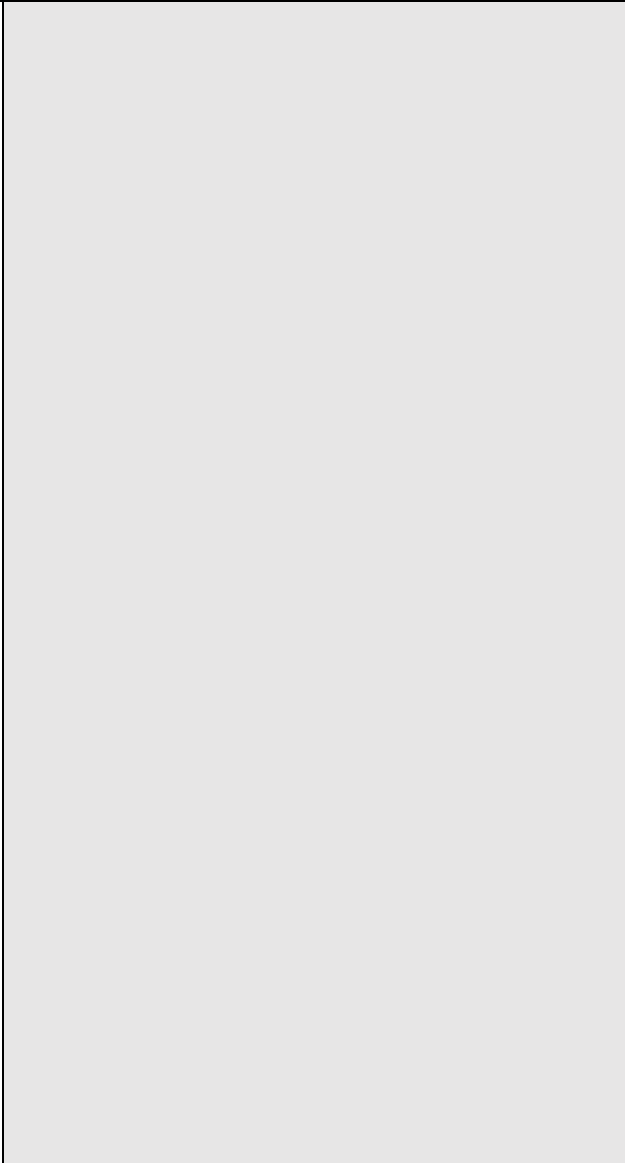
<ul style="list-style-type: none"> <li>• ‘registrant’ refers to a professional on our register;</li> <li>• ‘you’ or ‘your’ refers to a registrant;</li> <li>• ‘service user’ refers to anyone who uses or is affected by the services of registrants, for example, patients or clients; and</li> <li>• ‘social media’ refers to websites and applications that allow you to create and share content and to interact with other users. This includes, but is not limited to, websites such as Facebook, Twitter and YouTube, as well as online forums and blogs.</li> </ul>	<ul style="list-style-type: none"> <li>• ‘registrant’ refers to a professional on our register;</li> <li>• ‘you’ or ‘your’ refers to a registrant;</li> <li>• ‘service user’ refers to anyone who uses or is affected by the services of registrants, for example, patients or clients; and</li> <li>• ‘social media’ refers to media sharing websites and applications and networking websites and applications that allow you to create and share content and to interact with other users. This includes, but is not limited to, websites such as Facebook, Twitter and YouTube, media sharing applications such as Instagram and TikTok and networking applications such as WhatsApp, as well as online forums and blogs.</li> </ul>	<p>applications to share information. We have therefore added reference to common applications used e.g., WhatsApp. This makes it clear when our standards and guidance apply.</p>
<p>About us</p> <p>We are the Health and Care Professions Council. We are a regulator and were set up to protect the public. To do this, we keep a register of professionals who meet our standards for their professional skills, knowledge and behaviour. Individuals on our Register are called ‘registrants’. We currently regulate 15 professions.</p>	<p>About us</p> <p>We are the Health and Care Professions Council. Our statutory role is to protect the public by regulating healthcare professionals in the UK. To do this, we keep a register of professionals who meet our standards for their professional skills, knowledge and behaviour. Individuals on our Register are called ‘registrants’. We currently regulate 15 professions; you can find out which professions we regulate <a href="#">here</a>.</p> <p>We promote high quality professional practice, regulating over 300,000 registrants by:</p> <ul style="list-style-type: none"> <li>• setting standards for professionals' education and training and practice;</li> </ul>	<p>We have updated the language here to better reflect HCPC’s role in regulating the professions.</p> <p>We have also added a link to the page on our website that lists the professions we regulate. This makes the document easier to read.</p> <p>We have added further information about our role as a regulator to support readers understanding of the activities of the HCPC.</p>

	<ul style="list-style-type: none"> <li>• approving education programmes which professionals must complete to register with us;</li> <li>• keeping a register of professionals, known as 'registrants', who meet our standards;</li> <li>• acting if professionals on our Register do not meet our standards;</li> <li>• and stopping unregistered practitioners from using protected professional titles</li> </ul>	
<p>About the standards</p> <p>We set standards of conduct, performance and ethics, which set out how we expect registrants to behave. We use the standards when a concern has been raised about a registrant, to help us decide whether we need to take action to protect the public.</p> <p>As a registrant, you must make sure you are familiar with the standards and that you continue to meet them at all times.</p> <p>At the Health and Care Professions Council Professions we regulate:</p> <ul style="list-style-type: none"> <li>– Arts therapists</li> <li>– Biomedical scientists</li> <li>– Chiropodists / podiatrists</li> <li>– Clinical scientists</li> <li>– Dietitians</li> <li>– Hearing aid dispensers</li> <li>– Occupational therapists</li> <li>– Operating department practitioners</li> </ul>	<p>About the standards</p> <p>We set standards of conduct, performance and ethics, which set out how we expect registrants to behave. We use the standards as follows:</p> <ul style="list-style-type: none"> <li>• to help us to make decisions about the character of professionals who apply to our Register.</li> <li>• if someone raises a concern about a registrant's practice.</li> <li>• when things go wrong, they help us to decide whether it is necessary to act.</li> </ul> <p>As a registrant, you must make sure you are familiar with the standards and that you continue to always meet them.</p> <p>The current Standards of conduct performance and ethics can be found at the HCPC website: <a href="https://www.hcpc-uk.org/standards-of-conduct-performance-and-ethics">Standards of conduct, performance and ethics   (hcpc-uk.org)</a>.</p>	<p>We have simplified this section to only refer to the standards and their purpose. We have also added a link to the standards to help readers find further information more easily.</p>

<ul style="list-style-type: none"> <li>- Orthoptists</li> <li>- Paramedics</li> <li>- Physiotherapists</li> <li>- Practitioner psychologists</li> <li>- Prosthetists / orthotists</li> <li>- Radiographers</li> <li>- Speech and language therapists</li> </ul>		
<p>Section 2: Using social media</p> <p>Benefits of social media</p> <p>Registrants have told us that using social media lets them:</p> <ul style="list-style-type: none"> <li>• develop and share their skills and knowledge;</li> <li>• help the public understand what they do.</li> <li>• network with other professionals nationally and internationally; and</li> <li>• raise the profile of their profession.</li> </ul> <p>Most registrants who use social media already do so responsibly, in line with our standards, and without any difficulties at all. However, we know that registrants sometimes have questions or concerns about using social media because they want to make sure that they always meet our standards.</p>	<p>Section 1: Using social media</p> <p>Benefits of social media</p> <p>Registrants have told us that when using social media in a professional capacity, they are able to:</p> <ul style="list-style-type: none"> <li>• develop and share their skills and knowledge;</li> <li>• help the public understand what they do.</li> <li>• network with other professionals nationally and internationally; and</li> <li>• raise the profile of their profession.</li> </ul> <p>In a personal capacity, we have heard from registrants that social media is a helpful way to:</p> <ul style="list-style-type: none"> <li>• connect with friends and family</li> <li>• share their personal views and opinions to other individuals</li> <li>• gain better understanding of the world around them</li> </ul> <p>Most registrants who use social media already do so responsibly, in line with our standards, and without any difficulties at all. However, we know</p>	<p>We have added information about the various circumstances that registrants find social media use helpful including personal use. This better reflects the various circumstances that our standards and guidance apply.</p> <p>It also makes clear the important role that social media plays in providing registrants a space to express their personal views, opinions and beliefs.</p>

