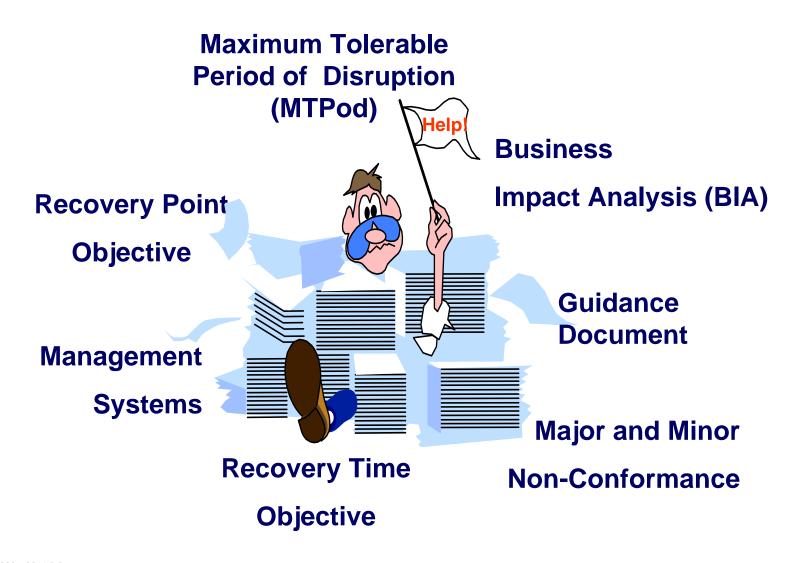


Supply Chains and Small Business





One Aspect of the Small Business Challenge





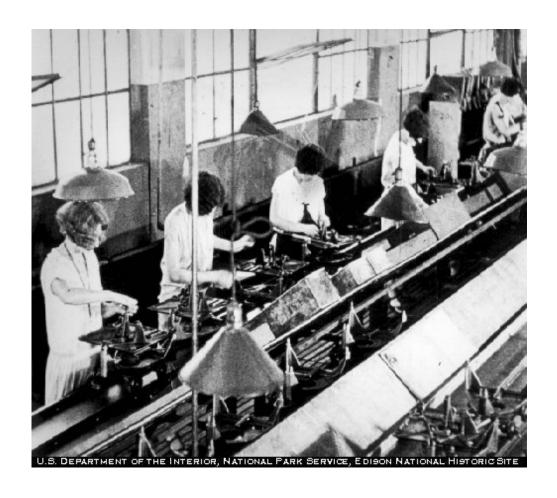
Preparedness - 3rd Wave Imperative





Market-Driven, Process Improvements

- Focus on Cost and Volume
- Theory "X" Management
- Assembly Lines
- Trade Unions
- Wealth came from "raw materials" and production facilities

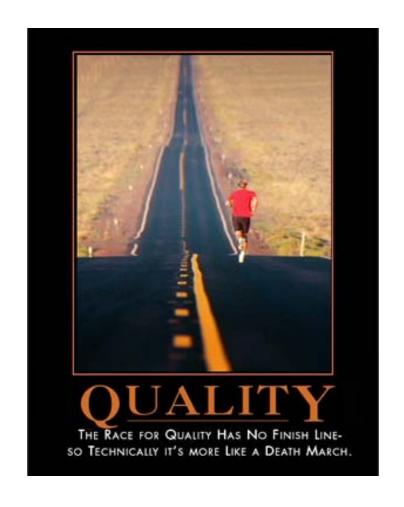




The 2nd Wave Began In 1975

Market-Driven *Product* Improvements

- Cost and Volume is assumed
- Theory "Y" Management
- Quality Circles
- Shift to Low Cost Labor Sites
- Development of Outsourcing
- Wealth comes from Process "Know-How"





Now the 3rd Wave

- In the United States and Europe, supply chains are 4 to 7 layers deep (Farm to Fork)
- Some are dozens deep.





Reliable and Predictable

Can You Be Depended On?

- Cost & Volume is Assumed
- Quality is Assumed
- Regulation is Increasing
- Shift to Reliable Sites













The New Corporate Office - HomeSourcing

A new dimension in the preparedness challenge

According to the Brookings Institute, 15% of the value of an enterprise resides in tangible assets, while 85% rests in intangible assets the largest part of those intangibles being information.





