

Reliability Standard Audit Worksheet¹

CIP-003-7 – Cyber Security – Security Management Controls

This section to be completed by the Compliance Enforcement Authority.

Audit ID: Audit ID if available; or REG-NCRnnnnn-YYYYMMDD
Registered Entity: Registered name of entity being audited
NCR Number: NCRnnnnn
Compliance Enforcement Authority: Region or NERC performing audit
Compliance Assessment Date(s)²: Month DD, YYYY, to Month DD, YYYY
Compliance Monitoring Method: [On-site Audit | Off-site Audit | Spot Check]
Names of Auditors: Supplied by CEA

Applicability of Requirements

	BA	DP	GO	GOP	IA	LSE	PA	PSE	RC	RP	RSG	TO	TOP	TP	TSP
R1	X	X	X	X	X				X			X	X		
R2	X	X	X	X	X				X			X	X		
R3	X	X	X	X	X				X			X	X		
R4	X	X	X	X	X				X			X	X		

Legend:

Text with blue background:	Fixed text – do not edit
Text entry area with Green background:	Entity-supplied information
Text entry area with white background:	Auditor-supplied information

¹ NERC developed this Reliability Standard Audit Worksheet (RSAW) language in order to facilitate NERC’s and the Regional Entities’ assessment of a registered entity’s compliance with this Reliability Standard. The NERC RSAW language is written to specific versions of each NERC Reliability Standard. Entities using this RSAW should choose the version of the RSAW applicable to the Reliability Standard being assessed. While the information included in this RSAW provides some of the methodology that NERC has elected to use to assess compliance with the requirements of the Reliability Standard, this document should not be treated as a substitute for the Reliability Standard or viewed as additional Reliability Standard requirements. In all cases, the Regional Entity should rely on the language contained in the Reliability Standard itself, and not on the language contained in this RSAW, to determine compliance with the Reliability Standard. NERC’s Reliability Standards can be found on NERC’s website. Additionally, NERC Reliability Standards are updated frequently, and this RSAW may not necessarily be updated with the same frequency. Therefore, it is imperative that entities treat this RSAW as a reference document only, and not as a substitute or replacement for the Reliability Standard. It is the responsibility of the registered entity to verify its compliance with the latest approved version of the Reliability Standards, by the applicable governmental authority, relevant to its registration status.

The NERC RSAW language contained within this document provides a non-exclusive list, for informational purposes only, of examples of the types of evidence a registered entity may produce or may be asked to produce to demonstrate compliance with the Reliability Standard. A registered entity’s adherence to the examples contained within this RSAW does not necessarily constitute compliance with the applicable Reliability Standard, and NERC and the Regional Entity using this RSAW reserves the right to request additional evidence from the registered entity that is not included in this RSAW. Additionally, this RSAW includes excerpts from FERC Orders and other regulatory references. The FERC Order cites are provided for ease of reference only, and this document does not necessarily include all applicable Order provisions. In the event of a discrepancy between FERC Orders, and the language included in this document, FERC Orders shall prevail.

² Compliance Assessment Date(s): The date(s) the actual compliance assessment (on-site audit, off-site spot check, etc.) occurs.

NERC Reliability Standard Audit Worksheet

Findings

(This section to be completed by the Compliance Enforcement Authority)

Req.	Finding	Summary and Documentation	Functions Monitored
R1			
R2			
R3			
R4			

Req.	Areas of Concern

Req.	Recommendations

Req.	Positive Observations

NERC Reliability Standard Audit Worksheet

Subject Matter Experts

Identify the Subject Matter Expert(s) responsible for this Reliability Standard.

Registered Entity Response (Required; Insert additional rows if needed):

SME Name	Title	Organization	Requirement(s)