<p>This guidance explains what our standards mean when using social media. We have set out the guidance below under the areas of our standards which apply to the appropriate use of social media.</p>	<p>that registrants sometimes have questions or concerns about using social media because they want to make sure that they always meet our standards.</p>	
	<p>The standards and social media</p> <p>This guidance explains how to meet our Standards when using social media in a professional and/or personal capacity. We have set out the guidance below under the areas of our standards which apply to the appropriate use of social media.</p> <p><b>You should note that historic social media activity may be considered against our standards, even if you were not a registered professional at the time of that social media activity. It is important that you consider whether any historic social media activity may call into question your compliance with the standards considering the guidance below. If it might do, you should take action (for instance, by removing historic social media posts or deleting accounts).</b></p>	<p>We have added this as a separate section to clearly mark the section of guidance. This makes the document easier to follow.</p> <p>We have also made it clear that the guidance applies in both professional and personal use of social media, within the limits set out in Article 10 of ECHR to achieve certain objectives (which include the protection of health or morals, the protection of the reputation or rights of others, and preventing the disclosure of information received in confidence).</p>
<p>Maintain appropriate boundaries</p> <p>Our standards of conduct, performance and ethics say:</p>	<p><u>Challenge discrimination</u></p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>1.6 You must take action to ensure that your personal values, biases and beliefs do not lead you</i></p>	<p>This section has been updated in line with the proposed revised standards – Standard 1.6 and the four new Standards (1.8, 1.9, 1.10 and 1.11) to include more active language regarding maintaining professional boundaries.</p>

<p><i>'You must keep your relationships with service users and carers professional.'</i> (1.7)</p> <p>Some professionals find using social media a valuable way of communicating with service users and the public. However, social media can blur the boundaries between the personal and the professional. It is just as important to maintain appropriate boundaries when using social media as it would be if you were communicating by any other method. You must always communicate with service users in a professional way. You might decide to set up a separate professional account where you provide general information for service users and the public. If you are employed and plan to use this account to have direct contact with service users, you should first agree with your employer whether this is appropriate.</p> <p>Keep in mind that service users may still be able to find and contact you through your personal account. If this happens, we recommend that you refuse friend requests. If appropriate, say that you cannot mix social and professional relationships. If you want to follow up any contact you receive, consider using a more secure communication channel, such as your professional email account. If you include content relating to your professional role on a personal account or vice versa, think about whether you would be happy for these different audiences to see</p>	<p><i>to discriminate against service users, carers or colleagues. Your personal values, biases and beliefs must not detrimentally impact the care, treatment or other services that you provide.</i></p> <p>Your services must be available to all service users and/or their carers. When you share content on social media you must do so in a way that does not hinder people's access to your services. This means that you should be aware of the impact that your personal views, biases and beliefs may have on people's access to your services.</p> <p>This applies whether you are using a personal or professional social media account.</p> <p><u>Maintain appropriate boundaries</u></p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>1.9 You must take action to set and maintain appropriate professional boundaries with service users and/or carers and colleagues.</i></p> <p><i>1.10 You must use appropriate methods of communication to provide care and other services related to your practice</i></p> <p><i>1.11 You must ensure that existing personal relationships do not impact professional decisions.</i></p> <p><i>1.12 You must not abuse your position as a health and care practitioner to pursue personal, sexual,</i></p>	<p>It has been rewritten to reflect the circumstances in which HCPC can take an interest in a registrant's social media posts.</p> <p>We have changed the guidance relating to Standard 1.8 to make it clear that registrants should think about the impact of their posts before they share them. It better reflects the limits of HCPC interest in social media posts on a personal account and protects people's access to services.</p>
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<p>the material you post. Think carefully about what you share and who can see it.</p>	<p><i>emotional or financial relationships with service users and/or carers or colleagues.</i></p> <p>Social media can blur the boundaries between your personal and professional life. It is just as important to maintain appropriate professional boundaries when using social media as it would be if you were communicating by any other method. You must always communicate with service users in a professional way. You might decide to set up a separate professional account where you provide general information for service users and the public. If you are employed and plan to use this account to have direct contact with service users, you should first agree with your employer whether this is appropriate.</p> <p>Keep in mind that service users may still be able to find and contact you through your personal account. If this happens, we recommend that you refuse friend requests. If appropriate, say that you cannot mix social and professional relationships. If you want to follow up any contact you receive, consider using a professional communication channel, such as your professional email account.</p> <p>If you include content relating to your professional role on a personal account or vice versa, think about the impact of the content that you will share on these different audiences when they see the material you post. Think carefully about what you share and who can see it.</p> <p>Bear in mind the personal material you might intend to share only with friends or family on a personal</p>	
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	account could be accessible to a much wider audience, and once uploaded, it may not be possible to delete it or control how widely it is shared.	
<p>Communicate appropriately</p> <p>The standards of conduct, performance and ethics say:</p> <p><i>'You must use all forms of communication appropriately and responsibly, including social media and networking websites' (2.7)</i></p> <p>When using social media, you should apply the same standards as you would when communicating in other ways. Be polite and respectful and avoid using language that others might reasonably consider to be inappropriate or offensive.</p> <p>Use your professional judgement in deciding whether to post or share something. Remember that comments or posts may be taken out of context or made visible to a wider audience than originally intended.</p>	<p><u>Communicate appropriately</u></p> <p>The standards of conduct, performance and ethics say:</p> <p><i>2.10 You must use media sharing networks and social networking sites responsibly.</i></p> <p>When using social media, you should apply the same standards as you would when communicating in other ways. You must always be polite and respectful to others when communicating in a professional capacity</p> <p><i>2.11 You must make reasonable checks to ensure information is accurate, true, does not mislead the public and is in line with your duty to promote public health when sharing information on media sharing networks and social networking sites.</i></p> <p>When using social media, think about the accuracy and truth of the content that you share or circulate. Check that the information originates from people and/or organisations that are trustworthy and does not contradict government public health messages.</p> <p><i>2.12 You must use media sharing networks and social networking sites appropriately and</i></p>	<p>We have updated this section in line with the proposed revised standards – Standard 2.10 and 2.11.</p> <p>Changes to the guidance on Standard 2.10 specifically tackles misinformation, a common theme and concern throughout our stakeholder workshops.</p> <p>We have removed reference to registrant's avoiding "using language that others might reasonably consider to be inappropriate or offensive". This ensures that a registrant's right to freedom of expression is not unreasonably hindered by other social media users.</p>

	<p><i>responsibly, maintaining professional boundaries at all times and protecting service user/carer privacy.</i></p> <p>You must also be careful that the information you share on social media does not reveal personal information about service users and/or their carers.</p> <p>Use your professional judgement in deciding whether to post or share something. Remember that comments or posts may be taken out of context or made visible to a wider audience than originally intended.</p>	
<p><b>Respect confidentiality</b></p> <p>Our standards of conduct, performance and ethics say:</p> <p>'You must treat information about service users as confidential' (5.1)</p> <p>When you post information about another person on social media, think about whether it is appropriate to share that information. If the information could allow a service user to be identified, you must not put it on a site without their permission. This information could include details about their personal life, health or circumstances, or images relating to their care.</p> <p>Even if you have the highest level of privacy settings, something you share online can quickly be copied and redistributed to a much</p>	<p><u><b>Respect confidentiality</b></u></p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>5.1 You must treat information about service users as confidential.</i></p> <p>When you post information about another person on social media, think about whether it is appropriate to share that information. If the information could allow a service user to be identified, you must not put it on a site without their permission. This information could include details about their personal life, health or circumstances, or images relating to their care. This applies whether you are sharing information to your personal connections or to the public.</p>	<p>We have updated this section to clearly state that registrants must think about confidentiality when using either a personal or professional account.</p>

