Responses Overview   Active

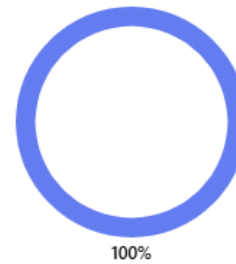| Responses	Average Time	Duration
7	09:14	3 Days

1. Are you and your team safe and available for recovery and business continuity of services?

- ● SAFE and **ALL TEAM MEMBERS** AVAILABLE   7
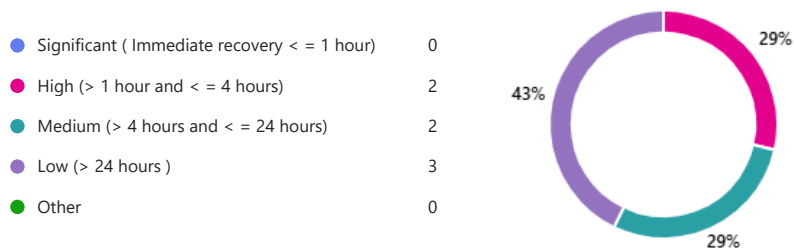- ● SAFE and NOT AVAILABLE   0
- ● NOT SAFE and NOT AVAILABLE   0

100%

2. Are you participating in the exercise?

- ● Yes   7
- ● No   0

100%

3. **What is the Business Impact Assessment Result for the Day - In terms of Recovery Time for Important Activities ?**

🔵	Significant (Immediate recovery < = 1 hour)	0
🔴	High (> 1 hour and < = 4 hours)	2
🟢	Medium (> 4 hours and < = 24 hours)	2
🟣	Low (> 24 hours)	3
🟢	Other	0

29%
43%
29%

4. **Which is the business plausible event identified in the day to activate the business continuity recovery exercise ?**

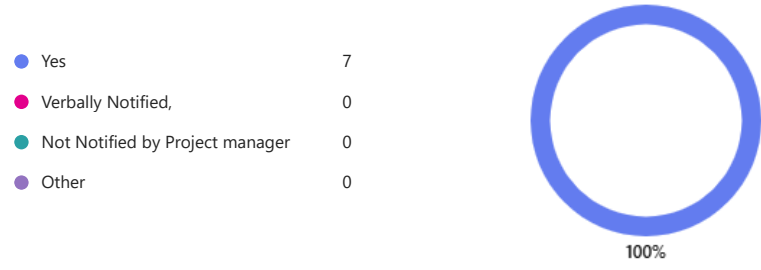|		
🔵	Transporters flash strike	0
🔴	Inability of team members to transit to office	0
🟢	Multiple PIN_CODES in the operating city impacted du...	0
🟣	Data replication fault requiring to work on DR...	0
🟢	Multiple associates facing Internet connectivity issues...	0
🔵	Connectivity issues due to device failures in Office...	0
🔴	Air Quality assessment in Office Building causing loss...	0
🟢	Geo-political escalation causing Extended Work...	3
🟣	Customer Environment Change Management Roll...	4
🟡	Other	0

5. **Have you as a project manager utilized POSTMAN and ENS to check wellness of your t
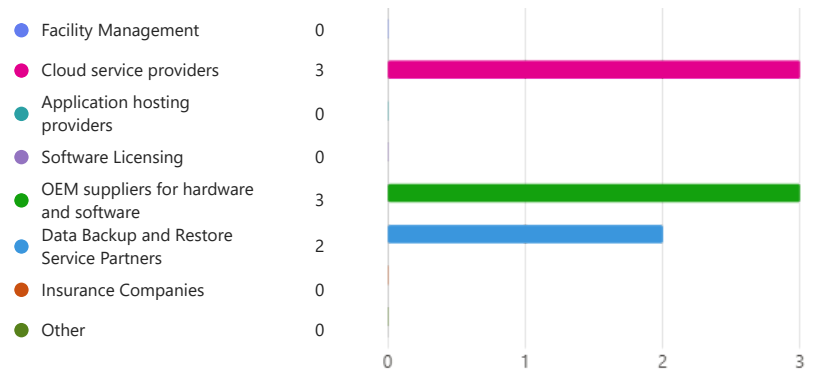eam as well as communicate a mass message for your team associates and peers ?**

🔵	Yes	2
🔴	No	4
🟢	PMs representative only	1

14%

29%

57%

6. **Do you have all continuity of business requirements specified by the customer availabl
e as a reference to validate the same in this business recovery test ?**

🔵	Yes	7
🔴	No	0
🟢	My project manager has the copy	0

100%

7. **Have you been identified as a critical associate in the contingency head count (CHC) for the project by your project manager and are you aware of your actions in the Continuity of Business Plan being tested ?**

● Yes	7
● Verbally Notified,	0
● Not Notified by Project manager	0
● Other	0

100%

8. **What are the category of suppliers you are dependent upon for recovery of business operations ?**

● Facility Management	0
● Cloud service providers	3
● Application hosting providers	0
● Software Licensing	0
● OEM suppliers for hardware and software	3
● Data Backup and Restore Service Partners	2
● Insurance Companies	0
● Other	0

9. **Have you communicated the activation of the Continuity of Business test to your customer contact team ?**

