



Internal Audit Report

**IS Service Desk
2012/13
Report ref: C3/6**

Report Issued

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1 Background

- 1.1 This audit is being undertaken as part of the shared annual audit plan for 2012/13.
- 1.2 Internal Audit is an assurance function that provides an independent and objective opinion to the Council on the control environment by evaluating its effectiveness in achieving the Council's objectives. Internal Audit objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources.
- 1.3 The following key control objectives (KCOs) are applicable to the audit:
- KCO1: The Service Desk is the recognised point of contact to manage, co-ordinate and resolve incidents, provide guidance and administer network user access.
 - KCO2: Reported incidents are registered, classified and allocated to relevant technical officers for resolution in a timely manner.
 - KCO3: Reported incidents are controlled, monitored and closed on completion with appropriate user notification.
 - KCO4: A procedure exists for the escalation of incidents.
 - KCO5: Clearance of incidents is monitored to ensure timely completion.
 - KCO6: Trend analysis and reporting is carried out on the performance of the Service Desk.

2 Audit Scope

- 2.1 The testing strategy is outlined below which entailed documentation review and discussion with staff.

KCO	Test
The Service Desk is the recognised point of contact to manage, co-ordinate and resolve incidents, provide guidance and administer network user access.	Ensure that the main functions of the Service Desk are in line with the expected control Determine that actual fault reporting procedure reflects expected procedure Determine the view of the Service Desk from a sample of users
Reported incidents are registered, classified and allocated to relevant technical officers for resolution in a timely manner.	Determine from a sample of 20 reported incidents that actual procedure reflects expected procedure which is in line with the control
Reported incidents are controlled, monitored and closed on completion with appropriate user notification.	Determine for a sample of reported incidents that they are monitored and closed and users are notified when this has happened
A procedure exists for the escalation of incidents.	Determine that a procedure exists for the escalation of incidents that is appropriate and that is followed in practice

Clearance of incidents is monitored to ensure timely completion.	Establish that monitoring is in place for a sample of reported incidents enabling their clearance within pre-defined timescales
Trend analysis and reporting is carried out on the performance of the Service Desk.	Ensure that trend analysis carried out to allow decisions to be made on improving the service

3 Audit Opinion

3.1 A summary of Internal Audit's opinion levels and their definitions is provided below:

Level	Definition
Significant Level of Assurance	The system of internal control is designed to support the Council's corporate and service objectives and controls are consistently applied in all the areas reviewed.
Good Level of Assurance	There is generally a sound system of control designed to support the Council's corporate and service objectives. However, some improvements to the design or application of controls is required.
Partial Level of Assurance	Weaknesses are identified in the design or inconsistent application of controls which put the achievement of some of the Council's corporate and service objectives at risk in the areas reviewed.
No Level of Assurance	There are weaknesses in control, or consistent non-compliance which places corporate and service objectives at risk in the areas reviewed.

3.2 Based on this report's findings, Internal Audit have given a Good Level of Assurance on the Internal Control Framework within the function at the present time. Of the 6 key control areas reviewed, 4 are being fully met; KC's 1, 4, 5 and 6 listed in paragraph 1.3 above. KC's 2 and 3 above are considered to be partly met, the key risks for which are described in section 4 below. Three recommendations have been made in total graded at priority 2.

3.3 Questionnaires were issued by the Auditor to a sample of sixteen users who had raised Service Desk calls during a one month period in 2012/13, ten (63%) of which were returned. Although 100% were happy with the actual response provided, the percentage of those respondents who considered their issue to have been resolved within an adequate timescale was 60%. 40% of the total respondents provided positive comments on the service, whereas 60% provided negative comments; 30% putting forward suggestions for improvement, all of which are detailed at Appendix A

3.4 Since July 2013 the Service Desk has been hosted in house and this has resulted in significant improvements in monitoring and reporting arrangements introduced by the Service desk Manager. These improvements have been assessed by Internal Audit as part of this review.

4 Detailed Findings & Action Plan

The audit findings are detailed in this section on an exception basis only for the attention of management, therefore KCO's with adequate controls are not included.

Recommendations are prioritised as follows:

Priority 1 - These relate to significant gaps in the Internal Control Framework

Priority 2 - These relate to minor gaps in the Internal Control Framework or significant issues of non-compliance with key controls

Priority 3 - These relate to minor issues of non-compliance with controls.

Ref	Findings	Risk	Recommendations and Management Response	Officer Responsible and Implementation Date
KCO2: Reported incidents are registered, classified and allocated to relevant technical officers for resolution in a timely manner				
1.	The documented ICT Support Work Procedures indicate those officers that should be assigning tickets on the system. Sample testing identified 5 tickets that had been assigned by the Apprentice ICT Technical Analyst who was not listed in the procedures as being able to undertake this task. It was later confirmed with the Service Desk Manager that this task is part of this officer's remit.	Any officer assuming this role would be unclear from procedure review as to their responsibilities, potentially causing delay in the call resolution timeframe.	R1: Priority 2 The ICT Support Work Procedures should be updated to accurately reflect those officers who should assign tickets on the system.	ICT Shared Services Manager 15/11/13

Ref	Findings	Risk	Recommendations and Management Response	Officer Responsible and Implementation Date
2.	The Solutions section of the system, enabling a knowledge base to be built up for both users and Technicians is not presently used; the knowledge base for Technicians having been held separately.	No efficiency gains could be achieved in future in terms of learning from past experiences of fault resolution	R2: Priority 2 Use of the system's Solutions section should be explored to enable a knowledge base to be built up	ICT Shared Services Manager 15/11/13
KCO3: Reported incidents are controlled, monitored and closed on completion with appropriate user notification.				
3.	The ICT Technical Analyst/Applications & Development was noted as having the highest number of outstanding calls whilst on leave. It is recognised that this officer's technical skills are unique amongst the team resulting in specific calls being unable to be allocated to any other team member.	Delays in resolving calls, exacerbated if these are urgent in nature	R3: Priority 2 Preferably an additional resource should be found to cover the knowledge gaps incurred during leave periods of the ICT Technical Analyst/Applications & Development. If this proves impractical, consideration should be given to the possibility of the utilisation of contacts established through the North Yorkshire IT Managers group meetings.	ICT Shared Services Manager 15/11/13

The agreed actions will be subject to a follow up review to establish whether they have been implemented as part of the quarterly performance monitoring clinic.

Any queries or requests for further information regarding this report should be directed to Internal Audit on 706360 or on 01423 556116. Internal Audit would like to thank the officers involved for their assistance during this audit.