COVER PAGE

This posting contains sensitive information regarding the manner in which an entity has implemented controls to address security risks and comply with the CIP standards. NERC has applied redactions to the Spreadsheet Notice of Penalty in this posting and provided the justifications that are particular to each noncompliance in the table below. For additional information on the CEII redaction justification, please see <a href="https://doi.org/10.2016/justifications-to-table-post-new-to-table-pos

Count	Violation ID	Category 1	Category 2	Category 3	Category 4	Category 5	Category 6	Category 7	Category 8	Category 9	Category 10	Category 11	Category 12	CEII PROTECTION (YEARS)
1	WECC2016016686	Yes		Yes	Yes					Yes				Category 1: 3 years; Category 2 - 12: 2 years
2	WECC2017017207	Yes	Yes	Yes	Yes					Yes	Yes			Category 1: 3 years; Category 2 – 12: 2 years
3	WECC2017016991			Yes	Yes							Yes		Category 2 – 12: 2 years
4	WECC2017017204			Yes	Yes						Yes			Category 2 – 12: 2 years
5	WECC2017017208	Yes	Yes	Yes	Yes					Yes	Yes			Category 1: 3 years; Category 2 – 12: 2 years
6	WECC2017017206			Yes	Yes						Yes			Category 2 – 12: 2 years
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Filing Date: March 28, 2019

NOC-2612 No Penalty

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation		
WECC2016016686	CIP-002-5.1	R1; P1.2	High	Lower	7/1/2016 (when the Standard became mandatory and enforceable)	5/11/2017 (Mitigation Plan completion)	Self-Report	5/11/2017	6/1/2017		
Description of the Viola				e entity submitted a Self-Re	port stating that,		, it was in i	noncompliance with	CIP-002-5.1 R1.		
document, each violation a "violation," regardless posture and whether it confirmed violation.)	of its procedura		Specifically, the entity reported it started its BES Asset analysis utilizing CIP Version 5 criteria in November 2014. The most comprehensive data sources for the entity's asset characteristics were identified and used to categorize the BES Assets. The first entity-approved CIP-002-5.1 BES Cyber System list was published May 12, 2015 to align with the entity's CIP Version 5 transition project. During the entity's November 2016 CIP-002-5.1 BES Cyber System review, a new preferential data source was identified and used to re-categorize the Low Impact Bulk Electric System (BES) Cyber Systems (LIBCS) at a substation to Medium Impact BES Cyber Systems (MIBCS). Upon evaluation of the change, it was determined that the BES Asset information used to initially categorize the LIBCS was unclear and incomplete which resulted in the incorrect impact rating for the BES Cyber Systems at that substation. The entity had categorized the BES Cyber System at the substation as LIBCs because the initial CIP-002-5.1 analysis determined there were only lines, with connections to two other substations (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, with connections to four other transmission assets (weighted value of lines, wi								
			WECC determined that this issue began on July 1, 2016, when the Standard and Requirement became mandatory and enforceable, and ended on May 11, 2017, when the entity completed its Mitigation Plan.								
Risk Assessment			MIBCS as defined by CIP-00 The MIBCS in scope had no	02-5.1 R1 sub-part 1.2. ERC. The number of CIP re	t pose a serious or substantial risk to th quirements applicable to MIBCS withou harm is known to have occurred.	<u></u>	em (BPS). In this instance, the	·	,		
Mitigation			To mitigate this violation, the entity: 1) updated its CIP-002 BES Cyber System list to include the reclassification of the BES Cyber System in scope, and obtained CIP senior management signature; 2) updated its BES Cyber Systems Identification process to incorporate the accurate data source for CIP-002 identification; 3) confirmed compliance or identified deficiencies with other applicable CIP Standards that require mitigation; and 4) mitigated all CIP compliance deficiencies resulting from the identification of the MIBCS without ERC, which included patch management, baseline configuration, and cyber vulnerability assessments.								
Other Factors			WECC reviewed inter	rnal compliance program (IC	CP) and considered it to be a neutral fac	ctor in the penalty determination.					