🔵 Yes	2
🔴 No	3
🔵 Do not have a Crisis Communication Plan	0
🟣 I am not the project manager	2
🟢 Other	0
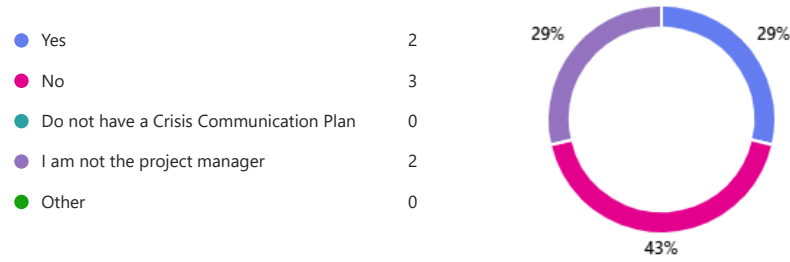
10. **Your Project falls under which of the below given Category**

🔵 Primary Project	7
🔴 Secondary Project	0
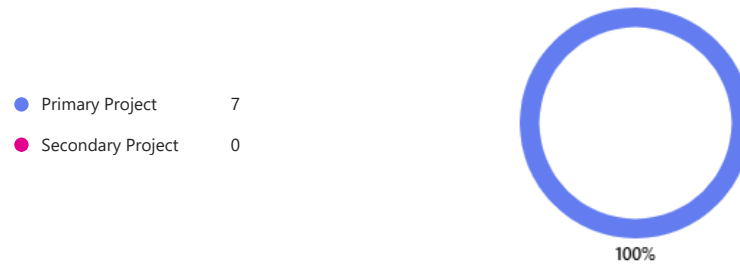
11. **Which are the type of copies you maintain of the Project Business Continuity Roll Up Plan and Vital records as a Backup ? Select all applicable options below which can be exhibited to the Auditor on Demand and quick record retrieval**

● Electronic copy with manager	1
● Electronic copy with customer contact	2
● Electronic copy with team members	3
● Electronic and Hard copy of the Continuity Plan and Vit...	1
● Electronic and Hard copy of the Continuity Plan and Vit...	1
● No Second copy maintained	0
● Dependent on LIGHTHOUSE plan copy only	2
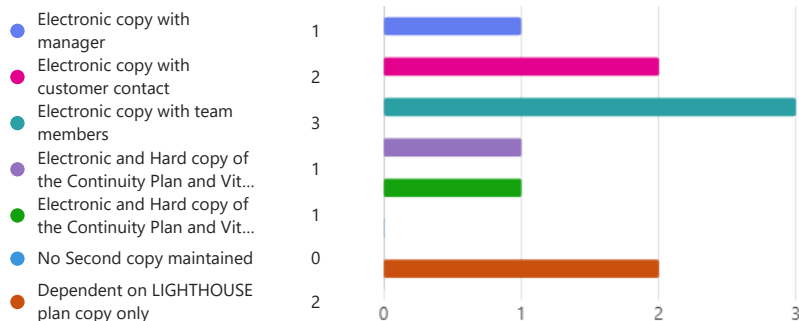
12. **Have you scheduled backups, and tested the restoration of the backup of vital record s ? Choose all options below. Ensure you have the copy of exhibits to display the resto red number of files and time taken for restoration meeting RTO (Recovery time object ive) and RPO (Recovery Point Objective). Assessors / Auditor could request for the sa me On Demand.**

● Yes scheduled but not tested	0
● Yes scheduled and tested	4
● Not scheduled and Not tested	0
● Self tested but not scheduled	0
● Not Tested	3

43% 57%
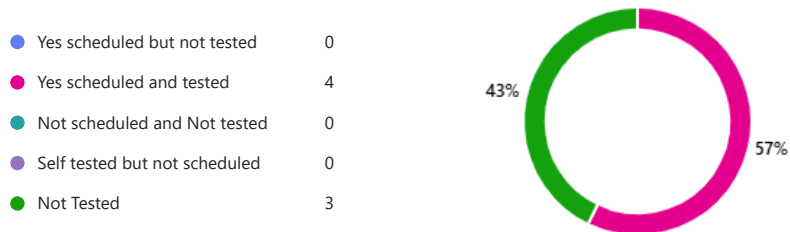
13. **Select your Project ID** *{ Please place your cursor in the [Select your answer] -> Press CTRL+F [Search for your project id] and select.* **In case you do not find your project id please use the OTHERS option and You may either use the drop down or select the OTHERS option and input your project id. MS Forms has this limitation which we will speak to Microsoft for a better UI.. Thanks for understanding.}**

● Y.IN2401303	3	43%
● Other	4	57%

14. **Please select service line/s you are aligned to from the list below. If the service line is not listed, you may choose Others and provide the Service Line Name and the leader's name**

Service Line	Count
[K SUNDARAM], Communications-ADMS	0
[R V,Narasimham], Engg Services Service Line	3
[Purohit,Kunal], NGS Service Line	0
[Kumar,Kshitij], BFSI Service Line	0
[Dhawan,Sahil], DEA Service Line	0
[Mangal,Manish], Network Services Service Line	0
[Singh,Saket], CIS Service Line	0
[Pai,Ajith], Hi-Tech ME Service Line	0
[PALLE,KRISHNA KUMARI], DIG Service Line,	0
[Mangal,Manish], FUNC LCC	0
[Soneja,Atul], COO Delivery SUPPORT	0
[Soneja,Atul], COO Delivery Excluding SL	0
[Sen,Birendra], BPO_DEL,	0
[Sen,Birendra],BPO-DOM	0
[Ramachandran,Seshan], HLS Ser,vice Line,	0
[Karkera,Sunil], XDS CX Service Line	0
[N S,Manikantan], Manufacturing Service Line	0
[N S,Manikantan], Function Thirdware	0
[Agnihotri,Sanjay], ZEN3	0
Other	4