NERC Reliability Standard Audit Worksheet

R1 Supporting Evidence and Documentation

- R1.** Each Responsible Entity shall review and obtain CIP Senior Manager approval at least once every 15 calendar months for one or more documented cyber security policies that collectively address the following topics:
[Violation Risk Factor: Medium] [Time Horizon: Operations Planning]
- 1.1** For its high impact and medium impact BES Cyber Systems, if any:
 - 1.1.1.** Personnel & training (CIP-004);
 - 1.1.2.** Electronic Security Perimeters (CIP-005) including Interactive Remote Access;
 - 1.1.3.** Physical security of BES Cyber Systems (CIP-006);
 - 1.1.4.** System security management (CIP-007);
 - 1.1.5.** Incident reporting and response planning (CIP-008);
 - 1.1.6.** Recovery plans for BES Cyber Systems (CIP-009);
 - 1.1.7.** Configuration change management and vulnerability assessments (CIP-010);
 - 1.1.8.** Information protection (CIP-011); and
 - 1.1.9.** Declaring and responding to CIP Exceptional Circumstances.
 - 1.2** For its assets identified in CIP-002 containing low impact BES Cyber Systems, if any:
 - 1.2.1.** Cyber security awareness;
 - 1.2.2.** Physical security controls;
 - 1.2.3.** Electronic access controls for Low Impact External Routable Communication (LERC) and Dial-up Connectivity; and
 - 1.2.4.** Cyber Security Incident response
- M1.** Examples of evidence may include, but are not limited to, policy documents; revision history, records of review, or workflow evidence from a document management system that indicate review of each cyber security policy at least once every 15 calendar months; and documented approval by the CIP Senior Manager for each cyber security policy.

Registered Entity Response (Required):

Compliance Narrative:

Provide a brief explanation, in your own words, of how you comply with this Requirement. References to supplied evidence, including links to the appropriate page, are recommended.

NERC Reliability Standard Audit Worksheet

Registered Entity Evidence (Required):

The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found.

File Name	Document Title	Revision or Version	Document Date	Relevant Page(s) or Section(s)	Description of Applicability of Document

Audit Team Evidence Reviewed (This section to be completed by the Compliance Enforcement Authority):

Compliance Assessment Approach Specific to CIP-003-7, R1

This section to be completed by the Compliance Enforcement Authority

	<p>For its high impact and medium impact BES Cyber Systems, if any, verify the Responsible Entity has documented one or more cyber security policies that collectively address the following topics:</p> <ol style="list-style-type: none"> 1. Personnel and training (CIP-004); 2. Electronic Security Perimeters (CIP-005) including Interactive Remote Access; 3. Physical security of BES Cyber Systems (CIP-006); 4. System security management (CIP-007); 5. Incident reporting and response planning (CIP-008); 6. Recovery plans for BES Cyber Systems (CIP-009); 7. Configuration change management and vulnerability assessments (CIP-010); 8. Information protection (CIP-011); and 9. Declaring and responding to CIP Exceptional Circumstances.
	<p>For its assets identified in CIP-002 containing low impact BES Cyber Systems, if any, verify the Responsible Entity has documented one or more cyber security policies that collectively address the following topics:</p> <ol style="list-style-type: none"> 1. Cyber security awareness; 2. Physical security controls; 3. Electronic access controls for Low Impact External Routable Communication (LERC) and Dial-up Connectivity; and 4. Cyber Security Incident response.
	<p>Verify each policy used to meet this Requirement has been reviewed at least once every 15 calendar months.</p>
	<p>Verify the CIP Senior Manager has approved each policy used to meet this Requirement at least once every 15 calendar months.</p>

Note to Auditor:

Per Attachment 1, "Responsible Entities with multiple-impact BES Cyber Systems ratings can utilize policies,

NERC Reliability Standard Audit Worksheet

procedures, and processes for their high or medium impact BES Cyber Systems to fulfill the sections for the development of low impact cyber security plan(s). Each Responsible Entity can develop a cyber security plan(s) either by individual asset or groups of assets.”

Auditor Notes:

NERC Reliability Standard Audit Worksheet

R2 Supporting Evidence and Documentation

R2. Each Responsible Entity with at least one asset identified in CIP-002 containing low impact BES Cyber Systems shall implement one or more documented cyber security plan(s) for its low impact BES Cyber Systems that include the sections in Attachment 1. *[Violation Risk Factor: Lower] [Time Horizon: Operations Planning]*

Note: An inventory, list, or discrete identification of low impact BES Cyber Systems or their BES Cyber Assets is not required. Lists of authorized users are not required.

M2. Evidence shall include each of the documented cyber security plan(s) that collectively include each of the sections in Attachment 1 and additional evidence to demonstrate implementation of the cyber security plan(s). Additional examples of evidence per section are located in Attachment 2.

Registered Entity Response (Required):

Compliance Narrative:

Provide a brief explanation, in your own words, of how you comply with this Requirement. References to supplied evidence, including links to the appropriate page, are recommended.

Registered Entity Evidence (Required):

The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found.