<p>wider audience. This means a post can stay in the public domain after you delete it. Try to stay up to date with any changes to the privacy settings of the social media you use. If you are unsure whether to post something, stop and get advice first from an experienced colleague, professional body or trade union.</p>		
<p><b>Be honest and trustworthy</b></p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>'You must make sure that your conduct justifies the public's trust and confidence in you and your profession' (9.1)</i></p> <p>This means you need to think about who can see what you share. Make sure you understand the privacy settings of each social media channel that you use. Even on a completely personal account, your employer, colleagues or service users may be able to see your posts or personal information. It is best to assume that anything you post online will be visible to everyone.</p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>'You must make sure that any promotional activities you are involved in are accurate and are not likely to mislead' (9.3)</i></p>	<p><b><u>Be honest and trustworthy</u></b></p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>9.1 You must make sure that your conduct justifies the public's trust and confidence in you and your profession.</i></p> <p>This means you need to think carefully about what you share online. Throughout your use of social media make sure that what you share does not bring your professional practice or your profession into disrepute. When using either a professional or personal account, your conduct should continue to respect service users, their carers and/or your colleagues and maintain fair access to services for all.</p> <p>Our standards of conduct, performance and ethics say:</p> <p><i>9.3 You must make take reasonable steps to make sure that any promotional activities you are involved in are accurate and are not likely to mislead.</i></p>	<p>We have updated this section to enable registrant's to better understand the circumstances in which the standards and guidance apply to their social media posts.</p>

<p>If you use social media to advertise or share information related to your professional practice, you must make sure it is fair and true, as far as you know. You may choose to include a disclaimer on your profile that your views are your own, and that they do not represent the views of your employer or anyone who contracts your services.</p>	<p>If you use social media to advertise or share information related to your professional practice, you must make sure it is fair and true, by making reasonable checks to verify it. You may choose to include a disclaimer on your profile that your views are your own, and that they do not represent the views of your employer or anyone who contracts your services.</p>	
<p>Section 2: Top tips</p> <p>The following are some top tips for using social media in a way which meets our standards. You can find information about how to put these into practice in the next section of this document.</p> <ul style="list-style-type: none"> <li>• <b>Think before you post.</b> Assume that what you post could be shared and read by anyone.</li> <li>• <b>Think about who can see what you share</b> and manage your privacy settings accordingly.</li> <li>• Remember that privacy settings cannot guarantee that something you post will not be publicly visible.</li> <li>• Maintain <b>appropriate professional boundaries</b> if you communicate with colleagues, service users or carers.</li> </ul>	<p>Section 2: Top tips</p> <p>The following are some top tips for using social media in a way which meets our standards. You can find information about how to put these into practice in the next section of this document.</p> <ul style="list-style-type: none"> <li>• <b>Think before you post.</b> Assume that what you post could be shared and read by anyone.</li> <li>• <b>Think about who can see what you share</b> and manage your privacy settings accordingly.</li> <li>• Remember that privacy settings cannot guarantee that something you post will not be publicly visible.</li> <li>• Make <b>reasonable checks to ensure that information is true and accurate.</b> You should be aware of government public health messaging, and ensure that any views you express about it are evidenced-based, responsible, and professional.</li> <li>• Think carefully about who you link to, associate with, acknowledge or endorse/support online.</li> <li>• Maintain <b>appropriate professional boundaries</b> if you communicate with</li> </ul>	<p>We have updated the top tips to ensure clarity around what language is inappropriate to use on social media.</p> <p>We have also made it clear that the HCPC is available to provide further information on the standards and cannot advise whether a particular post is compliant or not.</p> <p>We have added a top tip that advises registrants to check that information they share is accurate and true and consistent with their professional duty to promote public health. This is to help tackle misinformation, which was a key concern of our stakeholders throughout our workshops and public survey.</p>

<ul style="list-style-type: none"> <li>• Do not post information which could identify a service user unless you have their permission.</li> <li>• Do not post inappropriate or offensive material. Use your professional judgement in deciding whether to post or share something.</li> <li>• If you are employed, follow your employer's social media policy.</li> <li>• When in doubt, get advice. Appropriate sources might include experienced colleagues, trade unions and professional bodies. You can also contact us if you are unsure about our standards. If you think something could be inappropriate or offensive, do not post it.</li> <li>• Keep on posting! We know that many registrants find using social media beneficial and do so without any issues. There's no reason why you shouldn't keep on using it with confidence.</li> </ul>	<p>colleagues, service users or carers on social media.</p> <ul style="list-style-type: none"> <li>• Do not post information which could identify a service user and/or their carer.</li> <li>• If you are employed, follow your employer's social media policy.</li> <li>• Do not post discriminatory or offensive material.</li> <li>• Use your professional judgement in deciding whether to post or share something.</li> <li>• When in doubt, get advice. Appropriate sources might include experienced colleagues, trade unions and professional bodies. If you think something could be inappropriate or offensive, do not post it. You can also contact us for further information about the standards.</li> <li>• Remember that the professional standards expected of you do not change just because you are communicating on social media.</li> <li>• Keep on posting! We know that many registrants find using social media beneficial and do so without any issues. There's no reason why you shouldn't keep on using it with confidence.</li> </ul>	
<p>Section 3: More information</p> <p>You can contact us if you have any questions about this guidance or our standards. However, we cannot offer legal advice. Our contact details are below.</p> <p>The Health and Care Professions Council</p>	<p>Section 3: More information</p> <p>You can contact us if you have any questions about this guidance or our standards. However, we cannot offer legal advice. Our contact details are below.</p> <p>The Health and Care Professions Council</p>	<p>This section remains unchanged.</p>

<p>Park House 184 Kennington Park Road London SE11 4BU Phone: +44 (0)300 500 6184</p> <p>You can download copies of our standards documents and other publications from our website at <a href="http://www.hcpc-uk.org">www.hcpc-uk.org</a></p>	<p>Park House 184 Kennington Park Road London SE11 4BU Phone: +44 (0)300 500 6184</p> <p>You can download copies of our standards documents and other publications from our website at <a href="http://www.hcpc-uk.org">www.hcpc-uk.org</a></p>	
<p><b>Other sources of guidance</b></p> <p>We recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes guidance and advice about good practice which can help you meet the standards that we set.</p> <p>To request this document in Welsh or an alternative format, email <a href="mailto:publications@hcpc-uk.org">publications@hcpc-uk.org</a>.</p>	<p><b>Other sources of guidance</b></p> <p>We recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes guidance and advice about good practice which can help you meet the standards that we set.</p> <p>To request this document in Welsh or an alternative format, email <a href="mailto:publications@hcpc-uk.org">publications@hcpc-uk.org</a>.</p>	<p>This section remains unchanged.</p>

## Appendix E: Revised Guidance on social media

# Guidance on social media

## Contents

<b>Introduction</b> .....	56
About this document .....	56
How this document is structured.....	56
Language.....	56
About us.....	57
About the standards.....	57
<b>Section 1: Using social media</b> .....	57
Benefits of social media .....	57
The standards and social media.....	57
<b>Section 2: Top tips</b> .....	60
<b>Section 3: More information</b> .....	60

## Introduction

### About this document

We have written this document to provide guidance to registrants who use social media. Registrants must meet our Standards when using social media. We explain more about how they can do this, when using professional and personal accounts, in this guidance. When using their personal accounts, registrants should be mindful of the impact their posts may have on their professional practice and their profession.