NOC-2612	No Penalt
WECC considered CIP-002-5.1 R1 compliance history in determining the disposition track. WECC considered determination.	CIP-002-5.1 R1 compliance history to be an aggravating factor in the disposition

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation			
WECC2017017207	CIP-007-6	R1; P1.1	Medium	High	7/1/2016 (when the Standard became mandatory and enforceable on)	2/28/2017 (when disabled the ports that were not needed)	Compliance Audit	1/8/2018	1/29/2018			
Description of the Violat	tion (For purpose	s of this	During a Compliance Audit		, WECC	determined that						
document, each violatio				was in violation of	CIP-007-6 R1 Part 1.1							
a "violation," regardless	-											
posture and whether it was a possible, or confirmed violation.)			Specifically, when was preparing its baseline on a workstation classified as a BES Cyber Asset (BCA) associated with its Medium Impact BES Cyber System (MIBCS), it evaluated all ports, and those that were considered unneeded were slated for removal. During the audit, provided the audit team a that the unnecessary ports had been overlooked during the removal process. The BCA in scope is an engineering workstation in the primary Control Center's separate but associated data center, and is not actively used by to monitor or control the supervisory control and data acquisition (SCADA) network.									
			WECC concluded that	WECC concluded that failed to ensure that only those logical network accessible ports that were determined to be needed on a BCA within the MIBCS were enabled.								
			•	The root cause of the violation was due to an oversight by the employee responsible for disabling the ports who did not follow and the violation was due to an oversight by the employee responsible for disabling the ports who did not follow are a considered as a constant of the baseline configuration and the lack of an internal control to ensure employees followed the procedure.								
				he violation duration would	e detective controls in place that could have been longer due to the lack of de							
Risk Assessment			This violation posed a minimal risk and did not pose a serious or substantial risk to the reliability of the bulk power system. In this instance, failed to enable only logical network accessible ports that were determined to be needed. Such failure could result in a malicious actor gaining access to the BCA to cause harm to serious of the bulk power system. In this instance, failed to enable only logical network accessible ports that were determined to be needed. Such failure could result in a malicious actor gaining access to the BCA to cause harm to serious or substantial risk to the reliability of the bulk power system. In this instance, failed to enable only logical network accessible ports that were determined to be needed. Such failure could result in a malicious actor gaining access to the BCA to cause harm to serious or substantial risk to the reliability of the bulk power system. In this instance, failure to enable only logical network accessible ports that were determined to be needed. Such failure could result in a malicious actor gaining access to the BCA to cause harm to serious or substantial risk to the reliability of the bulk power system. In this instance, failure to enable only logical network accessible ports that were determined to be needed. Such failure could result in a malicious actor gaining access to the BCA to cause harm to serious accessible ports.									
			However, implemented access control at the Electronic Security Perimeter (ESP) to only allow approved traffic into the protected network. also implemented inside the ESP. Based on the controls in place, WECC determined the likelihood of the potential harm occurring was low.									
Mitigation			To mitigate this violation,	:								
			1) disabled logical network ports determined to be unneeded on the BES Cyber Asset in scope; 2) updated documentation to require a be performed each time a change is made to a baseline configuration and validate it against the baseline; 3) documented a process to periodically review baseline configurations against a report of open ports to ensure only necessary logical ports are open and that the baselines are accurate; 4) trained personnel on the updated documentation and processes; and 5) added CIP-007 as a regular agenda item for the monthly CIP Compliance meetings.									
Other Factors			WECC reviewed s internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.									
			WECC considered 's compliance history and determined there were no relevant instances of noncompliance.									