File Name	Document Title	Revision or Version	Document Date	Relevant Page(s) or Section(s)	Description of Applicability of Document

Audit Team Evidence Reviewed (This section to be completed by the Compliance Enforcement Authority):

Compliance Assessment Approach Specific to CIP-003-7, R2

This section to be completed by the Compliance Enforcement Authority

	For each asset or group of assets containing low impact BES Cyber Systems, verify that the Responsible Entity has documented one or more cyber security plan(s), as specified in Attachment 1, for its low impact BES Cyber Systems that include: <ol style="list-style-type: none"> 1. Cyber security awareness; 2. physical security controls; 3. electronic access controls; and 4. Cyber Security Incident response
	For each asset or group of assets containing low impact BES Cyber Systems, verify that the Responsible

NERC Reliability Standard Audit Worksheet

	Entity has reinforced cyber security awareness of its cyber security practices (which may include associated physical security practices) at least once every 15 calendar months.
	For each asset or group of assets containing low impact BES Cyber Systems, verify that the Responsible Entity has implemented physical access controls, based on need as determined by the Responsible Entity, to control physical access to: <ol style="list-style-type: none"> 1. The asset or the locations of the low impact BES Cyber Systems within the asset; and 2. the Cyber Asset(s), as specified by the Responsible Entity, that provide electronic access control(s) implemented for Section 3.1, if any.
	For each asset or group of assets containing low impact BES Cyber Systems, does the Responsible Entity have any Low Impact External Routable Communication (LERC)? <ul style="list-style-type: none"> • If yes, verify that the Responsible Entity implemented electronic access control(s) to permit only necessary electronic access to low impact BES Cyber System(s). • If no, verify that LERC does not exist.
	For each asset or group of assets containing low impact BES Cyber Systems, verify that the Responsible Entity has implemented authentication for all Dial-up Connectivity, if any, that provides access to low impact BES Cyber Systems, per Cyber Asset capability.
	For each asset or group of assets containing low impact BES Cyber Systems, verify that the Responsible Entity has one or more Cyber Security Incident response plan(s) that includes: <ol style="list-style-type: none"> 1. Identification, classification, and response to Cyber Security Incidents; 2. Determination of whether an identified Cyber Security Incident is a Reportable Cyber Security Incident and subsequent notification to the Electricity Information Sharing and Analysis Center (E-ISAC), unless prohibited by law; 3. Identification of the roles and responsibilities for Cyber Security Incident response by groups or individuals; 4. Incident handling for Cyber Security Incidents; 5. Testing each Cyber Security Incident response plan at least once every 36 calendar months by: (1) responding to an actual Reportable Cyber Security Incident; (2) using a drill or tabletop exercise of a Reportable Cyber Security Incident; or (3) using an operational exercise of a Reportable Cyber Security Incident; and 6. Updating the Cyber Security Incident response plan(s), if needed, within 180 calendar days after completion of a Cyber Security Incident response plan(s) test or actual Reportable Cyber Security Incident.
	For each asset or group of assets containing low impact BES Cyber Systems, if the Responsible Entity responded to a Cyber Security Incident, verify the Responsible Entity implemented the Cyber Security Incident response plan.
	Verify the Responsible Entity tested each Cyber Security Incident response plan at least once every 36 calendar months by: (1) responding to an actual Reportable Cyber Security Incident; (2) using a drill or tabletop exercise of a Reportable Cyber Security Incident; or (3) using an operational exercise of a Reportable Cyber Security Incident.
	Verify the Responsible Entity updated each Cyber Security Incident response plan, if needed, within 180 calendar days after completion of a Cyber Security Incident response plan(s) test or actual Reportable Cyber Security Incident.

NERC Reliability Standard Audit Worksheet

Auditor Notes:

NERC Reliability Standard Audit Worksheet

R3 Supporting Evidence and Documentation

R3. Each Responsible Entity shall identify a CIP Senior Manager by name and document any change within 30 calendar days of the change. *[Violation Risk Factor: Medium] [Time Horizon: Operations Planning]*

M3. An example of evidence may include, but is not limited to, a dated and approved document from a high level official designating the name of the individual identified as the CIP Senior Manager.

Registered Entity Response (Required):

Compliance Narrative:

Provide a brief explanation, in your own words, of how you comply with this Requirement. References to supplied evidence, including links to the appropriate page, are recommended.

Registered Entity Evidence (Required):

The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found.