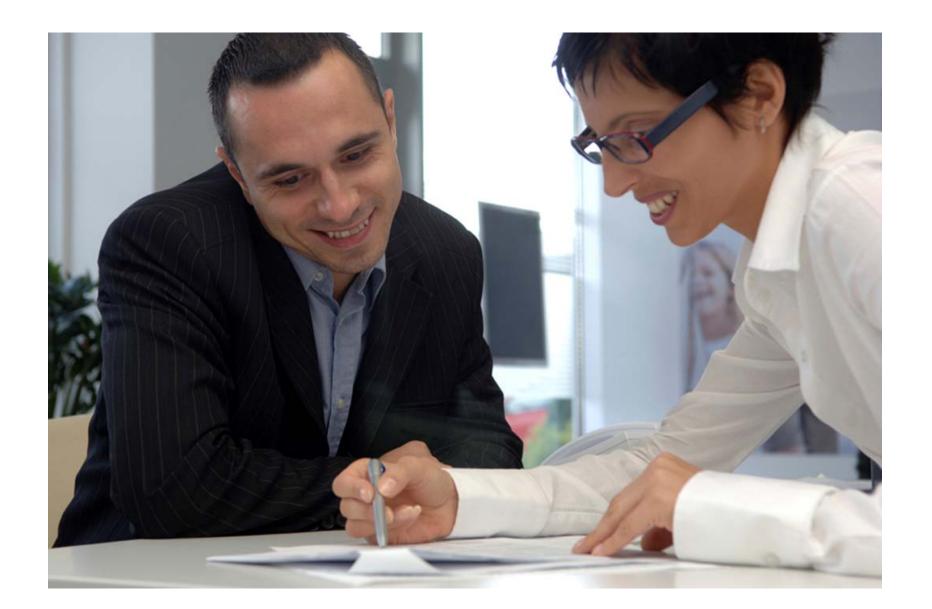
A Stair-step Approach to Preparedness



Focus on education and incremental development



A Mentoring Role: 2nd Party Assessments



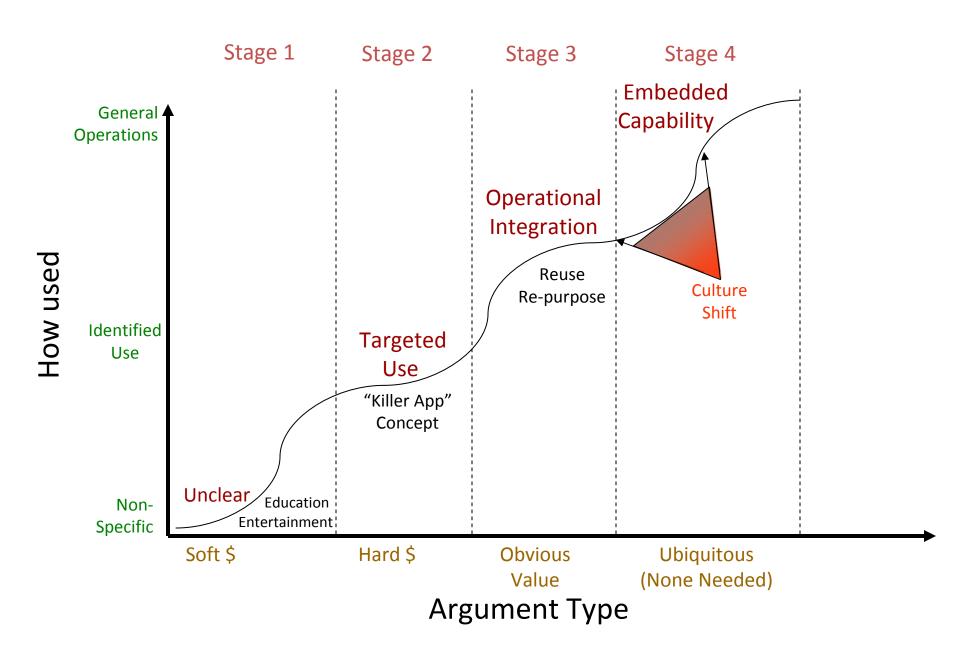


Dealing with Executive Resistance?