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation			
WECC2017016991	CIP-007-6	R2; P2.1, 2.2, 2.3	Medium	High	7/1/2016 (when the Standard became mandatory and enforceable on)	2/23/2017 (for Part 2.1 when included patching sources in its patch management process) 9/21/2017 (for Parts 2.2 and 2.3 when evaluated security patches and updated its mitigation plan)	Self-Report	8/2/2017	12/22/2017			
Description of the Viola	tion (For purpose	s of this	On	submitted a Self-Report, s	stating that,	,			it was in violation of			
document, each violation			CIP-007-6 R2 Part 2.2.	. ,	3 /							
a "violation," regardless	s of its procedura	I										
posture and whether it	was a possible, o	or	Specifically, reported	that, for three Cyber Assets	s classified as Bulk Electric System Cyber	Assets (BCAs) it did not assess securit	y patches after the initial	l review of security pa	atches on July 1, 2016 was			
confirmed violation.)			conducted, pursuant to CII	P-007-6 R2 Part 2.2. The dev	rices and software in scope support the	primary and backup Control Centers co	ontaining a Medium Impa	act Bulk Electric Syste	em Cyber System (MIBCS).			
			_	•	nined a scope increase from the original	•		•	. ,,			
			I	•	ed a patch evaluation at least once every	• • • •	**	•				
				for one Electronic Access or Monitoring System (EACMS) and seven Physical Access Control Systems (PACS). Lastly, WECC determined that								
			not applied; however, did not include specific implementation timeframes, as required by Part 2.3.									
			The root cause of the viola	The root cause of the violation was a less than adequate security patch management program for CIP compliance. Specifically, see 's lack of knowledge and understanding of CIP Standards resulted in the								
			implementation of a less than adequate security patch management program.									
			•	The violation duration was 237 days for Part 2.1 and 447 days for Parts 2.2 and 2.3. did not have detective controls in place that could have helped identify the issues sooner and to lessen the								
			violation duration. WECC believes had it not been for second some of second sec									
			aggravating factor and escalated the disposition treatment to an expedited settlement.									
Risk Assessment			This violation posed a mini	mal risk and did not nose a	serious or substantial risk to the reliabili	ty of the RPS. In this instance	iled to evaluate security	natches within 35 cal	endar days of the last			
THE REPORT OF THE PERSON OF TH			-	-	assets; to maintain documentation that	•			-			
			and PACs, pursuant to CIP-	007-5 R2 Parts 2.1, 2.2 and	2.3. Such failure could potentially result	in a malicious actor using known attac	ck methods to gain contr	ol of a BES Cyber Syst	tem. If control was			
			established, the malicious actor could cause reboots, freezes, or install malware in the systems. An attack on the devices in scope could cause disruption, restriction of visibility, or affect the operating									
			capabilities of system's system	ems which could lead to unin	ntended consequences that could affect	the BES.						
			However the likelihood of	the risk occurring was signi	ficantly reduced by the preventative cor	atrols had implemented Specific	cally implemented	protections at each F	lectronic Security			
			1	_	out of the ESP as well as implementing			-	•			
				•	ad no browser access or email, and were	•						
			I -	-	the Standard, however the evaluations				that employs few staff and			
			has an extremely low turnover. Based on this, WECC determined that the likelihood of the potential harm occurring was low.									
Mitigation			To mitigate this violation,	:								
			j,									
			1 -		d maintain a list of all applicable devices	-						
			1 ' ' ' '		nitigation plans with required implemer	ntation timeframes were developed an	d approved by the CIP se	enior manager;				
			1 '		e if additional updates were needed;	(i a FACNIC BACC IBCA	a), and					
					the purview of the system support grounce Meeting agenda. Regular discussions			d consistency across	SCADA Support and			
				ue to meet expectations over		with an appropriate level of view will	Chaire manitenance and	a consistency across.	Jenon Jupport and			
			, , , , , , , , , , , , , , , , , , , ,	F								

WECC reviewed 's internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.
WECC considered 's compliance history and determined there were no relevant instances of noncompliance.

