

ARGYLL & BUTE COUNCIL

Internal Audit Section

INTERNAL AUDIT REPORT

CUSTOMER DEPARTMENT	CUSTOMER SERVICES
AUDIT DESCRIPTION	RISK BASED AUDIT
AUDIT TITLE	REVIEW OF PUBLIC RELATIONS AND MEDIA
AUDIT DATE	FEBRUARY 2015

2014/2015



1. BACKGROUND

A review of Public Relations and Media within the Communications Section of Customer Services has been planned as part of the 2014/15 Internal Audit programme.

Argyll and Bute Council are committed to keeping citizens, communities and stakeholders with an interest in what we do informed about the services we deliver, our progress and performance.

The Council are committed to providing relevant and useful information in the right place, at the right time and in various formats according to the needs of those using the information.

Local and National media are provided with news releases which are also published to the Councils website.

Social media is also being used as a positive tool to promote services and to improve engagement, consultation and communication.

The council approved a corporate Communications Strategy in September 2012.

2. AUDIT SCOPE AND OBJECTIVES

The scope and objectives of the audit are limited to:

- Review and assessment of the Communications Strategy and Action plan including media protocol and practises.
- The use and development of digital technologies in support of the council's Single Outcome Agreement (SOA) targets regarding the council's reputation and its development of digital services.

3. RISKS CONSIDERED

- SRR - Poor image and reputation including negative external scrutiny. The Council fails to maintain its general reputation with residents, the Community and the wider Local Government Community. The reputation of the council is achieved or affected by the actions and contribution of everyone involved in the life of the council. This audit looks at the role of the communications team in supporting a positive reputation.
- ORR - Failure to utilise /promote varying methods of communication both modern and traditional.
- Audit Risk – Failure to communicate relevant information.

4. AUDIT OPINION

The level of assurance given for this report is substantial.

Level of Assurance	Reason for the level of Assurance given
High	Internal Control, Governance and the Management of Risk are at a high standard with only marginal elements of residual risk, which are either being accepted or dealt with.
Substantial	Internal Control, Governance and the Management of Risk have displayed a mixture of little residual risk, but other elements of residual risk that are slightly above an acceptable level and need to be addressed within a reasonable timescale.
Limited	Internal Control, Governance and the Management of Risk are displaying a general trend of unacceptable residual risk and weaknesses must be addressed within a reasonable timescale, with management allocating appropriate resource to the issues.
Very Limited	Internal Control, Governance and the Management of Risk are displaying key weaknesses and extensive residual risk above an acceptable level which must be addressed urgently, with management allocating appropriate resource to the issues.

This framework for internal audit ratings has been developed and agreed with Council management for prioritising internal audit findings according to their relative significance depending on their impact to the process. The individual internal audit findings contained in this report have been discussed and rated with management.

A system of grading audit findings, which have resulted in an action, has been adopted in order that the significance of the findings can be ascertained. Each finding is classified as High, Medium or Low. The definitions of each classification are set out below:-

High - major observations on high level controls and other important internal controls. Significant matters relating to factors critical to the success of the objectives of the system. The weakness may therefore give rise to loss or error;

Medium - observations on less important internal controls, improvements to the efficiency and effectiveness of controls which will assist in meeting the objectives of the system and items which could be significant in the future. The weakness is not necessarily great, but the risk of error would be significantly reduced if it were rectified;

Low - minor recommendations to improve the efficiency and effectiveness of controls, one-off items subsequently corrected. The weakness does not appear to affect the ability of the system to meet its objectives in any significant way.

5. FINDINGS

The following findings were generated by the audit:

Communications Strategy and Action Plan

- The Communications Strategy and associated action plan was agreed by Council in September 2012.
- It was evidenced that the strategy referred to key elements including objectives, principles, roles and responsibilities, actions, measurement and evaluation however it was noted that documentation was not succinct and referred to information in detail contained in other plans. E.g. SOA background.
- It was evidenced that the strategy document contained specific reference to statistics which are now out of date.
- A review of the action plan highlighted 18 out of 33 actions being complete as at 31 March 2014. The remaining actions are areas for continuous improvement and development.
- It was evidenced that an out of hours protocol is in place with roles and responsibilities defined.

Media Protocol and Practises

- It was evidenced that the communication team have a media protocol in place which is included within the Communication strategy and is deemed fit for purpose.
- It was noted that the protocol is available on the website within the committee papers folders, however it was noted this is not readily available to officers.
- The protocol contains guidance on the use of quotes from members and officers. A sample of 20 proactive news releases was analysed to ascertain compliance with the guidance, the guidance was followed in all but 3 cases. The 3 exceptions were stories which contained more than one quote from council members who were clearly co-operating and the public relations benefits outweighed the restriction on dual quotes.
- Informal protocols are in place in relation to named person(s) in respect of proactive and reactive news communication releases however this is not formally documented.
- It was evidenced that all media releases are appropriately approved and recorded on a media tracking system, however, it was noted that guidance is not available in respect of dealing with Media enquiries.

Development of Technologies

- The service Improvement Plan for 2014-15 includes a key improvement to “Establish a digital communication development plan” the plan is under development and on track.
- It was evidenced that the communications team are developing use of available electronic platforms including:
 - The Twitter News feed, which currently has 7514 followers;
 - Argyll and Bute Council Facebook page with 516 likes, and;
 - Weathering the Storm Facebook page which has 5385 likes (figures as at 5 February 2015).

- It was evidenced the communications team jointly working with the web team and customer services have assisted council services with many different developments in communicating and interacting with their customers and stakeholders.
- A Social Media Policy is in place and contains instruction for the inclusion of guidance on all council social media sites; however it was noted that this has not been adhered to on all sites.

6. CONCLUSION

This audit has provided a Substantial level of assurance. There were a number of recommendations for improvement identified as part of the audit and these are set out in Appendix 1 and 2. There is 1 medium recommendation set out in Appendix 1 which will be reported to the Audit Committee. There are 3 low recommendations which are not reported to the Audit Committee. Appendices 1 and 2 set out the action management have agreed to take as a result of the recommendations, the persons responsible for the action and the target date for completion of the action. Progress with implementation of actions will be monitored by Internal Audit and reported to management and the Audit Committee.

Thanks are due to the Communication team staff and management for their co-operation and assistance during the Audit and the preparation of the report and action plan.

APPENDIX 1 ACTION PLAN

Findings	Risk Impact	Rating	Agreed Action	Responsible person agreed implementation date
1. Communications Strategy		High/ Medium or Low		
The Communications Strategy is not succinct and refers to out of date statistics.	Inefficient communications process	Medium	Communications Strategy will be revised and updated.	Communications Manager 31 May 2015

APPENDIX 2 ACTION PLAN

Findings	Risk Impact	Rating	Agreed Action	Responsible person agreed implementation date
1. Media Protocol		High/ Medium or Low		
It was noted that the protocol is available on the website within the committee papers folders, however it was noted this is not readily available to officers.	Failure to comply with protocol.	Low	The Media Protocol will be made available on the Hub	Communications Manager 31 May 2015
2. Documented Procedures				High/ Medium or Low
There are no formal documented procedures in place regarding Media enquiries.	Inconsistent service delivery.	Low	A procedure note will be produced.	Communications Manager 31 May 2015
3. Social Media Guidance				High/ Medium or Low
A Social Media Policy is in place and contains instruction for the inclusion of guidance on all council social media sites; however it was noted this has not been adhered to on all sites.	Failure to comply with operational policy leading to inconsistencies.	Low	The Facebook sites will be updated in line with the policy.	Communications Manager 31 May 2015

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