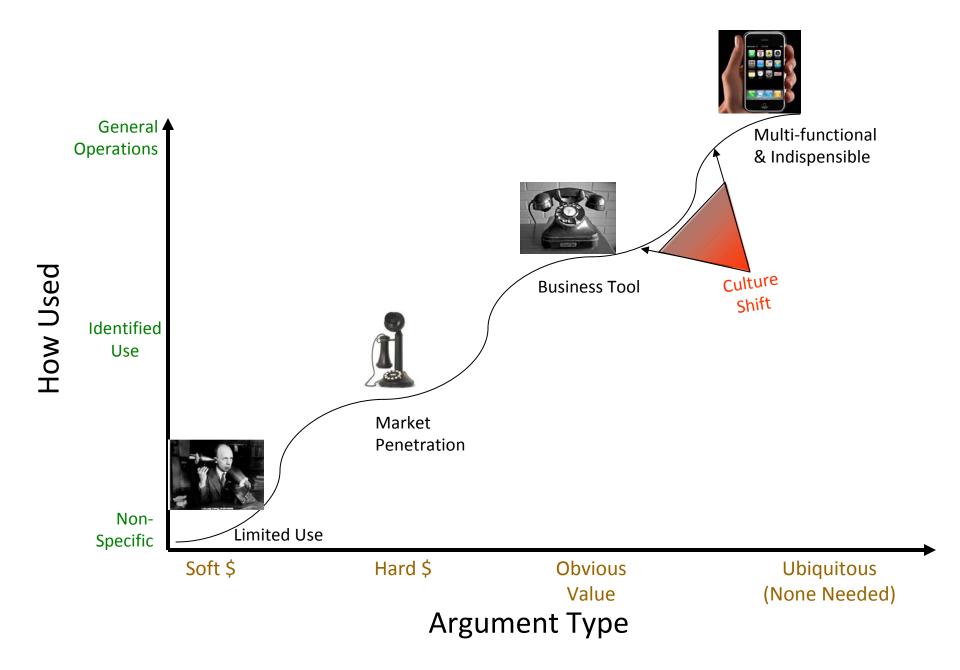


Evolution of Justification Argument - General



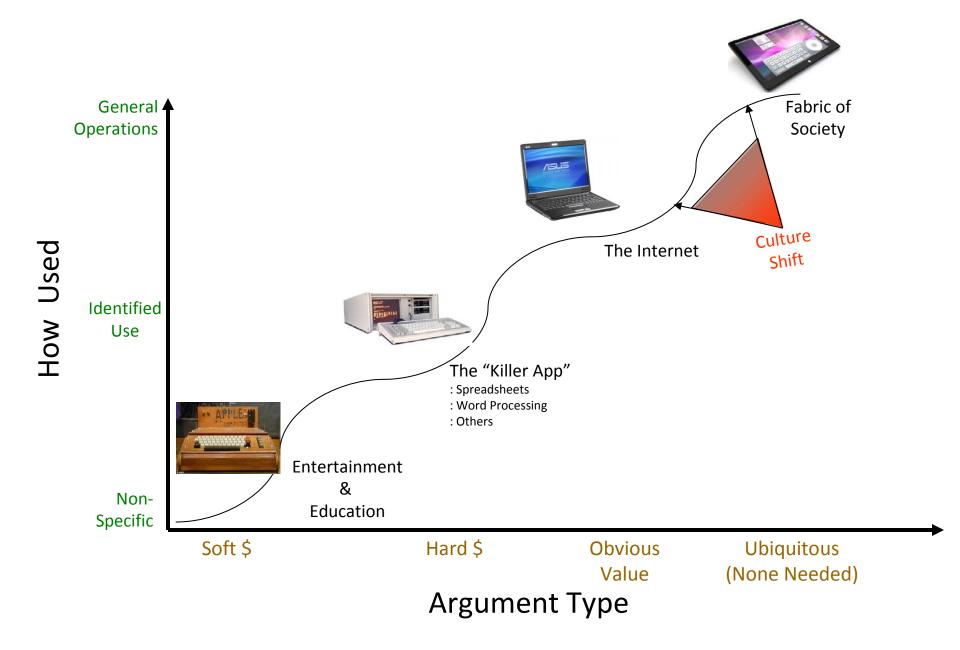


Example 1: The Telephone



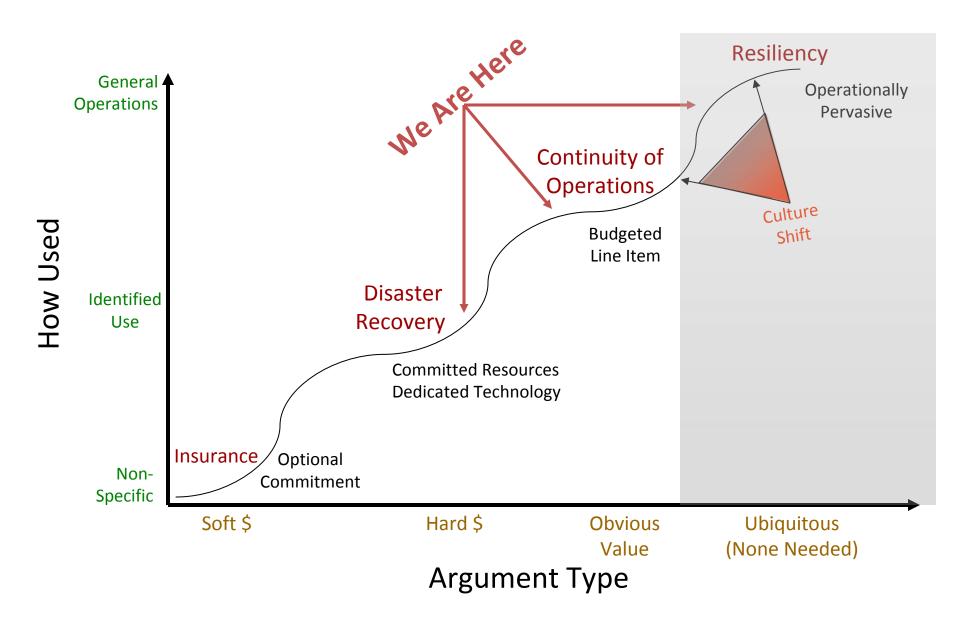


Example 2: The PC





Small and Large Business Preparedness



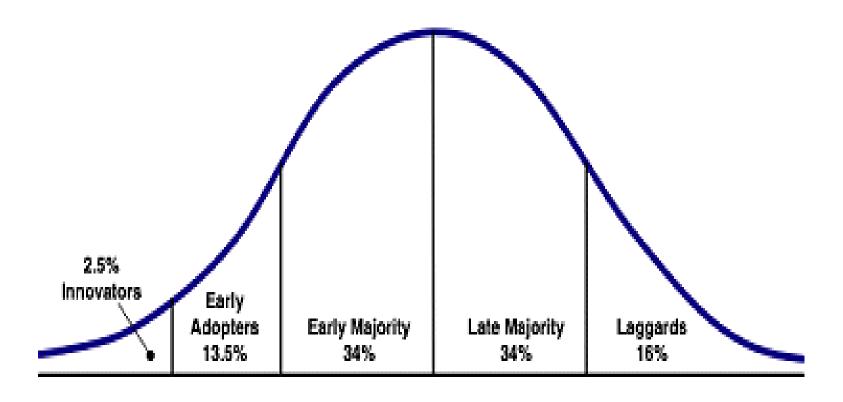


How Soon?