Social media is an important way for registrants to express their opinions, beliefs and share information. Our Standards and this guidance respect and uphold registrant's right to freedom of expression. This right, which is set out in Article 10 of the European Convention of Human Rights, is not an absolute right, and can be restricted in certain circumstances. You can find out more information about freedom of expression at the [Equality and Human Rights Commission \(EHRC\) website](#).

This document cannot deal with every issue that might come up. The examples and information provided will enable registrants and all HCPC stakeholders to build their understanding and use their professional judgement to identify the appropriate behaviour when registered professionals use social media.

This guidance is focused on our standards. Some professional bodies publish social media guidelines to support their members to get the most from this technology. If you are employed, your employer may also have relevant policies or guidance that apply to you.

### How this document is structured

This document is divided into three sections.

- Section 1 provides guidance on how our standards relate to using social media and some relevant issues you may come across.
- Section 2 contains some top tips for using social media.
- Section 3 contains information about how to find out more.

### Language

Throughout this document:

- 'we' and 'us' refers to the Health and Care Professions Council (HCPC);
- 'registrant' refers to a professional on our register;
- 'you' or 'your' refers to a registrant;
- 'service user' refers to anyone who uses or is affected by the services of registrants, for example, patients or clients; and
- 'social media' refers to media sharing websites and applications and networking websites and applications that allow you to create and share content and to interact with other users. This includes, but is not limited to, websites such as Facebook, Twitter and YouTube, media sharing applications such as Instagram and TikTok and networking applications such as WhatsApp, as well as online forums and blogs.



## About us

We are the Health and Care Professions Council. Our statutory role is to protect the public by regulating healthcare professionals in the UK. To do this, we keep a register of professionals who meet our standards for their professional skills, knowledge and behaviour. Individuals on our Register are called 'registrants'. We currently regulate 15 professions; you can find out which professions we regulate [here](#).

We promote high quality professional practice, regulating over 300,000 registrants by:

- setting standards for professionals' education and training and practice;
- approving education programmes which professionals must complete to register with us;
- keeping a register of professionals, known as 'registrants', who meet our standards;
- acting if professionals on our Register do not meet our standards;
- and stopping unregistered practitioners from using protected professional titles

## About the standards

We set standards of conduct, performance and ethics, which set out how we expect registrants to behave. We use the standards as follows:

- to help us to make decisions about the character of professionals who apply to our Register.
- if someone raises a concern about a registrant's practice.
- when things go wrong, they help us to decide whether it is necessary to act.

As a registrant, you must make sure you are familiar with the standards and that you continue to always meet them.

The current Standards of conduct performance and ethics can be found at the HCPC website: [Standards of conduct, performance and ethics | \(hcpc-uk.org\)](https://www.hcpc-uk.org/standards-of-conduct-performance-and-ethics).

## Section 1: Using social media

### Benefits of social media

Registrants have told us that when using social media in a professional capacity, they are able to:

- develop and share their skills and knowledge;
- help the public understand what they do.
- network with other professionals nationally and internationally; and
- raise the profile of their profession.

In a personal capacity, we have heard from registrants that social media is a helpful way to:

- connect with friends and family
- share their personal views and opinions to other individuals
- gain better understanding of the world around them

Most registrants who use social media already do so responsibly, in line with our standards, and without any difficulties at all. However, we know that registrants sometimes have questions or concerns about using social media because they want to make sure that they always meet our standards.

## **The standards and social media**

This guidance explains how to meet our Standards when using social media in a professional and/or personal capacity. We have set out the guidance below under the areas of our standards which apply to the appropriate use of social media.

You should note that historic social media activity may be considered against our standards, even if you were not a registered professional at the time of that social media activity. It is important that you consider whether any historic social media activity may call into question your compliance with the standards considering the guidance below. If it might do, you should take action (for instance, by removing historic social media posts or deleting accounts).

### Challenge discrimination

Our standards of conduct, performance and ethics say:

*1.6 You must take action to ensure that your personal values, biases and beliefs do not lead you to discriminate against service users, carers or colleagues. Your personal values, biases and beliefs must not detrimentally impact the care, treatment or other services that you provide.*

Your services must be available to all service users and/or their carers. When you share content on social media you must do so in a way that does not hinder people's access to your services. This means that you should be aware of the impact that your personal views, biases and beliefs may have on people's access to your services.

This applies whether you are using a personal or professional social media account.

### Maintain appropriate boundaries

Our standards of conduct, performance and ethics say:

*1.9 You must take action to set and maintain appropriate professional boundaries with service users and/or carers and colleagues.*

*1.10 You must use appropriate methods of communication to provide care and other services related to your practice*

*1.11 You must ensure that existing personal relationships do not impact professional decisions.*

*1.12 You must not abuse your position as a health and care practitioner to pursue personal, sexual, emotional or financial relationships with service users and/or carers or colleagues.*

Social media can blur the boundaries between your personal and professional life. It is just as important to maintain appropriate professional boundaries when using social media as it would be if you were communicating by any other method. You must always communicate with service users in a professional way. You might decide to set up a separate professional

account where you provide general information for service users and the public. If you are employed and plan to use this account to have direct contact with service users, you should first agree with your employer whether this is appropriate.

Keep in mind that service users may still be able to find and contact you through your personal account. If this happens, we recommend that you refuse friend requests. If appropriate, say that you cannot mix social and professional relationships. If you want to follow up any contact you receive, consider using a professional communication channel, such as your professional email account.

If you include content relating to your professional role on a personal account or vice versa, think about the impact of the content that you will share on these different audiences when they see the material you post. Think carefully about what you share and who can see it.

Bear in mind the personal material you might intend to share only with friends or family on a personal account could be accessible to a much wider audience, and once uploaded, it may not be possible to delete it or control how widely it is shared.

### Communicate appropriately

The standards of conduct, performance and ethics say:

*2.10 You must use media sharing networks and social networking sites responsibly.*

When using social media, you should apply the same standards as you would when communicating in other ways. You must always be polite and respectful to others when communicating in a professional capacity

*2.11 You must make reasonable checks to ensure information is accurate, true, does not mislead the public and is in line with your duty to promote public health when sharing information on media sharing networks and social networking sites.*

When using social media, think about the accuracy and truth of the content that you share or circulate. Check that the information originates from people and/or organisations that are trustworthy and does not contradict government public health messages.

*2.12 You must use media sharing networks and social networking sites appropriately and responsibly, maintaining professional boundaries at all times and protecting service user/carer privacy.*

You must also be careful that the information you share on social media does not reveal personal information about service users and/or their carers. Use your professional judgement in deciding whether to post or share something. Remember that comments or posts may be taken out of context or made visible to a wider audience than originally intended.

### Respect confidentiality

Our standards of conduct, performance and ethics say:

5.1 You must treat information about service users as confidential.

When you post information about another person on social media, think about whether it is appropriate to share that information. If the information could allow a service user to be identified, you must not put it on a site without their permission. This information could

include details about their personal life, health or circumstances, or images relating to their care. This applies whether you are sharing information to your personal connections or to the public.

### Be honest and trustworthy

Our standards of conduct, performance and ethics say:

*9.1 You must make sure that your conduct justifies the public's trust and confidence in you and your profession.*

This means you need to think carefully about what you share online. Throughout your use of social media make sure that what you share does not bring your professional practice or your profession into disrepute. When using either a professional or personal account, your conduct should continue to respect service users, their carers and/or your colleagues and maintain fair access to services for all.

