Unitrends Compliance Manager

1. What documents does Unitrends Compliance Manager provide for GDPR?

Unitrends Compliance Manager provides the scans and documentation to pass a GDPR audit. **Primary documents include:**

- **Unitrends Compliance Manager for GDPR Checklist** - The GDPR Auditor Checklist gives you a high-level overview of how well the organization complies with the GDPR provisions. The checklist details specific compliance items, their status, and helpful references. Use the checklist to quickly identify potential issues to be remediated in order to achieve compliance.

- **ISO 27001-2013 Auditor Checklist** - The ISO 27001 Auditor Checklist gives you a high-level overview of how well the organization complies with ISO 27001-2013. The checklist details specific compliance items, their status, and helpful references. Use the checklist to quickly identify potential issues to be re-mediated in order to achieve compliance.

- **EU GDPR Policies and Procedures** - One of the first requirements is to have a set of policies and procedures used to implement Personal Data security and compliance with GDPR. Some organisations don’t have a set of data protection policies – or at least one that conforms to GDPR provisions. The tool provides an “out of the box” version of policies and procedures for GDPR for use by those organisations.

- **ISO 27001 Policies and Procedures** - Guidance suggests that compliance with ISO 27001 can be used as a means to demonstrate technical compliance with the information security aspects of GDPR. The tool provides an “out of the box” version of policies and procedures for ISO 27001 for use by your organisation. These work in tandem with our GDPR P&P.

- **Risk Treatment Plan** - Based on the findings in the GDPR Compliance Assessment, the organization must create a Risk Treatment Plan with tasks required to minimize, avoid, or respond to risks. Beyond gathering information, Unitrends Compliance Manager for GDPR provides a risk scoring matrix that an organization can use to prioritize risks and appropriately allocate money and resources and ensure that issues identified are issues solved. The Risk Treatment plan defines the strategies and tactics the organization will use to address its risks.

- **Data Protection Impact Assessment** - The Data Protection Impact Assessment (DPIA) is the foundation for the entire GDPR compliance and IT security program. The DPIA identifies what protections are in place and where there is a need for more. The Risk Analysis results
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in a list of items that must be remediated to ensure the security and confidentiality of Personal Data at rest and/or during its transmission.

- **GDPR Evidence of Compliance** - Compiles compliance information from both automated scans, augmented data, and questionnaires. Gathers evidence into one document to back up the Auditor Checklists with real data.

**Supporting documents include:**

- **External Port Use Worksheet** - This worksheet allows you to document business justifications for all of the allowed external ports, the protocol configured to use a specific port, and the documentation of any insecure configurations implemented and in use for a given protocol.

- **User Access Review Worksheet** - The User Access Worksheet is used to augment the user data that was collected during the internal network scan.

- **Asset Inventory Worksheet** - The Asset Inventory Worksheet is used to augment the asset data that was collected during the internal network scan. Details include the asset owner, acceptable use, environment, backup agent status, as well as device and sensitive information classification. The Sensitive Information Classification is used to determine the risk to the organization in the event of a security incident where the asset’s information is compromised.

- **GDPR Compliance Questionnaire** - The GDPR Compliance Questionnaire will collect information about the network and environment that cannot be discovered through automated scans. This includes information about the Data Protection Officer, principles relating to processing of personal data, privacy policies, and third-party information processors.

- **ISO 27001 Compliance Questionnaire** - This questionnaire will collect information required to demonstrate ISO 27001 compliance that cannot be discovered through automated scans.

- **Site Walkthrough Checklist** - Assess the physical security and the workplace environment as it relates to information security. It is best done on-site as it requires identifying risk that may currently exist in your environment outside the computer network itself.

- **Personal Data Scan System Selection Worksheet** - The Personal Data Scan System Selection Worksheet allows you to specify which systems are scanned for personal data (PD) during the assessment process. A comprehensive scan should be performed annually to help identify and document all potential locations for personal data as defined by GDPR.

- **Personal Data Validation Worksheet** - During the Personal Data (PD) scan, suspected PD may be detected in files stored on network and stand-alone computers. The Personal Data Validation Worksheet report presents a record of which computer files were verified by a participant in the GDPR assessment process as containing actual instances of PD.

- **External Vulnerability Scan Detail by Issue** - Detailed report showing security holes and warnings, informational items including CVSS scores as scanned from outside the target network.

- **Internal Vulnerability Scan Detail by Issue** - Detailed report showing security holes and warnings, informational items including CVSS scores as scanned from inside the target network. Closing internal vulnerabilities helps prevent external attackers and internal users from exploiting weaknesses typically protected by external firewalls.