File Name	Document Title	Revision or Version	Document Date	Relevant Page(s) or Section(s)	Description of Applicability of Document

Audit Team Evidence Reviewed (This section to be completed by the Compliance Enforcement Authority):

Compliance Assessment Approach Specific to CIP-003-7, R3

This section to be completed by the Compliance Enforcement Authority

	Verify the CIP Senior Manager has been identified by name.
	Verify that any changes made to the CIP Senior Manager were dated and documented within 30 calendar days of the change.
	Verify the CIP Senior Manager is a single senior management official with overall authority and responsibility for leading and managing implementation of and continuing adherence to the requirements within the NERC CIP Standards, CIP-002 through CIP-011.

Auditor Notes:

NERC Reliability Standard Audit Worksheet

R4 Supporting Evidence and Documentation

- R4.** The Responsible Entity shall implement a documented process to delegate authority, unless no delegations are used. Where allowed by the CIP Standards, the CIP Senior Manager may delegate authority for specific actions to a delegate or delegates. These delegations shall be documented, including the name or title of the delegate, the specific actions delegated, and the date of the delegation; approved by the CIP Senior Manager; and updated within 30 days of any change to the delegation. Delegation changes do not need to be reinstated with a change to the delegator. *[Violation Risk Factor: Lower] [Time Horizon: Operations Planning]*
- M4.** An example of evidence may include, but is not limited to, a dated document, approved by the CIP Senior Manager, listing individuals (by name or title) who are delegated the authority to approve or authorize specifically identified items.

Registered Entity Response (Required):

Compliance Narrative:

Provide a brief explanation, in your own words, of how you comply with this Requirement. References to supplied evidence, including links to the appropriate page, are recommended.

Registered Entity Evidence (Required):

The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found.

File Name	Document Title	Revision or Version	Document Date	Relevant Page(s) or Section(s)	Description of Applicability of Document

Audit Team Evidence Reviewed (This section to be completed by the Compliance Enforcement Authority):

Compliance Assessment Approach Specific to CIP-003-7, R4

This section to be completed by the Compliance Enforcement Authority

	Verify that the Responsible Entity has documented a process to delegate authority, unless no delegations are used.
	Verify that all delegates have been identified by name or title.
	Verify that the delegation of authority includes the specific action delegated.
	Verify specific actions delegated by the CIP Senior Manager are allowed by the CIP Standards.
	Verify that the dates for all delegations have been recorded.

NERC Reliability Standard Audit Worksheet

	Verify that the CIP Senior Manager approved all delegations.
	Verify that any changes made to delegations were dated and documented within 30 days of the change.
Note to Auditor: Delegations of the CIP Senior Manager’s authority are permitted for the required approvals in CIP-002-5.1, Requirement R2 and CIP-007-6, Requirement R2, Part 2.4.	

Auditor Notes:

NERC Reliability Standard Audit Worksheet

Additional Information:

Reliability Standard

The full text of CIP-003-7 may be found on the NERC Web Site (www.nerc.com) under “Program Areas & Departments”, “Reliability Standards.”

In addition to the Reliability Standard, there is an applicable Implementation Plan available on the NERC Web Site.

In addition to the Reliability Standard, there is background information available on the NERC Web Site.

Capitalized terms in the Reliability Standard refer to terms in the NERC Glossary, which may be found on the NERC Web Site.

Sampling Methodology

Sampling is essential for auditing compliance with NERC Reliability Standards since it is not always possible or practical to test 100% of either the equipment, documentation, or both, associated with the full suite of enforceable standards. The Sampling Methodology Guidelines and Criteria (see NERC website), or sample guidelines, provided by the Electric Reliability Organization help to establish a minimum sample set for monitoring and enforcement uses in audits of NERC Reliability Standards.

Regulatory Language

See FERC Order 706

See FERC Order 791

See FERC Order 822

CIP-003-7 - Attachment 1

Required Sections for Cyber Security Plan(s) for Assets Containing Low Impact BES Cyber Systems

Responsible Entities shall include each of the sections provided below in the cyber security plan(s) required under Requirement R2.

Responsible Entities with multiple-impact BES Cyber Systems ratings can utilize policies, procedures, and processes for their high or medium impact BES Cyber Systems to fulfill the sections for the development of low impact cyber security plan(s). Each Responsible Entity can develop a cyber security plan(s) either by individual asset or groups of assets.

Section 1. Cyber Security Awareness: Each Responsible Entity shall reinforce, at least once every 15 calendar months, cyber security practices (which may include associated physical security practices).

Section 2. Physical Security Controls: Each Responsible Entity shall control physical access, based on need as determined by the Responsible Entity, to (1) the asset or the locations of the low impact BES Cyber Systems within the asset, and (2) the Cyber Asset(s), as specified by the Responsible Entity, that provide electronic access control(s) implemented for Section 3.1, if any.