Our standards of conduct, performance and ethics say:

*9.3 You must make take reasonable steps to make sure that any promotional activities you are involved in are accurate and are not likely to mislead.*

If you use social media to advertise or share information related to your professional practice, you must make sure it is fair and true, by making reasonable checks to verify it. You may choose to include a disclaimer on your profile that your views are your own, and that they do not represent the views of your employer or anyone who contracts your services.

## Section 2: Top tips

The following are some top tips for using social media in a way which meets our standards. You can find information about how to put these into practice in the next section of this document.

- **Think before you post.** Assume that what you post could be shared and read by anyone.
- **Think about who can see what you share** and manage your privacy settings accordingly.
- Remember that privacy settings **cannot guarantee** that something you post will not be publicly visible.
- Make **reasonable checks to ensure that information is true and accurate.** You should be aware of government public health messaging and ensure that any views you express about it are evidenced-based, responsible, and professional.
- Think carefully about **who you link to, associate with, acknowledge or endorse/support** online.
- Maintain **appropriate professional boundaries** if you communicate with colleagues, service users or carers on social media.
- **Do not post information which could identify a service user and/or their carer.**

- If you are employed, **follow your employer’s social media policy.**
- **Do not post discriminatory or offensive material.**
- Use **your professional judgement** in deciding whether to post or share something.
- When in doubt, **get advice.** Appropriate sources might include experienced colleagues, trade unions and professional bodies. If you think something could be inappropriate or offensive, do not post it. You can also contact us for further information about the standards.
- **Remember that the professional standards expected of you do not change just because you are communicating on social media.**
- **Keep on posting!** We know that many registrants find using social media beneficial and do so without any issues

### Section 3: More information

You can contact us if you have any questions about this guidance or our standards. However, we cannot offer legal advice. Our contact details are below.

The Health and Care Professions Council  
 Park House  
 184 Kennington Park Road  
 London  
 SE11 4BU

Phone: +44 (0)300 500 6184

You can download copies of our standards documents and other publications from our website at [www.hcpc-uk.org](http://www.hcpc-uk.org)

#### Other sources of guidance

We recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes guidance and advice about good practice which can help you meet the standards that we set.

To request this document in Welsh or an alternative format, email [publications@hcpc-uk.org](mailto:publications@hcpc-uk.org).

## Appendix F: Standards of conduct, performance and ethics EIA

### Equality Impact Assessment (Level 2)

#### Section 1: Project overview

<b>Project title: Standards of conduct, performance and ethics</b>	
<b>Name of assessor: Rosemary Flowers-Wanjie</b>	<b>Version: 1</b>

#### **What are the intended outcomes of this work?**

To make any necessary updates to the current Standards that reflect changes within health and care practice.

To ensure that the current Standards are fit for practice, particularly taking accessibility and relevance into account.

To gain insight into how we can better communicate the Standards and promote them to ensure they are fully understood by registrants.

#### **Who will be affected?**

Once any changes to the standards are implemented:

- registrants will have to meet the new standards.
- education and training providers will need to revise their programmes in line with any revisions to the standards.
- prospective students for approved programmes may see changes to their curriculum in line with the revisions to the standards.
- international applicants will have to demonstrate they meet these standards when applying to join the Register.
- employers will need to be aware of the revisions to understand what HCPC registrants will be required to know, do and understand at the point at which they join the Register.
- HCPC employees and partners will need to be aware of the revised standards, such as when considering applications to join the Register or approving education and training programmes.

#### Section 2: Evidence and Engagement

Lack of data should not prevent a thorough EIA. Be proactive in seeking the information you need.

#### **What evidence have you considered towards this impact assessment?**

1. The HCPC registrant database has provided us with information regarding the protected characteristics of our registrant population.<sup>1</sup>

<sup>1</sup> [Diversity Data Report 2021 | \(hcpc-uk.org\)](https://www.hcpc-uk.org/diversity-data-report-2021)

2. We held workshops (1 – 9 September 2022) and an online survey (12 August – 9 September 2022) to external stakeholders – registrants, students, professional bodies, trade unions, employers, education providers, services users and the public – has provided us with information regarding how the Standards are used and understood in practice.
3. We sought guidance from the HCPC EDI Forum. Members of the Forum are external stakeholders with expertise in EDI and lived experience. Membership includes registrants and EDI professionals in relevant stakeholder organisations. We will also seek feedback from patients and service users through the consultation period.
4. We sought feedback from the HCPC Professional Bodies Quarterly Forum and through our regular engagement with other health and care regulators.
5. Internal discussions with the HCPC Council and other committees have informed these proposals.
6. We sought legal review of the draft revised standards and have applied their recommendations.

### **How have you engaged stakeholders in gathering or analysing this evidence?**

There are three stages of our stakeholder engagement: pre-consultation; consultation and post consultation and implementation.

- a. The external stakeholder groups targeted by our engagement include:
  - Professional bodies
  - Education Providers
  - Trade Unions
  - Employers
  - EDI Forum
  - Service users and Patient Interest Groups
  - HCPC Partners
  - Students
- b. External stakeholder activities include:
  - Presentation to professional bodies quarterly meeting in June 2022
  - Pre-consultation workshops with each identified stakeholder group 1 – 7 September 2022.
  - An online pre consultation survey for external stakeholders ran from 21 August 2022 – September 2022 and gather information regarding the understanding of the Standards and any concerns that stakeholders wish to raise.
- c. We will carry out a 12-week consultation that will include a draft of new Standards based on analysis following our engagement with stakeholders

and internal discussions. The consultation will ask respondents to reflect on how the draft Standards will impact the service they receive/provide. It will also ask respondents to reflect upon sustainability, in anticipation of health and care professions being more environmentally accountable.

The consultation will specifically ask for additional information about the potential positive or negative equality impacts of these proposals and for information about potential mitigations to any identified negative impacts on those with protected characteristics.

- d. We will hold external stakeholder workshops throughout the consultation period. These will be thematic with the intention of enhancing understanding of the proposals and increasing engagement.
- e. We will continue to seek feedback on our proposals from the HCPC's Equality, Diversity and Inclusion (EDI) Forum. We will also seek feedback from patients and service users.
- f. Proposals have been discussed with HCPC committees and Council.

### Section 3: Analysis by equality group

The Equality and Human Rights Commission offers information on the protected characteristics.

Describe any impact to groups or individuals with the protected characteristics listed below that might result from the proposed project. Draw upon evidence where relevant.

For all characteristics, consider **discrimination, victimisation, harassment and equality of opportunity** as well as issues highlighted in the guidance text.

#### **Age** (includes children, young people and older people)

We anticipate that service users who are vulnerable, which may include children, young people and older people, are likely to be positively impacted by our proposals. We have proposed updates to Standards 1.8, 1.9 and 1.10 regarding professional boundaries.

Children and younger or older people who are vulnerable, may be more susceptible to inappropriate relationships. These proposed changes highlight registrant responsibilities towards their service users and require registrants to be aware of the potential impact of their position on service users, to take an active role in maintaining professional boundaries, and to not leverage their position to pursue personal, financial, sexual or emotional relationships with service users and/or carers.

Proposed changes to Standard 2.8 and 2.9 on social media may also positively impact young adults and children. The proposed changes require registrants to make reasonable checks on the information they share to ensure it is accurate and trustworthy. With these changes, we hope to better protect those who are more vulnerable to misinformation and inappropriate content shared on social media applications from harm.



Our proposal to produce further supporting documentation to the Standards is likely to positively impact students and younger registrants at the beginning of their careers. Many of these materials will be produced to enhance understanding about how to apply the Standards in practice and will be accessible to education providers for their use.

There will be a period in which education providers are implementing the new Standards in their curriculums and teaching materials. Without careful planning, this could negatively impact students in cohorts either side of the implementation timeframe (2023/24).

