Glasgow City Council Internal Audit Section Committee Summary Corporate Review – IT Problem Management

1 Introduction

Item 5(d)

29th January 2025

- 1.1 As part of the agreed Internal Audit plan, we have carried out a review of IT Problem Management.
- 1.2 Issues reported to CGI for action via the service desk are managed through their Remedy system.
- 1.3 Incidents where the root cause cannot be easily identified and resolved are categorised as "problems" and are escalated to specialist teams in CGI for further investigation. The Information Systems Audit and Control Association (ISACA) defines a problem as "the unknown underlying cause of one or more incidents". These can vary from high impact, high priority events to low priority recurring incidents.
- 1.4 Schedule 2.6 of the IT contract, relating to Service Management, outlines the conditions that were agreed between the Council and CGI for the management of problem records including the recording, investigation, analysis, resolution and reporting of problems.
- 1.5 The purpose of the audit was to gain assurance that there are adequate controls in place for IT Problem Management across the Council, and that these are operating effectively.
- 1.6 This included a review of:

- The contract (schedule 2.6) as it relates to problem management ensuring that the requirements have been clearly defined and agreed by both parties.
- The management information relating to current problem records, ensuring that problems are prioritised and are being managed in line with the priority assigned.
- The processes in place for monitoring and challenging CGI's compliance with the aspects agreed in the contract, ensuring that these are conducted effectively and on a periodic basis.
- The Council's processes for escalating instances of noncompliance relating to problem management so that these are addressed in a timely and effective manner.

2 Audit Opinion

2.1 Based on the audit work carried out a reasonable level of assurance can be placed upon the control environment. The audit has identified some scope for improvement in the existing arrangements and one recommendation which management should address.

3 Main Findings

- 3.1 We are pleased to report that key controls are in place and generally operating effectively for IT problem management.
- 3.2 The roles and responsibilities involved in the problem management process are clearly defined. A Problem Review Board (PRB) has been developed with representatives from the Council's Strategic Information, Innovation and Technology (SIIT) team and CGI to monitor problems and this meets every two weeks. The caseload is managed by CGI with ongoing communication between SIIT and CGI regarding the opening and closing of problems. The Board also monitor the actions taking place to address the recorded problems.
- 3.3 This is a service delivered by CGI with clear roles and responsibilities and appropriate input from Council staff throughout the process. The SIIT team has the opportunity to input as required (e.g. if they become aware of problems that they believe are not being reported by CGI). A clear escalation route is in place should the need arise to escalate problems within GCC to the Performance and Change Board (PCB), although we have been advised that the use of this has not been required.

- 3.4 A full report of all current problems is prepared by CGI and an update given to each PRB meeting in order for these to be discussed.
- 3.5 However, our audit testing has identified an opportunity for improvement regarding problems which are taking a significant period of time to be resolved. Although the total number of current problems for the periods sampled (June 2024 38 problems and November 2024 29 problems) was low and showing a decreasing trend, of the 38 problems open at June 2024, 17 were still being reported in November. As of November 2024, nine problems had been on the list for more than one year with eight of these remaining at the root cause analysis stage.

3.6 An action plan is provided at section four outlining our observations, risks and recommendations. We have made one recommendation for improvement. The priority of this recommendation is:

Priority	Definition	Total
High	Key controls absent, not being operated as designed or could be improved. Urgent attention required.	0
Medium	Less critically important controls absent, not being operated as designed or could be improved.	1
Low	Lower level controls absent, not being operated as designed or could be improved.	0
Service Improvement	Opportunities for business improvement and/or efficiencies have been identified.	0

- 3.7 The audit has been undertaken in accordance with the Public Sector Internal Audit Standards.
- 3.8 We would like to thank officers involved in this audit for their cooperation and assistance.
- 3.9 It is recommended that the Head of Audit and Inspection submits a further report to Committee on the implementation of the actions contained in the attached Action Plan.

4 Action Plan

No. Observation and Risk Recommendation **Priority Management Response Key Control:** Problems are remediated within a suitable timescale. We acknowledge that some problems are The SIIT team should conduct a review of the Response: Medium aged problems to identify if these can be Accepted.

complex and may require additional resources to address. Also, problems are categorised with a focus on the more critical priority 1 and 2 problems. However, as at November 2024, 9 of the 29 problems listed have been open for more than one year, eight of which were still at the root cause analysis stage. All were low priority except one, which was medium priority.

If problems are not addressed within a suitable timescale, Council Services may not be obtaining optimal solutions for their leading needs to business inefficiencies unsatisfactory and workarounds.

removed (e.g. where satisfactory alternative arrangements are in place). Where legitimate problems remain, the SIIT team should review the process to determine if there is a reason why some cases have not progressed for an extended period of time, particularly those still at the root cause analysis stage.

Since the audit fieldwork, additional meetings of the Problem Review Board have been held to focus on aged problem records. Two of the nine problems referenced have since been closed (one medium and one low priority). Work continues to ensure resolution and closure of the remainder, which are low priority/ low impact matters.

Officer Responsible for Implementation:

Head of Strategic Information, Innovation and Technology

Timescales for Implementation: 31 March 2025