

# 2011 CA DFI IT SYSTEMS SURVEY

---

## SECTION VII: Business Continuity Plans (BCP)

- A. (1) Date the BCP was last updated: (MO/YR)  
(2) Date the plans were last tested: (MO/YR)  
(3) Date of the last offsite recovery test: (MO/YR)  
(4) Was the testing successful? (Y/N)  
(5) Did your Institution participate with the vendor's test? (Y/N/NA)
- B. If your Institution is serviced, did the IT servicer provide a summary of the most recent BCP test results? (Y/N)
- C. (1) Has the service provider and/or the back-up provider furnished a summary of their BCP to the Institution? (Y/N)  
(2) Has the Institution incorporated this information into its BCP? (Y/N)
- D. (1) Name and location (city/state) of the primary offsite back-up site/facility for disaster recovery:  
\_\_\_\_\_  
(2) Have you determined this site has sufficient capacity to manage your institution to process critical applications each day? (Y/N)  
(3) If not, what contingency plans do you have to mitigate this issue? \_\_\_\_\_  
(4) Has the Board accepted this risk? (Y/N)
- E. (1) Does your Institution use a Co-Location entity (COLO) for warehousing active IT equipment (network/mainframe) for primary or back-up purposes? (Y/N/NA)  
(2) If so, please name the COLO \_\_\_\_\_
- F. (1) Are data files required to be backed up periodically? (Y/N)  
(2) How often? (Daily/Weekly/Monthly)  
(3) Are critical/sensitive data files stored off-site? (Y/N)  
(4) If so, where? \_\_\_\_\_  
(5) If E-vaulting is used, indicate the vendor \_\_\_\_\_
- G. (1) Does your Institution use a Storage Area Network (SAN) for back-up purposes? (Y/N)  
(2) Where is the SAN located? \_\_\_\_\_  
(3) If offsite, list the name of servicer/entity: \_\_\_\_\_
- H. For **in-house systems**, list the name and location (city/state) of your primary offsite storage facility:  
\_\_\_\_\_
- I. Do your IT facilities have a UPS with sufficient battery life to power a graceful shutdown? (Y/N)
- J. (1) Do your facilities have a generator? (Y/N)  
(2) What IT equipment does it handle? \_\_\_\_\_
- K. (1) Are floor plan evacuation maps posted throughout the institution? (Y/N)  
(2) Do these maps indicate the locations of alternate exits, fire extinguishers, utility cut-off valves and switches, etc? (Y/N)