**Disability** (includes physical and mental health conditions. Remember ‘invisible disabilities’)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate that our proposals will positively impact those with disabilities, including service users and registrants, by better protecting against discrimination for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their values, biases and beliefs, and to take action to ensure these do not lead to discrimination against service users, their carers and/or colleagues.
- People with disabilities may be vulnerable to inappropriate relationships with registrants. We have proposed updates to Standards 1.8, 1.9 and 1.10 regarding professional boundaries. These proposed changes highlight registrant responsibilities towards their service users and require registrants to be aware of the potential impact of their position on service users, to take an active role in maintaining professional boundaries, and to not leverage their position to pursue personal, sexual or emotional relationships with service users and/or carers. With these changes, registrant responsibilities are clear.

We have proposed simplification of Standard 6.3 regarding maintaining one’s health to relate to a registrant’s fitness to practise more clearly. This is particularly relevant to registrants with disabilities and registrants who develop a disability during their practice. It makes clear to registrants when to perform a health and character risk assessment and when to refer themselves to the HCPC.

The changes that we have made to Standard 6.3 are balanced with our duty to protect public safety. Consequently, there are occasions where registrants with disabilities or health conditions may need to adjust their practice or stop practicing if their disability or health condition puts public safety at risk.

Our proposal to produce further supporting documentation to the Standards is likely to positively impact people with disabilities that impact their comprehension of complex material. Many of these materials will be produced to enhance understanding about how to apply the Standards in practice and provide accessibility to the standards in different formats.

**Gender reassignment** (consider that individuals at different stages of transition may have different needs)

People undergoing or preparing to undergo gender reassignment could be at risk of discriminatory actions, microaggressions or actions which hinder their access to service.

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate our proposals will positively impact people with these protected characteristics for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues. Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.
- In terms of gender reassignment, this means that where necessary, registrants must take action to respect people undergoing gender reassignment. This includes using service users', carers' or colleagues' chosen pro-nouns.

People with this protected characteristic may be harmed by breaches in privacy or the spread of misinformation. We anticipate that proposed changes to Standard 2.8 and 2.9 on social media are likely to positively impact people undergoing or preparing to undergo gender reassignment for the following reasons.

- The proposed changes require registrants to make reasonable checks on the information they share to ensure it is accurate and trustworthy.
- They explicitly require registrants to protect the privacy of others when posting on social media.

**Marriage and civil partnerships** (includes same-sex unions)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate that our proposals will better ensure that people in marriages and civil partnerships are treated equally for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.

The proposed changes we have made to Standard 1.10 are anticipated to positively impact registrants and service users in marriages or civil partnerships. The new standard requires registrants to maintain professional boundaries with colleagues as well as service users and/or their carers and colleagues. Moreover, registrants must take action to ensure that any spouse who accesses their services is treated the same as other service users.

**Pregnancy and maternity** (includes people who are pregnant, expecting a baby, up to 26 weeks post-natal or are breastfeeding)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. People who are pregnant, expecting a baby, who have recently had a baby or who are breast feeding may experience discriminatory actions of microaggressions. We anticipate that our proposals will positively impact those with this protected characteristic by better protecting against discrimination for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.
- Where necessary, registrants must take action to adjust their service to accommodate the needs of someone who is pregnant, expecting a baby, post-natal or breast-feeding.
- Registrants must not restrict access to their services based on a person being pregnant, expecting a baby, being post-natal or breast-feeding.
- The changes proposed also ensure that registrants must not hinder colleagues who are pregnant, expecting a baby, post-natal or breast-feeding from meeting their own needs at work.

Proposed changes to Standard 2.8 and 2.9 on social media are anticipated to positively impact people who are pregnant, expecting a baby, post-natal or breast-feeding. The proposed changes require registrants to protect the privacy of others when posting on social media.

**Race** (includes nationality, citizenship, ethnic or national origins)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate our proposals will positively impact those with racialised identities by better protecting against discrimination for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.
- In respect to race, this will ensure that where necessary, registrants must take action to adjust their service to accommodate other people's cultural and language requirements.
- Registrants must not hinder colleagues from practicing their culture at work.
- Registrants must not restrict access to their services based on cultural practices, race, citizenship, ethnic or national origins or nationality.

**Religion or belief** (includes religious and philosophical beliefs, including lack of belief)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate our proposals will positively impact people's choice to hold religious belief or retain a lack of belief by better protecting against discrimination for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.
- In respect to religion and belief, this will ensure that where necessary, registrants must take action to adjust their service for those who practice religious beliefs.

Registrants must not hinder colleagues from practicing their beliefs at work. It also ensures that registrants must not restrict access to their services based on belief or lifestyle choice. With these changes, people are less at risk of discriminatory actions based on the religious beliefs they hold or if they do not hold any religious belief. They are also less likely to experience microaggressions. For service users, their access to services is less likely to be hindered because of discrimination.

**Sex** (includes men and women)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. Our proposals will positively impact people by better protecting against discrimination.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.
- In respect to sex, this will ensure that where necessary, registrants must take action to adjust their service for those who have different requirements based on their sex.
- Registrants must not treat colleagues differently based on their sex or restrict access to their services based on a service user's or their carer's sex.

**Sexual orientation** (includes heterosexual, lesbian, gay, bi-sexual, queer and other orientations)

We have proposed changes that clarify our Standards 1.5, 1.6, and 1.7, relating to discrimination. We anticipate our proposals will better ensure that people of all sexual orientations are treated equally for the following reasons.

- The proposed changes use more active language that requires registrants to be aware of the potential impact of their views, biases and beliefs on service users, carers and colleagues.
- Registrants must take action to ensure their own views, biases and beliefs do not lead to discrimination against service users, carers and colleagues.

Proposed changes to Standard 2.8 and 2.9 on social media are anticipated to positively impact people who do not wish their sexual orientation to be disclosed to others. The proposed changes require registrants to protect the privacy of others when posting on social media.

#### **Other identified groups**

There is a lack of HCPC data relating to registrants' socio-economic group and income. This creates challenges in the assessment of registrants experiencing disadvantage or barriers to access based on socio-economic group or income. Furthermore, socio-economic group and income were not areas of concern raised during our pre-consultation stakeholder engagement. We therefore have not included this in our review of the Standards.

#### **Four countries diversity**

It is not expected that the changes proposed will impact any one of the four countries differently.

### **Section 4: Welsh Language Scheme**

#### **How might this project engage our commitments under the Welsh Language Scheme?**

Our new Standards, along with the commentary and consultation documents, will be available in Welsh upon request.

### **Section 5: Summary of Analysis**

#### **What is the overall impact of this work?**

We anticipate the proposed changes to the Standards to have an overall positive impact on people's protected characteristics and their experience of health and care professionals. Our changes to standards 1.5, 1.6 and 1.7 ensure that registrants must be active in ensuring their behaviour is anti-discriminatory.

Our changes to Standards 1.8, 1.9 and 1.10 ensure that registrants understand that they must actively maintain professional boundaries. This is anticipated to positively impact children, young and older people who are vulnerable and people with a disability. Our proposed changes aimed to strengthen our approach to social media ensuring that registrants must make reasonable checks on the information that they are posting, actively maintain professional boundaries and respect the privacy of others. This ensures that registrants understand their role in tackling misinformation relating to protected characteristics such as race, disability and gender reassignment.

There is also the potential that registrants with disabilities, such as people who are neurodivergent or who have comprehension challenges, and students who may be less familiar with HCPC and our Standards may find it challenging to digest the changes proposed. Activities that will help to lessen this impact include two working groups for the Standards focused on equality diversity and inclusion and accessibility and targeted engagement post-consultation through workshops.

## Section 6: Action plan

Summarise the key actions required to improve the project plan based on any gaps, challenges and opportunities you have identified through this assessment.