The works of two authors

Malcolm Gladwell: The Tipping Point

Geoffrey A. Moore: Crossing the Chasm





Supply Chain Leads the Way





And Waiting in Line

The Other Arguments

- Governance
- -Valuation
- Compliance
- Risk Management
- Liability
- -Supply Chain



Part of the <u>necessary evolution</u> of Public-Private collaboration and executive acceptance of the value of preparedness



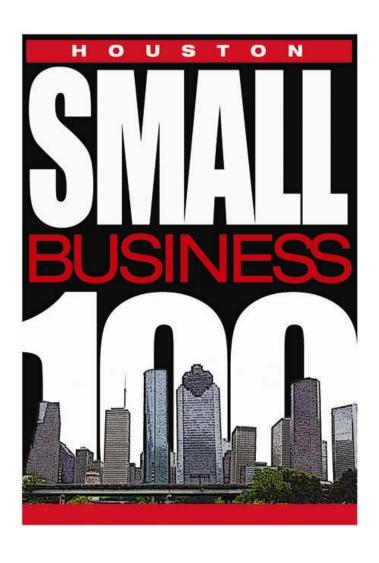


Making Progress, But More to Do!





The Small Business Challenge



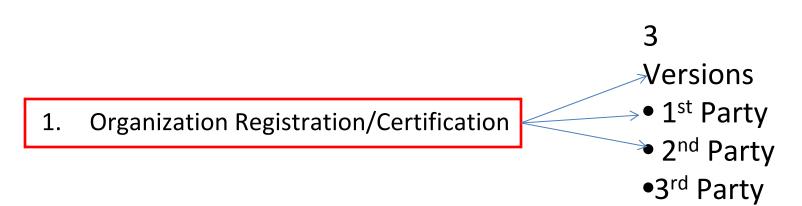


The Mechanics of ISO Auditing





There Are 9 Types of Audits







3rd Party Audits consist of 2 "stages"

- Stage 1: Document Review
- Stage 2: Onsite inspection and discussions. Evidence-based
 - o No claim of statistical significance can be made!
 - o Some standards establish guidelines (ISO 28001)
 - o PS Prep standards *do not* use these guidelines (ANAB decision)
- No consulting can take place!

Audit plan must be submitted in advance and agreed to by both parties. Discusses location, logistics, and process.

Management should be present for the beginning and end as well as for discussion on an "as needed" basis.

Have your paperwork ready. This is *not* covered in a Stage 1



The Audit Process – Stage 1





Stage 2: On-site Audits



- Executive Interviews
- Team discussions
- Survey's
- Record inspections
 - Not Statistical Sampling
- Documentation review
- Training records
- Contracts review
- Observations
- Customer correspondence



Sample Stage 1 Report

Complete the following table of locations to be included in the scope of the audit to organization; DO NOT RELY ON INFORMATION INCLUDED IN THE F-27. Note ist for a dijacent buildings, then these must be listed. Address Description of activities # of empleted and the scope of its business continuity management system (BCMS)? Planning the Business Continuity Management System (BCMS)? CONFORMS NONCONF(Evidence of conformity, nonconfollow-up at Stage 2: Document the scope here: List any exclusions here: Summarize justification for organization identified the key products and services within the scope of its	If distinct addre	sses
BS 25999-2 STAGE 1 AUDIT REPORT Complete the following table of locations to be included in the scope of the audit to organization; DO NOT RELY ON INFORMATION INCLUDED IN THE F-27. Note ist for adjacent buildings, then these must be listed. Address Description of activities # of emp 1 2 3 4 5 Planning the Business Continuity Management System (BCMS)? CONFORMS NONCONFO Evidence of conformity, nonconf follow-up at Stage 2: Document the scope here: List any exclusions here: Summarize justification for organ here: Summarize justification for organ here: CONFORMS NONCONFO	If distinct addre	sses
Complete the following table of locations to be included in the scope of the audit to organization; DO NOT RELY ON INFORMATION INCLUDED IN THE F-27. Note ist for adjacent buildings, then these must be listed. Address Description of activities # of employed and the scope of the	If distinct addre	sses
Address Description of activities # of emp Planning the Business Continuity Management Syste Planning the Business Continuity Management Syste CONFORMS NONCONFORMS NONCONFORMS		ifts
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Planning the Business Continuity Management Syste 2a. Has the organization defined the scope of its business continuity management system (BCMS)? CONFORMS NONCONFORMS NONCONFORMS	n	
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2a. Has the organization defined the scope of its business continuity management system (BCMS)? Evidence of conformity, nonconf follow-up at Stage 2: Document the scope here: List any exclusions here: Summarize justification for organ here: Document the scope of its	n	
BCMS? C. Has the organization set business continuity objectives that reflect consideration of the following: requirements for business continuity, organizational objectives and obligations; acceptable level of risk; statutory, regulatory and contractual duties and interests of its key	mity, or concerning a second of the concerning of the concerning and the concerning and the concerning and the concerning and the concerning are concerning and the concerning are concerning and the concerning are concerning as the	ons ERN ns for ERN
stakeholders? d. Has the organization documented a business continuity management policy that CONFORMS NONCONF()		ERN



Opening and Closing Meetings

This is where the work really begins

Auditors will expect management to be present

They will ask for confirmation of the scope statement

Suggestion:

- Don't volunteer to activities that are out of the plan
- Don't let someone who is not briefed on the protocol, speak!