Section 3. Electronic Access Controls: Each Responsible Entity shall:

- 3.1** Implement electronic access control(s) for LERC, if any, to permit only necessary electronic access to low impact BES Cyber System(s).
- 3.2** Implement authentication for all Dial-up Connectivity, if any, that provides access to low impact BES Cyber Systems, per Cyber Asset capability.

Section 4. Cyber Security Incident Response: Each Responsible Entity shall have one or more Cyber Security Incident response plan(s), either by asset or group of assets, which shall include:

- 4.1** Identification, classification, and response to Cyber Security Incidents;
- 4.2** Determination of whether an identified Cyber Security Incident is a Reportable Cyber Security Incident and subsequent notification to the Electricity Information Sharing and Analysis Center (E-ISAC), unless prohibited by law;
- 4.3** Identification of the roles and responsibilities for Cyber Security Incident response by groups or individuals;
- 4.4** Incident handling for Cyber Security Incidents;
- 4.5** Testing the Cyber Security Incident response plan(s) at least once every 36 calendar months by: (1) responding to an actual Reportable Cyber Security Incident; (2) using a drill or tabletop exercise of a Reportable Cyber Security Incident; or (3) using an operational exercise of a Reportable Cyber Security Incident; and

NERC Reliability Standard Audit Worksheet

- 4.6** Updating the Cyber Security Incident response plan(s), if needed, within 180 calendar days after completion of a Cyber Security Incident response plan(s) test or actual Reportable Cyber Security Incident.

CIP-003-7 - Attachment 2

Examples of Evidence for Cyber Security Plan(s) for Assets Containing Low Impact BES Cyber Systems

Section 1 - Cyber Security Awareness: An example of evidence for Section 1 may include, but is not limited to, documentation that the reinforcement of cyber security practices occurred at least once every 15 calendar months. The evidence could be documentation through one or more of the following methods:

- Direct communications (for example, e-mails, memos, or computer-based training);
- Indirect communications (for example, posters, intranet, or brochures); or
- Management support and reinforcement (for example, presentations or meetings).

Section 2 - Physical Security Controls: Examples of evidence for Section 2 may include, but are not limited to:

- Documentation of the selected access control(s) (e.g., card key, locks, perimeter controls), monitoring controls (e.g., alarm systems, human observation), or other operational, procedural, or technical physical security controls that control physical access to both:
 - a. The asset, if any, or the locations of the low impact BES Cyber Systems within the asset; and
 - b. The Cyber Asset specified by the Responsible Entity that provides electronic access controls implemented for Section 3.1, if any.

Section 3 - Electronic Access Controls: Examples of evidence for Section 3 may include, but are not limited to:

1. Documentation, such as representative diagrams or lists of implemented electronic access controls (e.g., restricting IP addresses, ports, or services; authenticating users; air-gapping networks; terminating routable protocol sessions on a non-BES Cyber Asset; implementing unidirectional gateways) showing that for LERC at each asset or group of assets containing low impact BES Cyber Systems, is confined only to that access the Responsible Entity deems necessary; and
2. Documentation of authentication for Dial-up Connectivity (e.g., dial out only to a preprogrammed number to deliver data, dial-back modems, modems that must be remotely controlled by the control center or control room, or access control on the BES Cyber System).

Section 4 - Cyber Security Incident Response: An example of evidence for Section 4 may include, but is not limited to, dated documentation, such as policies, procedures, or process documents of one or more Cyber Security Incident response plan(s) developed either by asset or group of assets that include the following processes:

NERC Reliability Standard Audit Worksheet

1. to identify, classify, and respond to Cyber Security Incidents; to determine whether an identified Cyber Security Incident is a Reportable Cyber Security Incident and for notifying the Electricity Information Sharing and Analysis Center (E-ISAC);
 2. to identify and document the roles and responsibilities for Cyber Security Incident response by groups or individuals (e.g., initiating, documenting, monitoring, reporting, etc.);
 3. for incident handling of a Cyber Security Incident (e.g., containment, eradication, or recovery/incident resolution);
 4. for testing the plan(s) along with the dated documentation that a test has been completed at least once every 36 calendar months; and
 5. to update, as needed, Cyber Security Incident response plan(s) within 180 calendar days after completion of a test or actual Reportable Cyber Security Incident.
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NERC Reliability Standard Audit Worksheet

Revision History for RSAW

Version	Date	Reviewers	Revision Description
DRAFT1v0	08/02/2016	CIP RSAW Development Team	New Document