Include information about how you will monitor any impact on equality, diversity and inclusion.

### Summary of action plan

Throughout the pre-consultation, consultation and post-consultation period of the review, we will engage with a diverse range of stakeholders. We have engaged with the HCPC EDI Forum to ensure that EDI issues relating to the Standards are raised and mitigated promptly. We will continue to engage with this group throughout the consultation period and post-consultation. Their input will be particularly helpful to plan the implementation of the proposed changes and to ensure this is done so fairly across protected characteristics and nationally.

Our implementation plan will be especially important and will consider how the new changes are communicated to our external stakeholder groups. We have identified some groups that will need targeted engagement communicating the changes to the Standards.

Moreover, we plan to create two working groups for the final draft of the Standards. Each group will be specifically made up of people from disadvantaged groups such as registrants with disabilities, people with under-represented ethnicities and nationalities, and people from different cultural backgrounds.

The purpose of the first group will be to read through and assess the Standards and provide feedback on the impact of the Standards on equality diversity and inclusion in health and care. We will make final changes based on their recommendations.

During our pre-consultation work, external stakeholders were keen to see more explanatory material for the Standards developed. The second working group will review the accessibility of the Standards and design explanatory material.

Below, explain how the action plan you have formed meets our public sector equality duty.

### How will the project eliminate discrimination, harassment and victimisation?

The action plan ensures that we engage with a diverse group of people with under-represented protected characteristics or who are at risk of being negatively impacted by the changes made. This engagement will help us to develop accessible and fair Standards.

It also ensures that we plan our implementation of the new revised standards appropriately and in a way that does not disadvantage any group based on a protected characteristic. This will help us to maintain a register of fully informed registrants who follow and apply our Standards.

The changes made are intended to help to tackle discrimination, harassment and victimisation in health and care through active engagement with these issues. By

implementing an action plan that ensures all external stakeholder groups understand the changes made, we are ensuring that all service users have access to health and care services in a safe and inclusive environment.

**How will the project advance equality of opportunity?**

The action plan includes the development of explanatory materials through a diverse working group. This provides the opportunity to read and digest the Standards in a way that is suitable to a variety of needs.

**How will the project promote good relations between groups?**

The plan includes a wide range of internal and external stakeholder activities. Throughout all these activities, stakeholder groups will be brought together to discuss and collaborate on specific issues. For example, workshops during consultation on the thematic areas of the changes made to the Standards.

Furthermore, we will publish a review of our engagement to ensure that stakeholders know where the changes that we have made originated and understand other stakeholder groups' perspectives better.

## Appendix G: Guidance on social media EIA

### Equality Impact Assessment (Level 2)

For background information on how to complete this form, read **Appendix 2**. Delete **guidance text** as you complete the form. Guidance text is suggested (not required) content.

#### Section 1: Project overview

<b>Project title: Guidance on social media review</b>	
<b>Name of assessor: Rosemary Flowers-Wanjie</b>	<b>Version: 1</b>

#### What are the intended outcomes of this work?

The review is intended to:

- make any necessary updates to the current guidance that reflect changes within health and care practice and how health and care professionals use social media.
- ensure that the current guidance is fit for practice, particularly taking accessibility and relevance into account.
- gain insight into how we can better communicate the guidance and promote good use of social media by health and care professionals.

#### Who will be affected?

Once any changes to the standards are implemented:

- the guidance will be available for registrants to better their understanding of our standards and appropriate ways to use social media.
- prospective students for approved programmes may use the guidance to inform their studies and prepare them for practice.
- employers will need to be aware of the revisions to understand what is expected of HCPC registrants using social media.
- HCPC employees and partners will be able to use the guidance to help inform their work for example, when following fitness to practice procedures.

#### Section 2: Evidence and Engagement

Lack of data should not prevent a thorough EIA. Be proactive in seeking the information you need.

#### What evidence have you considered towards this impact assessment?

7. The HCPC registrant database has provided us with information regarding the protected characteristics of our registrant population.<sup>2</sup>
8. We held workshops (1 – 9 September 2022) and an online survey (12 August – 9 September 2022) to external stakeholders – registrants, students, professional bodies, trade unions, employers, education providers, services users and the

<sup>2</sup> [Diversity Data Report 2021 | \(hcpc-uk.org\)](https://www.hcpc-uk.org/diversity-data-report-2021)



public – has provided us with information regarding how the Standards are used and understood in practice.

9. We sought guidance from the HCPC EDI Forum. Members of the Forum are external stakeholders with expertise in EDI and lived experience. Membership includes registrants and EDI professionals in relevant stakeholder organisations. We will also seek feedback from patients and service users
10. We sought feedback from the HCPC Professional Bodies Quarterly Forum and through our regular engagement with other health and care regulators.
11. Internal discussions with the HCPC Council and other committees have informed these proposals.
12. We sought legal review of the previous guidance and have applied their recommendations to the proposed guidance.

### **How have you engaged stakeholders in gathering or analysing this evidence?**

- There are three stages of our stakeholder engagement: pre-consultation; consultation and post consultation and implementation.
  - The external stakeholder groups targeted by our engagement include:
    - Professional bodies
    - Education Providers
    - Trade Unions
    - Employers
    - EDI Forum
    - Service users and Patient Interest Groups
    - HCPC Partners
    - Students
  - External stakeholder activities include:
    - Presentation to professional bodies quarterly meeting in June 2022
    - Pre-consultation workshops with each identified stakeholder group 1-7 September 2022.
    - An online pre consultation survey for external stakeholders ran from 21 August 2022 – September 2022 and gather information regarding the understanding of the Standards and any concerns that stakeholders wish to raise.
  - We will carry out a 12-week consultation that will include a draft of the proposed guidance based on analysis following our engagement with stakeholders and internal discussions. The consultation will ask respondents to reflect on how the proposed guidance will support their use of social media.

The consultation will specifically ask for additional information about the potential positive or negative equality impacts of these proposals and for information about potential mitigations to any identified negative impacts on protected characteristics.

- We will hold external stakeholder workshops throughout the consultation period. These will be thematic with the intention of enhancing understanding of the proposals and increasing engagement.
- We will continue to seek feedback on our proposals from the HCPC's Equality, Diversity and Inclusion (EDI) Forum. We will also seek feedback from patients and service users.
- Proposals have been discussed with HCPC committees and Council.

### Section 3: Analysis by equality group

The Equality and Human Rights Commission offers information on the [protected characteristics](#).

Describe any impact to groups or individuals with the protected characteristics listed below that might result from the proposed project. Draw upon evidence where relevant.

For all characteristics, consider **discrimination, victimisation, harassment and equality of opportunity** as well as issues highlighted in the guidance text.

#### **Age** (includes children, young people and older people)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

Children and young people and older people who are vulnerable are at risk to the spread of misinformation. The proposed changes we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true. We anticipate that these changes will have a positive impact on service users who are children and young people and older people who are vulnerable.

We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account. This is especially important for vulnerable service users who may be more at risk if their personal information is shared online.

Our proposed changes to guidance relating to Standard 1.9 are anticipated to have a positive impact on service users who are more vulnerable to inappropriate online relationships. The proposed changes we have made explain that registrants should take an active role in maintaining professional boundaries when online and make registrant responsibilities clearer.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their age. The changes proposed ensure that registrants

understand that their personal views shared on social media should not lead to the restriction of services for others.

**Disability** (includes physical and mental health conditions. Remember ‘invisible disabilities’)

Our proposed changes to the guidance are anticipated to positively impact registrants with disabilities by improving the accessibility of the Standards. Furthermore, we intend to engage registrants with disabilities to assess the guidance and provide feedback to ensure it is accessible to a diverse group of people with various reading abilities.