The auditors will follow a prescribed format



Typical Audit Plan

				- 1	Date: <u>Se</u> ∰ Site Nar	eptember 30, 2008 ne:			
Phone Number: Audit Number: Audit Number: Audit Delegis: Type of Audit: Resistancian, Surveillance #_delegis Lead Auditor: Audit Delegis: Employee Count: Employee Co	Auditee Name:				Time	Process names must mirror those processes used in the Auditoria interaction of Processes. Titles of clauses from the appropriate standard are not acceptable nor are	Likely to be	(Name, title and/or	
Audit Tram:	Phone Number: Management Re Audit Number: Audit Criteria/St	oresentative: andard:			9:VVam	Re-verification of Scope: facilities, employees, services Introduction of PJR audit team and UABCM team Introduction and ground-rules for UKAS witness			
### SICEPANACE Code: ### Audit Objectives: To assess the adequacy, effectiveness and conformance of ### sharper system, by reviewing the extent to which: **The organization conforms with the requirements of the standarditechnical specification, and **The organization conforms with the requirements of the standarditechnical specification, and **The organization conforms with the requirements of the standarditechnical specification, and **The organization conforms with the requirements of the standarditechnical specification, and **The organization conforms with the requirements of the standarditechnical specification, and **The organization is effectively achieving is own objectives . **Insert anny other objectives here!** **Reference Documents: The audit will be conducted in accordance with: **ISO 19011: 2002, Guidelines for quality and/or-environmental, and Cocupational and Safety Management System and Responsible Care **Outstoors** **P. PR-13, AVR **Rejetation Material policy for Coulty Firemomental, and Cocupational and Safety Management System and Responsible Care **Outstoors** **P. PR-13, AVR **Rejetation Material policy for guidelines for quality and/or-environmental, and Cocupational and Safety Management System and Responsible Care **Outstoors** **P. PR-13, AVR **Rejetation Material policy for guidelines for quality and/or-environmental, and Cocupational and Safety Management System and Responsible Care **Outstoors** **P. PR-13, AVR **Rejetation Material policy for guidelines for guality and/or-environmental policy for guidelines for guality and/or-environmental policy for guality and/or-environmental policy for guidelines for guality and/or-environmental policy for guality and/or environmental policy for guality and/or-environmental policy for guality and/or	Audit Date(s): Lead Auditor: Audit Team: Technical Expert Employee Count Number of Shift: Revision of the a	(s): :	days off-site) <u>of</u> 's mana	gement system for	9:30	UA key business processes / products / servicesUA policy and objectivesstatutory/regulatory/contractual dutiesInternal Audt Findings—focus for verificationManagement Reviewopportunity for improvement (action items)preventive and corrective actionsBIA/ Risk Analysis Review		UB/LB	
Reference Documents: The audit will be conducted in accordance with: Iso 19011: 2002, Guidelines for quality and/or environmental systems auditing PJR-4, Handbook for Quality, Environmental, and Cocupational and Safety Management System and Responsible Care © Auditors PJR-11 Audit Matries, Rev Dated	SIC/EA/NACE Co Audit Objectives reviewing the exte • The organ • The organ • The organ • Insert an	ide: : To assessthe adequacy, effectivenes int to which: itation adheres to its own policies and itation conforms with the requirements itation is effectively achieving its own yother objectives here!	ss and conformance of's man procedures, of the standard.technical specificati	agement system, by		Risks, Criticality, Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—links with Toledo Resources Incident response / management plans Exeroising Competency Records / Document Controls	3.3,3.2.4		
## Audit Working Language: Audit Working Language: Audit Reporting Language: Audit Report Reporting Language: Audit Reporting Language: Audit Reporting	Reference Documents	ments: The audit will be conducted in a 1:2002, Guidelines for quality and/ore andbook for Quality, Environmental, am ble Care @ Auditors udit Matribes, Rev. UR Registration Mad/Logo Use Proced y other reference documents here!	rvironmental systems auditing I Occupational and Safety Managen	ment System and		Risks, Criticality, Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—links with Toledo Resources Incident response / management plans Exeroising Competency Records / Document Controls		LB	
Resource Requirements: Please provide a hardcopy of your documentation, a simple lunch on-site, access to photocopy and facsimile equipment, and a private work area for auditor review. Note 1: The times, processes and elements audited are subject to change as conditions warrant. Note 2: Auditors assume all information included on this audit plan is correct, unless notified otherwise by the auditors assume all information included on this audit plan is correct, unless notified otherwise by the auditors and auditors are subject to change as conditions warrant. *h addition to this audit plan, the organization's sequence and interaction of processes a loudder carried by each auditor and	Audit Working L Audit Reporting Matters Related bodies, PJR treat	anguage: Language: to Confidentiality: Except where requ s as strictly confidential any information	red by law, startute or the regulation that comes into its possession durin	s of its accreditation ig pre-audit, audit,		TRADING PROCESS Risks, Criticality, Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—Links with Toledo Resources Incident response / management plans Exercising		DB	_
	Note 1: The time Note 2: Auditors	simile equipment, and a private work a s, processes and elements audited are	rea for auditor review. subject to change as conditions war	тant.	the dase of 2 in additio	longer working hous in a single day cannot be used as a st and thing production on off-shift. to this and it plan, the organization's sequence and interact			·



