ERO Enterprise Registered Entity Post Audit Feedback Survey

We appreciate the time and effort your company has expended in preparation for and support of the recent Compliance Audit[[1]](#footnote-1) (Audit) of your organization. We are always interested in improving our process and would appreciate your feedback. The Electric Reliability Organization (ERO) Enterprise takes this feedback seriously, and every feedback survey will be reviewed to help assess the performance of the ERO Enterprise in compliance monitoring activities. Please feel free to privately discuss your feedback with NERC Compliance Staff (complianceoversight@nerc.net) or Regional Entity Compliance Management. Thank you for your time and effort.

In responding to the survey, please note the following:

1. All responses must be submitted through the [online survey tool](https://www.surveymonkey.com/r/PJS7KDX). This Word version is provided to show a complete view of the survey and to assist with compiling responses, if needed.
2. **Questions 1-4 are mandatory and you will not be able to move ahead unless completed.**
3. **Questions 5-17 are general questions intended to gain feedback to improve ERO Enterprise processes, including questions that apply to participants of the** Multi-Region Registered Entity (MRRE) Coordinated Oversight Program.
4. All data will be sent to and analyzed by NERC.
5. Where possible, please provide specific and detailed examples to include quantifiable data of any issues raised or suggested enhancements.

Please feel free to provide additional comments and suggestions in the open text sections, especially if "Needs Improvement" or "Exceeds Expectation" is selected. The survey takes approximately 15 minutes to complete.

|  |
| --- |
| **Compliance Audit Information** |

**Compliance Audit Information**

1. Registered Entity Information:

|  |  |
| --- | --- |
| Registered Entity Name or MRRE Group Name: |  |
| Registered Entity NCR # or MRRE Group #:  |  |
| Submitter Name: |  |
| Title: |  |
| Audit Team Lead: |  |

1. Audit Start Date: Click here to enter a date.
2. Regional Entity or Lead Region for MRRE: Choose an item.
3. Audit Scope: Choose an item.

|  |
| --- |
| **Pre-Audit (Audit Planning Stage)** |

1. Did the Regional Entity clearly communicate how risks to the Bulk Power System (BPS), posed by your organization, informed the Audit scope? Please comment as to what could have made this process more understandable.

|  |  |  |  |
| --- | --- | --- | --- |
| Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
|[ ] [ ] [ ] [ ]
| Additional Comments and Suggestions: |

1. Did the audit provide you with the opportunity to explain processes, practices, and internal controls related to the risk categories and associated Standards?

|  |  |  |  |
| --- | --- | --- | --- |
| Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
|[ ] [ ] [ ] [ ]
| Additional Comments and Suggestions: |

1. How clearly did the Regional Entity communicate the Audit expectations including, but not limited to, Audit dates, agenda, scope, objectives, submittal of Reliability Standard Audit Worksheets, the right to object to Audit Team members, logistics, conduct of interviews, Request for Information or Data Request process?

|  |  |  |  |
| --- | --- | --- | --- |
| Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
|[ ] [ ] [ ] [ ]
| Additional Comments and Suggestions: |

|  |
| --- |
| **Audit Implementation (Fieldwork Stage)** |

1. The Audit Team:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
| The team performed their duties in a professional and impartial demeanor. |[ ] [ ] [ ] [ ]
| The team demonstrated a high level of knowledge and expertise around the risk categories and associated Standards in scope for this Audit. |[ ] [ ] [ ] [ ]
| The team composition lead to an efficient and effective audit. |[ ] [ ] [ ]  [ ]  |
| Additional Comments and Suggestions: |

1. Audit Team Communication:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
| The schedule, provided flexibility to accommodate your organization, and provided prompt and timely communication. |[ ] [ ] [ ] [ ]
| Prompt and timely communication regarding Data Requests and the sufficiency of time to deliver the requested data was provided. |[ ] [ ] [ ] [ ]
| Audit progress and current status of findings during scheduled debriefs were provided. |[ ] [ ] [ ] [ ]
| Additional Comments and Suggestions: |

|  |
| --- |
| **Post-Audit (Reporting)** |

1. The Audit Team:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Exceeds Expectations | Meets Expectations | Below Expectations | Needs Improvement |
| Audit findings and the basis for the findings was communicated. |[ ] [ ] [ ] [ ]
| The timeline for development of the Audit Report and, if Potential Noncompliance was identified, the right to due process was communicated. |[ ] [ ] [ ] [ ]
| Your organization was notified about Areas of Concern and how the Areas of Concern could lead to a violation and/or provided and understanding of risk. (Leave blank if N/A) |[ ] [ ] [ ] [ ]
| Formal Recommendations for improving your organization’s processes, practices, internal controls, etc. were communicated(Leave blank if N/A) |[ ] [ ] [ ] [ ]
| Additional Comments and Suggestions: |

1. Are there opportunities for improvement noted by your organization for either the Audit team or Audit process?

|  |  |
| --- | --- |
|  |  |
|  |  |
| Additional Comments and Suggestions: |

1. Please provide details regarding the Regional Entity staff overall performance that you believe are noteworthy, commendable, innovative, or may be considered a best practice.

|  |
| --- |
| Additional Comments and Suggestions: |

1. Overall, what value has risk-based compliance monitoring brought to your organization? Please provide comments or suggestions on how tools, processes can be improved as well as comments or suggestions regarding outreach and/or training that have not been previously addressed.

|  |
| --- |
| Additional Comments and Suggestions: |

|  |
| --- |
| **Multi-Region Registered Entity Coordinated Oversight Program (Program)*****Skip this Section if your organization does not participate in the Program.***  |

1. Please specify Lead Regional Entity and Affected Regional Entity(ies).

|  |  |
| --- | --- |
| LRE: |  |
| ARE(s): |  |

1. Overall, does your company’s Audit experience support continued participation in the Program?

|  |
| --- |
|[ ]  Yes |
|[ ]  No |
| Additional Comments and Suggestions: |

1. Did your company experience increased efficiencies during the Audit due to inclusion in the Program?

|  |
| --- |
|[ ]  Yes |
|[ ]  No |
| Additional Comments and Suggestions: |

1. Please provide comments on successes or areas for improvement (i.e. tools, processes, or transparency) identified due to participation in the Program.

|  |
| --- |
| Additional Comments and Suggestions: |

1. This survey also applies to source feedback on Spot Checks conducted by the Regional Entities. [↑](#footnote-ref-1)