NOC-2593

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Medium Moderate 7/3/2016 (for Part 4.1 when the standard became and actory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10/1/2016 (for Part 4.2 when the standard became mandatory and enforceable on 10	NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation			
Description of the Violation (For purposes of this document, each violation, "regardless of its procedural as "violation," regardless of its procedural posture and whether it was a possible, or confirmed violation," separates of its procedural posture and whether it was a possible, or confirmed violation," separates of its procedural posture and whether it was a possible, or confirmed violation," separates of the procedural posture and whether it was a possible, or confirmed violation," separates of the procedure is a possible, or confirmed violation," separates of the procedure is a possible, or confirmed violation," separates of the procedure is a possible, or confirmed violation," separates of the procedure is a possible, or confirmed violation," separates of procedure is a possible, or confirmed violation, and the procedure is a possible, or confirmed violation, and the procedure is a possible, or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible, or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed violation, and the procedure is a possible or confirmed	WECC2017017204	CIP-004-6	P4.1,	Medium	Moderate	Standard became mandatory and enforceable on (10/1/2016) 10/1/2016 (for Part 4.2 when the Standard became mandatory and	documented authorization records for access granted, and verified CIP access against authorization	Compliance Audit	12/13/2017				
was in violation of Lip-004-6 R4 Part 4.1 and Part 4.2 a "violation", regardless of its procedural posture and whether it was a possible, or confirmed violation.)	Description of the Viola	tion (For nurnose	es of this	During a Compliance Audit	+		determined that						
a "violation," regardless of fits procedural posture and whether it was a possible, or confirmed violation.) Specifically, for CIP-Q04-6 R4 Part 4.1, WECC determined that was not able to demonstrate that it implemented its access management program pere its documented processes. Induction of the confirmed violation.) Specifically, for CIP-Q04-6 R4 Part 4.1, WECC determined that was not able to demonstrate that it implemented its access management program per its documented processes. Induction of the confirmed violation.) Specifically, for CIP-Q04-6 R4 Part 4.2, WECC determined that was not able to demonstrate that it implemented its access management program per its Access Request form to its CIP. Specifically, for CIP-Q04-6 R4 Part 4.2, WECC determined that which was deceded the complexed without having completed in a case of the violation of the verification between the list of employees without having completed in the list of personnel who have access, at least one each calendar quarter. WECC concluded that we specification deceded in the process of the wild was documented and failed to update its documented process to authorize decronic access, unescorted physical access, and/or designated storage locations. The root cause of the violation was management projecy guidance or expectations were not well-defined, understood, or enforced. Specifically, was new to CIP Standards and Requirements as subject matter experts and compliance staff lacked understanding of required evidence and retention periods. The violation duration was 525 days for Part 4.1 and 433 days for Part 4.2. and did not have detective controls in place that could have helped identify the issues sooner and to lessen the violation duration would have been longer due to the lack of detective controls. Based on this, WECC applied an aggrava factor and socialated the disposition treatment to an expectated standard	-						determined that						
Specifically, for CIP-004-6 RA Part 4.1, WECC determined that was not able to demonstrate that it implemented its access management program per its documented processes. If document it utilized an Access Request Form and a CIP-004-6 Kess Management Programs presidabeet whom authorizing electronic or unescroted physical access to its its Midium Impacts Bulk Electric System (MIRCS) and their associated Cyber Assets for when authorizing access to designated storage locations. From July 1, 2016 through November 21, 2016. If a private access to the Minds Can disascoince of the West of the Wes	•				was in violation o	1 CH 004 0 N4 1 dic 4.1 did 1 dic 4.2.							
need for access granting pursuant to CIP-004-6 R4 Part 4.1, and failed to verify once each calendar quarter that employees with CIP access had authorization records pursuant to CIP-004-6 R4 Part Such failure could result in unauthorized employees having electronic access, unescorted physical access and/or access to designated storage locations containing BES Cyber System information. To access could intentionally or unintentionally lead to misuse of information or devices that support is a compliance obligations; thereby potentially affecting the reliability of the BPS. Mitigation To mitigate this violation, 1) updated its Access Management and Revocation Program and Procedure to reflect current practices; 2) holds monthly meetings to discuss CIP compliance; 3) updated its spreadsheet to document employees that have access and to document the performance of quarterly reviews, annual reviews, and revocations; and 4) provided training on the new Access Management and Revocation Program and Procedures. Other Factors WECC reviewed is internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.	_	was a possible, o	or	that it utilized an Access Request Form and a CIP-004 Access Management Program spreadsheet when authorizing electronic or unescorted physical access to its Medium Impact Bulk Electric System (Cyber System (MIBCS) and their associated Cyber Assets or when authorizing access to designated storage locations. From July 1, 2016 through November 21, 2016, granted electronic and/or unescorted physical access to its MIBCS and associated Cyber Assets to five employees without having completed for S Access Request Form per states in its Access Management and Revocation Program and Procedure. Relating to CIP-004-6 R4 Part 4.2, states in its Access Management and Revocation Program and Procedure that quarterly reviews are conducted by comparing Access Request Forms to its CIP Unescorted Physical Security Perimeter and Electronic Security Perimeter list. However, did not utilize the Access Request Forms; therefore, did not have dated documentation of the verification between the list of employees who have been authorized for access and the list of personnel who have access, at least one each calendar quarter. WECC concluded that used a process other than that which was documented and failed to update its documented process to authorize electronic access, unescorted physical access, and/or access to designated storage locations. The root cause of the violation was management policy guidance or expectations were not well-defined, understood, or enforced. Specifically, was new to CIP Standards and Requirements and its subject matter experts and compliance staff lacked understanding of required evidence and retention periods. The violation duration was 525 days for Part 4.1 and 433 days for Part 4.2. did not have detective controls in place that could have helped identify the issues sooner and to lessen the violation duration. WECC believes had it not been for the lack of detective controls. Based on this, WECC applied an aggravating									
1) updated its Access Management and Revocation Program and Procedure to reflect current practices; 2) holds monthly meetings to discuss CIP compliance; 3) updated its spreadsheet to document employees that have access and to document the performance of quarterly reviews, annual reviews, and revocations; and 4) provided training on the new Access Management and Revocation Program and Procedures. Other Factors WECC reviewed 's internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.	Risk Assessment	Risk Assessment			need for access granting pursuant to CIP-004-6 R4 Part 4.1, and failed to verify once each calendar quarter that employees with CIP access had authorization records pursuant to CIP-004-6 R4 Part 4.2. Such failure could result in unauthorized employees having electronic access, unescorted physical access and/or access to designated storage locations containing BES Cyber System information. This								
implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.	Mitigation			1) updated its Access Management and Revocation Program and Procedure to reflect current practices; 2) holds monthly meetings to discuss CIP compliance; 3) updated its spreadsheet to document employees that have access and to document the performance of quarterly reviews, annual reviews, and revocations; and									
	Other Factors			implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.									
							•						