Audit Plan Continued

	Records / Document Controls			Т
1:15	SCANNING / TELEPHUNY Risks , Criticality , Disruptions/Impact , MTD , RTO	4.1,4.2, 4.3, 4.4, 3.4, 3.3, 3.2.4	LB	-
	Dependencies / Outsourcing—Links with Toledo Resources			
	Incident response / management plans Exercising			
	Competency Records / Document Controls			
4:00	AUDITUR CAUCUSVerification of training records; review of exercise records and BCM arrangements / change controls. Review for Day 2		UB/LB	
4:45	Day 1 Review with UABCM Team			
DAY 2	Uctober 1, 2008			
9:DDam	Armve at site—identify any audit plan changes			
9:15	PROCESSES	4.1,4.2, 4.3, 4.4, 3.4, 3.3, 3.2.4	DB	
	Risks, Criticality, Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—Links with Toledo			
	Resources Incident response / management plans			
	Exercising Competency Records / Document Controls			
9:15	MAIL HANDLING PROCESS	4.1,4.2, 4.3, 4.4, 3.4,	LB	
9.10	Risks , Criticality , Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—Links with Toledo	3.3, 3.2.4	LB	
	Resources Incident response / management plans			
	Exercising Competency			
	Records / Document Controls MARKETING PROCESS			
11:30	Risks , Criticality , Disruptions/Impact , MTD , RTO Dependencies / Outsourcing—Links with Toledo	4.1,4.2, 4.3, 4.4, 3.4, 3.3, 3.2.4	LB	
	ResourcesIncident response / management plansExercising			
	Competency Records / Document Controls			
12:30pm	WORKING LONCH—ADDITOR CAUCUS			
1:15	CLIENT DATABASE & WEB-SITE MANAGEMENT PROCESSES	4.1,4.2, 4.3, 4.4, 3.4, 3.3, 3.2.4	DB	
	Risks, Criticality, Disruptions/Impact, MTD, RTO Dependencies / Outsourcing—Links with Toledo Resources			
	Incident response / management plans			
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	Exercising			
	Competency			
	Records / Document Controls			
1:15	FINANCIAL MANAGEMENT PROCESS	4.1,4.2, 4.3, 4.4, 3.4,	LB	
	Risks, Criticality, Disruptions/Impact, MTD, RTO	3.3, 3.2.4		
	Dependencies / Outsourcing—Links with Toledo			
	Resources			
	Incident response / management plans			
	Exercisina			
	Competency			
	Records / Document Controls			
4	BCMS MUNITURING PROCESS—INTERNAL	4 1 4 1 4 1 4 4 1 4	ļ.,,,	
3:00	AUDIT PROGRAM MANAGEMENT	4.1,4.2, 4.3, 4.4, 3.4, 3.3, 3.2.4	FB	
	plans/schedules			
	procedures			
	auditor competency			
	review of CA/PAdocumentation /procedures			
4:00	AUDITUR CAUCUSVerification of training records			
	and BCM arrangements / change controls.			
4:45	Day 2 Review with UABCM Team			
DAY 3	Uctober 2, 2008			
9:DDam	REVIEW OF INCIDENT RESPONSE STRUCTURE AND VERIFICATION OF CONTINUITY / INCIDENT PLANS	4.3, 4.4, 4.43, 3.43, 3.4.2, 3.2.4	DB/LB	
	resources			
	stakeholder.communication			
	strategies			
	media interface			
10:30	ADDITOR CADCOS, FULLOW-UPTSSUES,		DB/LB	
10.00	REPORT PREPARATION—Pre-Closing Meeting with Auditee		00,00	
12:30pm	CLUSINGMEETING			
1:UUpm	End of AudtLeave Ste			
				1

Revise d: 09/22/06 Translate d: N/A Rev. 1.3 Page 4 of 4

Form # F-184 lss teld: 05/09/06 Effective: 09/22/06



A Typical Audit Module

												(Red)	Major Non Co
	NRS Models			Additional Material		Au	ıdit Performaı	nce	Timeline		eline	(Laven	dor) Minor Non
												 Orange) Observation
												■ (Green) Item docume
RMM riority	12 Areas of Control		NFPA 1600 Standard on Disaster / Emergency Management & Business Continuity Programs	Sample Evidence	Major NonCom	Minor NonCom	Observation	Conforms	N/A or Out of	Ac	ective tion frame	n (Black)	Not applicab
									Scope				
1-5		1-5					-		•	Month	Year		
	1 D				0	0		0	0				
napter	4 - Program Ma	nageme	ent T										
	Governance		441										
		<u> </u>	4.1 Leadership and Commitment	1-	<u> </u>					<u> </u>			
			4.1.1 The entity leadership shall demonstrate commitment to the program prevent, mitigate the consequences of, prepare for, respond to, and	10									
			recover from emergencies.										
			1990 to 1991 to 1991										
			4.1.2 The leadership commitment shall include the following:										
			(1) Policies, plans, and procedures to implement and maintain the							·	†		
			program.										
			(2) Resources to support the program.							I			
			(3) Reviews and evaluations to ensure program effectiveness.										
		ļ	(4) Correction of deficiencies.		ļ	ļ	<u> </u>			ļ			
			4.1.3 The entity shall adhere to policies, execute plans, and follow										
			procedures developed to support the program.								ļ		
			4.1.4 Leadership shall integrate with, complement and not replace policie	:s,									
			plans, procedures or defined responsibilities				1						
			4.2* Program Coordinator. The program coordinator shall be appointed by	nv.									
			the entity and authorized to administer, evaluate and maintain the program.	"									
			4.3* Program Committee.				•					L	
·····		·····	4.3.1 * A program committee shall be established by the entity in							l	†		
			accordance with its policy.										
			4.3.2 The program committee shall provide input to or assist in the										
			coordination of the preparation, implementation, evaluation, and revision	of									
			the program.								ļ		
			4.3.3 The program committee shall include the program coordinator and	<u>.</u>									
			others who have the expertise, knowledge of the entity, and the capabil to identify resources from all key functional areas within the entity and	πy									
			shall solicit applicable external representation.										
		·	4.4* Program Administration. The entity shall have a documented progr	am			†			t			
			that includes the following:										
			(1) Executive policy including vision, mission statement, roles and										
			responsibilities, and enabling authority										
			(2) Program goals, objectives, and method of program evaluation										
		ļ	(3)*Program plans and procedures to include the following:							ļ			
			1. Anticipated cost				_			ļ			
		ļ	2. Priority		ļ	ļ	1	ļ	ļ	 			
		ļ	3. Time to accomplish 4. Resources required				-			 			
		ł	(4) Applicable authorities, legislation, regulations, and industry cod		 		 			↓			