2. What documents does Unitrends Compliance Manager provide for HIPAA?

Unitrends Compliance Manager provides the scans and documentation to pass a HIPAA audit. **Primary documents include:**

- **HIPAA Security Rule Auditor Checklist** - The HIPAA Security Rule Auditor Checklist gives you a high-level overview of how well the organization complies with the HIPAA provisions. The checklist details specific compliance items, their status, and helpful references.

- **HIPAA Policies and Procedures** - One of the first requirements is to have a set of policies and procedures used to implement ePHI data security and compliance with HIPAA. Some organizations don’t have a set of data protection policies – or at least one that conforms to HIPAA provisions. The tool provides an “out of the box” version of policies and procedures for HIPAA for use by those organizations.

- **HIPAA Management Plan** - Based on the findings in the HIPAA Compliance Assessment, the organization must create a HIPAA Management Plan with tasks required to minimize, avoid, or respond to risks. Beyond gathering information, Unitrends Compliance Manager for HIPAA provides a risk scoring matrix that an organization can use to prioritize risks and appropriately allocate money and resources and ensure that issues identified are issues solved.

- **HIPAA Risk Analysis** - The HIPAA Risk Analysis is the foundation for the entire HIPAA compliance and IT security program. The HIPAA Risk Analysis identifies what protections are in place and where there is a need for more. The Risk Analysis results in a list of items that must be remediated to ensure the security and confidentiality of ePHI at rest and/or during its transmission.
• **HIPAA Evidence of Compliance** - Compiles compliance information from both automated scans, augmented data, and questionnaires. Gathers evidence into one document to back up the HIPAA Security Rule Auditor Checklist with real data.

**Supporting documents include:**

• **External Port Use Worksheet** - This worksheet allows you to document business justifications for all of the allowed external ports, the protocol configured to use a specific port, and the documentation of any insecure configurations implemented and in use for a given protocol.

• **User Identification Worksheet** - The User Identification Worksheet is used to augment the user data that was collected during the internal network scan.

• **Computer Identification Worksheet** - The Computer Identification Worksheet is used to augment the asset data that was collected during the internal network scan. Details include the Device Name, Device Type, IP Address, Operating System, System Description, as well as device and sensitive information classification. The ePHI Access Classification is used to determine the risk to the organization in the event of a security incident where the asset’s information is compromised.

• **HIPAA Policies and Procedures Verification Worksheet** - The HIPAA Policy and Procedures Verification Worksheet will collect information about the network and environment that cannot be discovered through automated scans. This includes information principles relating to processing of ePHI, including sanctions, incident response, and Business Associates of the Covered Entity.

• **HIPAA On-Site Survey** - Assess the physical security and the workplace environment as it relates to information security. This worksheet includes information about the Information Security Officer. It is best done on-site as it requires identifying risk that may currently exist in the client’s environment outside the computer network itself.

• **ePHI Scan System Selection Worksheet** - Understanding where you have ePHI Data is an important component of HIPAA compliance. The Personal Data Scan System Selection Worksheet allows you to specify which systems are scanned for ePHI during the assessment process. A comprehensive scan should be performed annually to help identify and document all potential locations for personal data as defined by HIPAA.

• **ePHI Validation Worksheet** - During the ePHI scan suspected ePHI may be detected in files stored on network and stand-alone computers. The ePHI Validation Worksheet report presents a record of which computer files were verified by a participant in the HIPAA assessment process as containing actual instances of ePHI.

• **External Vulnerability Scan Detail by Issue** - Detailed report showing security holes and warnings, informational items including CVSS scores as scanned from outside the target network. External vulnerabilities could allow a malicious attacker access to the internal network.

• **Drive Encryption Worksheet** - Encryption is such an effective tool used to protect data that if an encrypted device is lost then it does not have to be reported as a data breach. The Disk Encryption Report identifies each drive and volume across the network, whether it is fixed or removable, and if Encryption is active.

• **Network Share Identification Worksheet** - The Network Share Identification Worksheet takes the list of network shares gathered by the Data Collection process and lets you identify those that store or access ePHI.

• **HIPAA Compliance PowerPoint** - Use the generated PowerPoint presentation as a basis for conducting a meeting presenting your findings from Unitrends Compliance Manager assessment process. General summary information along with the risk and issue score are presented along with specific recommendations and next steps.

• **Security Exceptions Worksheet** - It allows you to document explanations on suspect items. Your explanation can include why various discovered items are not true issues and indicate possible false positives. Additionally, you can explain why a certain compliance requirement should not apply to you – or an alternative way in which you have met the requirement.