

ResilienceDirect Essentials Questionnaire

**Introduction**

The ResilienceDirect Essentials scheme has been developed to fulfil two functions. Firstly, it provides managers and ResilienceDirect Administrators with the assurance that ResilienceDirect is being effectively managed within their organisation and that the End User Agreement conditions are being met. Secondly, through the Assurance Framework it offers a mechanism for organisations to demonstrate to partners and stakeholders that essential measures are in place to ensure the organisation manages ResilienceDirect safely and professionally.

The completed questionnaire attests that you meet the Requirements of the ResilienceDirect Essentials Scheme, which must be approved by a **senior manager or equivalent**, and will then be verified by a competent assessor from **RPS** (the Certifying Body). Such verification may take a number of forms, and could include, for example, a telephone conference. The verification process will be at the discretion of **RPS**.

**On completion of the questionnaire**

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| When you have completed the document you should email it to; |
| Mike Coward |
| XXXXXX |
| [mike.coward@rpsolutions.net](mailto:mike.coward@rpsolutions.net) |
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|  |
| If you wish to send it securely please contact Mike for details.  **REMEMBER TO ENSURE IT HAS BEEN SIGNED BY A SENIOR MEMBER OF YOUR COMPANY.** |
|  |

**Organisation Identification**

Please provide details as follows:

|  |  |
| --- | --- |
| Organisation Name (legal entity): |  |
| Sector: |  |
| Size of organisation micro, small, medium, large.  (See definition below) |  |
| No of employees |  |
| Point of Contact name:  Salutation (Mr, Mrs, Miss etc)  Initial  First  Surname |  |
| Job Title: |  |
| Email address: |  |
| Telephone Number: |  |
| Building Name/Number  Address 1  Address 2  Address 3  City  County  Postcode |  |
| Certification Body: | **RPS** |
| Do you wish to be **excluded** from the register of ResilienceDirect Essentials certified companies. Exclusion means customers will not be able to find your entry. If this is left blank you will be entered. |  |
| From time to time government departments and other interested bodies may wish to use your company for marketing ResilienceDirect. If you do not wish to be promoted in this way please enter **NO** in the box. If this is left blank you imply your consent. |  |

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| --- | --- | --- | --- |
|  | Question | Answer | Comment |
| 1 | At least every 3 months you ensure that the User Accounts for the Group(s) you administer are still current by checking the following: |  |  |
| 1.1 | The account names and email addresses reflect the Users details? |  |  |
| 1.2 | The User still requires access to the Group/Sub Group? |  |  |
| 1.3 | That User permission levels are appropriate? |  |  |
| 2 | If Role Based Accounts are used, there is an auditable system in place to determine who has used an account at anyone moment in time? |  |  |
| 3 | If you suspect a security breach has occurred you must report it to the Cabinet Office Civil Contingencies Secretariat as soon as possible? |  |  |
| 4 | Your IT Department has been briefed on the conditions of the End User Agreement in relation to adoption of best practice? |  |  |
| 5 | That you understand the core concepts and possess the skills below that are required to Administer ResilienceDirect responsibly and effectively: |  |  |
| 5.1 | I understand the concept of Group Permissions |  |  |
| 5.2 | I know how to accept/reject and add/delete Users from Group |  |  |
| 5.3 | I understand the concept of Page Permissions |  |  |
| 5.4 | I know how to deactivate a User Profile |  |  |
| 5.5 | I know how to Add/Delete Users from the Groups I Administer |  |  |
| 5.6 | I know how to change Permission Levels |  |  |
| 5.7 | I know how to reset Passwords and Unlock accounts |  |  |
| 6 | Relinquish your account when you no longer work within an environment responsible for and involved in emergency preparation and response or leave your current organisation. |  |  |
| 7 | Only use ResilienceDirect to facilitate activities associated with emergency planning, response and recovery. |  |  |
| 8 | Record the time and date that you are logged into the system (if you are using a Role Based account) |  |  |

Please provide any additional evidence to support your assertions above:

**Approval**

It is a requirement of the Scheme that a senior manager of the organisation has approved the information given. Please provide evidence of such approval:

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| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | When you have completed the document you should email it to; | | |  | | --- | | Mike Coward | | XXXXXX | | mike.coward@rpsolutions.net | | |  | |  | | If you wish to send it securely please contact Mike for details.  **REMEMBER TO ENSURE IT HAS BEEN SIGNED BY A SENIOR MEMBER OF YOUR COMPANY.** | | |  | |  | |  | |  | |  | |  | |
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