We have made specific changes to make the guidance easier to follow and understand. For example, we have changed the structure of the guidance to make the primary purpose of the document clearer. We have also simplified the “About the Standards” section to only refer to the standards and their purpose. We have also added links throughout the document to help readers find further information more easily.

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

People with disabilities are at risk of being harmed through misinformation concerning their or other’s disabilities. The proposed changes we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true. We anticipate that these changes will have a positive impact on people with disabilities.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their disability. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

**Gender reassignment** (consider that individuals at different stages of transition may have different needs)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

Service users who are undergoing gender reassignment are at risk of being harmed through misinformation concerning gender reassignment. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true. We therefore anticipate that these changes will have a positive impact on service users who are undergoing gender reassignment.

People undergoing gender reassignment may be at risk of harm if their personal information is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a

personal or professional account. We anticipate that these changes will have a positive impact on service users who are undergoing gender reassignment.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their gender reassignment. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

**Marriage and civil partnerships** (includes same-sex unions)

People whose personal information has changed because of marriage or civil partnership, may be at risk of harm if this is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their sexual orientation or marital status. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

**Pregnancy and maternity** (includes people who are pregnant, expecting a baby, up to 26 weeks post-natal or are breastfeeding)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

Service users who are pregnant, expecting a baby or breastfeeding are at risk of being harmed through misinformation concerning pregnancy and breastfeeding. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true. We therefore anticipate that these changes will have a positive impact on service users who are who are pregnant, expecting a baby or breastfeeding.

People whose personal information has changed because of pregnancy or maternity, may be at risk of harm if this is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account. We anticipate that these changes will have a positive impact on service users who are pregnant, expecting a baby or breastfeeding.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on pregnancy or maternity. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

**Race** (includes nationality, citizenship, ethnic or national origins)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

People are at risk of misinformation spreading in relation to nationality, citizenship, ethnic or national origins being popularised. This may put people of those nationalities, citizenships, ethnicities or national origins at risk of harm from others. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their religion or belief. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

**Religion or belief** (includes religious and philosophical beliefs, including lack of belief)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

People are at risk of misinformation spreading in relation to religious practices and beliefs. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true.

People may be at risk of harm if their religion or belief is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account. We anticipate these changes to have a positive impact on people who would be at risk of harm if their religion or belief were shared online.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their nationality, citizenship, ethnic or national origin. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

Furthermore, the changes that we have made to the guidance relating to Standard 1.6 better reflect the limits of HCPC's interest in registrant social media posts. This will ensure that registrants who share their personal beliefs online are able to do so freely within the limits of the law.

**Sex** (includes men and women)

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their sex. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the

restriction of services for others. The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

People are at risk of being harmed through misinformation concerning sex becoming popularised. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true.

**Sexual orientation** (includes heterosexual, lesbian, gay, bi-sexual, queer and other orientations)

The spread of misinformation online, especially relating to health and care, was a common theme and concern throughout our stakeholder workshops. We have therefore proposed updates to the guidance on Standard 2.8 to tackle misinformation.

People are at risk of being harmed through misinformation concerning sexual orientation becoming popularised. The proposed changes that we have made explain that registrants are responsible for ensuring that the information they post is likely to be accurate and true. We anticipate that these changes will have a positive impact on people's understanding of sexual orientation.

People may be at risk of harm if their sexual orientation is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account. We anticipate these changes to have a positive impact on people who would be at risk of harm if their sexual orientation were shared online.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their sexual orientation. The changes proposed ensure that registrants understand their personal views shared on social media should not lead to the restriction of services for others.

### **Other identified groups**

There is a lack of HCPC data relating to registrants' socio-economic group and income. This creates challenges in the assessment of registrants experiencing disadvantage or barriers to access based on socio-economic group or income. Furthermore, socio-economic group and income were not areas of concern raised during our pre-consultation stakeholder engagement. We therefore have not included this in our review of the guidance on social media.

People may be at risk of harm if their resident status is shared online. We have updated our guidance on Standard 5.1 to clearly state that registrants must think about confidentiality when using either a personal or professional account. We anticipate that these changes to have a positive impact on people who would not want their resident status shared online.

We have proposed changes to the guidance relating to Standard 1.6 to make it clear that registrants should think about the impact of their posts before they share them. This is anticipated to have a positive impact on people who are at risk of discrimination based on their resident status. The changes proposed ensure that

registrants understand their personal views shared on social media should not lead to the restriction of services for others.

#### **Four countries diversity**

It is not expected that the changes proposed will impact any one of the four countries differently.

### **Section 4: Welsh Language Scheme**

#### **How might this project engage our commitments under the Welsh Language Scheme?**

Our revised guidance on social media, along with the commentary and consultation documents, will be available in Welsh upon request.

### **Section 5: Summary of Analysis**

#### **What is the overall impact of this work?**

Our proposed changes aim to strengthen our approach to social media ensuring that registrants better understand the circumstances in which the guidance and our Standards apply to their use of professional and personal use of social media. The changes balance HCPC respects a registrant's right to freedom of expression and our duty to protect the public. By making these changes we are ensuring that registrants are better equipped to use social media in a way that protects people from misinformation, restrictions on their access to health services and discriminatory views and language. This is particularly important for people who are vulnerable, who would be at risk from personal information being disclosed and people who are at risk of discrimination based on their protected characteristics.

There is also the potential that registrants with disabilities, such as people who are neurodivergent or who have comprehension challenges, and students may find it challenging to digest the changes proposed. Activities that will help to lessen this impact include workshops on social media during the consultation and implementation phases of the Standards review.

### **Section 6: Action plan**

Summarise the key actions required to improve the project plan based on any gaps, challenges and opportunities you have identified through this assessment. Include information about how you will monitor any impact on equality, diversity and inclusion.

#### **Summary of action plan**

Throughout the pre-consultation, consultation and post-consultation period of the review, we will engage with a diverse range of stakeholders. We have engaged with the HCPC EDI Forum to ensure that EDI issues relating to social media are raised and mitigated promptly. We will continue to engage with this group throughout the consultation period and post-consultation. Their input will be particularly helpful to plan the implementation of the proposed changes and to ensure this is done fairly across protected characteristics and nationally. Our implementation plan will be especially important and will consider how the new changes are communicated to our external stakeholder groups. During our pre-consultation work, external stakeholders were keen to see more explanatory material for the Standards developed. This guidance sits within HCPC's suite of explanatory materials of the

Standards. They carry out an important function to explain how registrants can apply the Standards to their practise.

Below, explain how the action plan you have formed meets our public sector equality duty.

**How will the project eliminate discrimination, harassment and victimisation?**

The action plan ensures that we engage with a range of stakeholders and target our communications towards those who are at risk of being negatively impacted by the changes made. This engagement will help us to develop accessible and fair guidance.

It also ensures that we plan our implementation of the new revised guidance appropriately and in a way that does not disadvantage any group based on a protected characteristic. This will help us to maintain a register of fully informed registrants who follow and apply our Standards.

The guidance is intended to help to tackle discrimination, harassment and victimisation in health and care through active engagement with these issues. By implementing an action plan that ensures all external stakeholder groups understand the changes made, we are ensuring that all service users have access to health and care services in a safe and inclusive environment.

**How will the project advance equality of opportunity?**

The action plan includes the hosting of workshops on social media. These ensure that there is an opportunity for diverse groups of stakeholders to engage and discuss the new guidance. This will help to lessen the impact of change on those who may find change challenging.

**How will the project promote good relations between groups?**

The plan includes a wide range of internal and external stakeholder activities. Throughout all these activities, stakeholder groups will be brought together to discuss and collaborate on specific issues. For example, workshops during the consultation and implementation phases will specifically discuss the use of social media in the context of the revised guidance.

Furthermore, we will publish a review of our engagement to ensure that stakeholders know where the changes that we have made originated and understand other stakeholder groups' perspectives better.