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation		
WECC2017017208	CIP-010-2	R1; P1.1, 1.2, 1.3, and 1.4	Medium	High	7/1/2016 (when the Standard became mandatory and enforceable on)	5/31/2017 (when baseline configurations were updated)	Compliance Audit	1/22/2018	2/26/2018		
Description of the Violatica "violation," regardles and whether it was a priviolation.)	on at issue is desc s of its procedura	es of this cribed as I posture	During a Compliance Audit was in violation of CIP-010-2 R1 Parts 1.1.4, 1.1.5, 1.2, 1.3 and 1.4.								
Risk Assessment			This violation posed a moderate risk and did not pose a serious or substantial risk to the reliability of the BPS. In this instance, accessible ports and security patches applied to assets, and failed to perform required change management activities for BES Cyber Assets, EACMS, and PACS pursuant to CIP-010-2 R1 Parts 1.1, 1.2, 1.3, and 1.4. Such failure could result in a lack of protective measures for those ports due to not knowing which ports were accessible, which could lead to cyber security vulnerabilities in those network devices, thereby potentially affecting and its and its and its and change management adequate internal controls to ensure its documented processes for CIP-010-2 R1 were followed; to ensure potential incidents caused by poorly executed baseline configurations and change management processes would be minimized; and to detect baseline configuration errors and change management process exclusions. It is a small municipal power company. Based on this, WECC determined that the likelihood of the potential harm occurring was low.								
Mitigation			2) updated its Change Con that all CIP-005, CIP-007, a 3) held a meeting to discu- baseline component; 4) included baseline chang	onfigurations for the devices trol and Configuration Man and CIP-010 security control as the changes to the proces ses as a standing item for dis	s in scope; nagement Procedure to include the requ Is are met and a step to update baseline dure and offer guidance to ensure the b scussion and reinforcement at monthly minimum, to ensure they are accurate a	configuration changes as required by aselines are consistent, accurate, and CIP compliance meetings; and	/ CIP-010-2 R1 Part 1.3;		-		

WECC reviewed 's internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that not implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.
WECC considered 's compliance history and determined there were no relevant instances of noncompliance.