Edit

B.II. IB.A



Types of Findings

Auditors have 5 options

- Conforms to Standard Goal of every audit!
- Minor (Partial) Non Conformance
 - Single lapse, isolated incident, not likely to cause systemic failure
- Major Non Conformance
 - Systemic breakdown
 - Pattern of failure or breakdown of policy/ procedure
 - Absence of a required or necessary control/ procedure/ policy
- Observation comment on out of scope item (rare)
- Not Applicable asked to comment on an out of scope item



Audit Evidence

- Identify appropriate sources of information
- Collect/review an appropriate amount of information
 - This is not a statistically significant sampling exercise
 - Evidence may be gathered in many ways
 - Interviews
 - Records, including meeting minutes, sign-in sheets, copies of presentation material, post-meeting follow-up notes, emails, copies of contracts (esp. if SLA are involved), etc.
 - Team/Department meetings and discussions
 - Observations
- The goal is not to find problems, but indications and patterns



Audit Details

- Occasionally, auditors may ask for a chance to "huddle." Please provide a private location for this.
- Auditee can also call for a "time out" to review issues and discuss performance of the audit team
- At the closing meeting each day, ask for a detailed progress report.
- Make sure there is sufficient time at the closing meeting to get clarification on all findings.
- Stay on top of the auditor to deliver written findings in a timely and professional manner.



Prompt Final Report

United Kingdom Accreditation Service - Assessment Report - Continuation Sheet Appendix 3 - Witness assessment checklist WITNESSED ASSESSMENT CHECKSHEET Date: 26-27 February 2008 Certification/Notified Body: Number: 01050 CB/NB Assessment Team: PJR Japan Lead: Yashuhide Nagamatsu Client company: EPCO Co Ltd, Mtsui Life Insurance Senju Bldg: 4/F <u>Senju Nakamachi</u> 41-1, Adachi-Ku, Tokyo Masamichi Sinohara (BCM contract auditor) Rvo Fujita (BCM contract auditor trainee) Tsuii (PJR management observer) Site at Okinawa also visited. Company size: Recorded as 242 in company supplied overview across 4 sites; Tokyo, Okinawa, Shen Zhen and Hong Kong, Proposed that only Japan offices in scope (but see comments later). Differing figures obtained during audit totalling 158 Japan and 189 China No. of days: 4 man-days planned for stage 2: ~3 effective man-days days delivered Audit standards and scope (ind RADACE): Accreditation/Assessment standard(s) Is the scope and any exclusions co ISO/IEC 17021: 2006 (E) BS 25999-2: 2007 Scope: Type of audit: Initial Stage 2 audit for BCM UKAS Assessment team and roles UKAS Assessment manager Martyn Cheesbrough- Lead Brian Hough (not attending) John Sharp-Technical Expert BCM Mayuko Inokuchi - Translator provided by PJR Miyuki Sasaki - Translator provided by PJR Audit Plan (is the plan clear and achievable, for ISO 9001 is it process-based)? The plan was structured against the clause requirements of BS 25999-2 for each of the two sites, and indicated where it was planned for each auditor to work independently Does the plan include provision to close-out any previous findings? No specific provisions were included to close out findings from stage 1, although these could be addressed within Opening Meeting (does it cover all aspects in accordance with ISO 19011?): A well-conducted opening meeting, covering all relevant elements of ISO 19011. A suitable review was presented at the end of day 1 and opening meeting on day 2. Audit Team activities Both members of the team had suitable equipment and materials. No specific H&S Overall preparedness Interactions There was little evidence of either formal or informal interaction within the team, other than to within team start and complete sections as allocated within the plan. During day 1 the lead auditor performed 95% of the audit questioning, this including the site tour. A times, even when working separately the auditors appeared to be reviewing material in duplicate- e.g. internal audit and management review. On the last day there was one example where the team reviewed the plan to ensure review of preventative actions was not duplicated. Hence

United Kingdom Accreditation Service – Assessment Report – Continuation Sheet BE No. 75651 UKAS Ref. No.(s) 01050