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation				
WECC2017017206	CIP-004-6	R5; P5.1	Medium	Moderate	8/24/2016 (when documented process were not followed)	12/8/2017 Mitigation Plan completion	Compliance Audit	12/8/2017	2/8/2018				
Description of the Violat	ion (For purpose	s of this	During a Compliance Audit WECC determined that										
document, each violatio				it was in violation	of CIP-004-6 R5 Part 5.1.								
a "violation," regardless	-												
posture and whether it v confirmed violation.)	was a possible, o	r	Specifically, was unable to demonstrate that it implemented its access management program per its documented processes. Access Management Program spreadsheet when revoking electronic or unescorted physical access to its Medium Impact Bulk Electric System Cyber System (MIBCS) and their associated Cyber Assets. However, was not able to provide evidence on the spreadsheet of one employee's unescorted physical access being revoked, nor did provide any completed Access Request Forms as stated in its process document.										
			completed within 24 hours unescorted physical access however, the email contain	Additionally, was unable to provide evidence demonstrating that the process to remove one retiring employee's unescorted physical access was initiated upon a termination action and the removals completed within 24 hours of the termination action. WECC reviewed an email dated August 23, 2016, which submitted as evidence demonstrating the removal of an employee's ability for unescorted physical access upon a termination action. The email stated that an employee no longer worked for the City and should no longer have access to the primary and backup Control Centers; however, the email contained no confirmation that the employee's unescorted physical access had been removed within 24 hours of the termination action, nor was able to provide system logs to confirm access revocation had occurred within 24 hours of the termination action.									
			After reviewing all relevant information, WECC determined a decrease in scope from the original audit finding. Subsequent to the audit, was able to provide WECC evidence that demonstrated compliance of revocation of unescorted physical access for the one employee in scope. However, WECC determined that did fail to follow its documented processes for initiating removal of an employee's ability for CIP access upon a termination action.										
			The root cause of the violation was management policy guidance or expectations were not well defined, understood, or enforced. Specifically, staff lacked the understanding of required evidence to demonstrate compliance and the retention periods for said evidence.										
			The violation duration was 471 days. did not have detective controls in place that could have helped identify the issues sooner and to lessen the violation duration. WECC believes had it not been for 's Compliance Audit, the violation duration would have been longer due to the lack of detective controls. Based on this, WECC applied an aggravating factor and escalated the disposition treatment to an expedited settlement.										
Risk Assessment			This violation posed a minimal risk and did not pose a serious or substantial risk to the reliability of the BPS. In this instance, failed to provide evidence to demonstrate the removal of the ability for access or the actual unescorted physical access within 24 hours after a termination action. Such failure could result in unauthorized physical access to BES Cyber Systems with the intent to cause damage or outages; thereby potentially affecting the reliability of the BPS.										
			is a very small municipal power company that employs few staff and has an extremely low turnover. Based on this, WECC determined that likelihood of the potential harm occurring was low.										
Mitigation			To mitigate this violation,	:									
			updated its Access Mana holds monthly meetings		ogram and Procedure to reflect current	practices and detailed tracking of CIP	access management;						
					at have access and to document the per and Revocation Program and Procedures		al reviews, and revocation	ns; and					
Other Factors				WECC reviewed 's internal compliance program (ICP) and considered it to be a neutral factor in the penalty determination. Although has a documented ICP, WECC determined that implement its ICP with effective internal controls in place to identify and mitigate this issue in a timely manner.									
			WECC considered 's co	WECC considered 's compliance history and determined there were no relevant instances of noncompliance.									