Appendix 6 - Summary review by UKAS technical expert

Overall Observations

- 7 There is a clear mismatch between what the EPCO directors and adjusted auditors see what 8525999-2 and BCM covers and the intention of the Standard. Japan looks on BCM as disaster recovery following major incidents, e.g. earthquake. The standard covers prevention of disruptions and recovery from any disruptive incident.
- // In the main the EPCO audit looked at the BCMS and the areas covering emergency management and IT failures.
- 3/ The scope of EPCO certification was not clearly defined at Stage 1 and still appeared to miss key elements at Stage 2.
- 4/ Consideration was not given to the role of EPCO suppliers, partners and customers in supplying service to the home occupier when considering the call centre. Aso the assumption was made if the EPCO Tokyo office is destroyed so would the major customers and suppliers premises. This is more than likely not to be the case in nonearthquake situations.
- 5/ EPCO staff awareness was only tested around the existence of the policy document and what actions would be taken in the case of an earthquake or 'blackout'. BCM awareness was not tested by the auditors at either location.
- I have no confidence that BCPs for EPCO were complete and covered the totality of the call centre operations or Design Services. The auditors did not verify this.
- 7/ The importance of exercising was not fully appreciated by EPCO and there appeared to be no "lessons learnt" reports as a result of tests already carried out. The auditors did not pursue this important issue.
- 8/ EPCO internal audit of BCM was not effective at the time of audit, lack of training.
- 9/ Concerns with the way auditors, (both lead and technical), did not 'funnel down' on BCM issues within EPCO. There was more in depth investigation on the BCMS and IT areas by the lead auditor.
- 0/ Auditor was expressing opinion and giving advice to EPCO in the areas where he was experienced, management systems and IT.
- 12/ The sales documentation and procedure manuals were satisfactory.
- 13/ Individual contracts, job descriptions and career histories were in place for all employees interviewed.
- 14/ Contracts, confidentiality agreements and codes of practice were in place for external contractors.



Possible Outcomes

Certification/ Registration is awarded!

- surveillance audit scheduled

Provisional Certification/ Registration is awarded!

- One (or more) *minor* non-conformance areas
- Requires a program of *Preventative* and *Corrective* actions
- Time-sensitive re-examination
- May require a re-audit (more expensive)

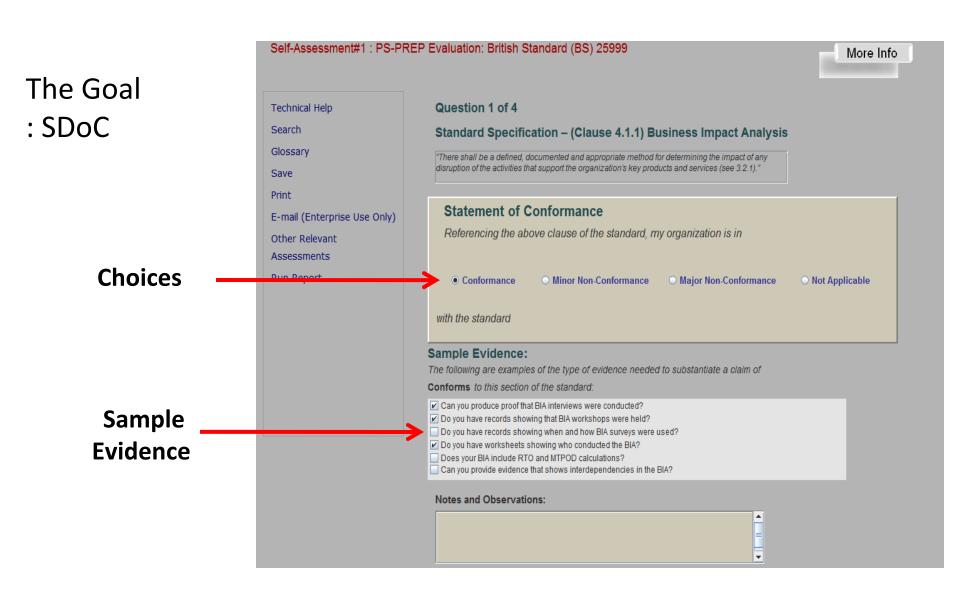
Failed Audit

- **One** or more **major** non-conformance areas
- Multiple (?) minor non-conforming areas





Self Assessments





Summary Report

Self Assessment Content				Self As	sessm	ent Fin	dings	Self Assessment Documentation			
Reference Clause		Standard Area of Practice	BS 25999: 2007, Part 2 Specification	Conforms	Minor NonCom	Major NonCom	N/A or Out of Scope	Illustration of Acceptable Evidence	Note and Observations on Additional Evidence		
4.1.1	Implementing and Operating the BCMS	BIA	"There shall be a defined, documented and appropriate method for determining the impact of any disruption of the activities that support the organization's key products and services (see 3.2.1)."					Can you produce proof that BIA interviews were conducted? Do you have records showing that BIA workshops were held? Do you have records showing when and how BIA surveys were used? Do you have worksheets showing who conducted the BIA? Does your BIA include RTO and MTPOD calculations? Can you provide evidence that shows interdependencies in the BIA?			
4.1.2	Implementing and Operating the BCMS	ВІА	Risk Assessment Description.					Can you produce proof that BIA interviews were conducted? Do you have records showing that BIA workshops were held? Do you have records showing when and how BIA surveys were used? Do you have worksheets showing who conducted the BIA? Does your BIA include RTO and MTPOD calculations? Can you provide evidence that shows interdependencies in the BIA?			
4.1.3	Implementing and Operating	BIA	(Clause 4.1.3) Description.					Can you produce proof that BIA interviews were conducted? Do you have records showing that BIA workshops were held? Do you have records showing when and how BIA surveys were used?			



On-going Process

