

**Defense Security Service  
SIPRNET CTO 10-133  
Plan of Action and Milestone Template (POAM)**

| Company Name | DSS UID | ISSM | ISSM PHONE NUMBER |
|--------------|---------|------|-------------------|
|              |         |      |                   |

| Item Number | Non-Compliance   | Mitigation Plans and Adjustments   | Milestone Date Based on Risk Level | ISSM/FSO Approval | Status (Open/Closed) | DSS Approval Date and Determination (Open/Closed) | Risk Level<br>Low/<br>Medium/<br>High |
|-------------|--|--|------------------------------------|-------------------|----------------------|---|---------------------------------------|
| 1           | Disable all write capability.  | <p><b>a.</b> Modify technical settings to disable write capabilities as needed.</p> <p><b>b.</b> Confirm write capability is disabled through testing.</p> <p><b>c.</b> Document how write capabilities have been disabled and tested in a “Classified Transfer Procedure” attachment to Security Documentation.</p> |                                    |                   |                      |   |                                       |
| 2           | Establish a program to appoint and account for authorized personnel responsible for conducting data transfers. | <p><b>a.</b> Obtain a RAL from sponsor allowing DSS approval of Authorized transfer personnel.</p> <p><b>b.</b> Document authorized transfer individuals in a “Classified Transfer Procedure” attachment to Security Documentation.</p>  |                                    |                   |                      |   |                                       |

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|---|---|--|--|--|--|--|--|
| 3 | Create and maintain a logbook for any document transferred by the contractor.     | <p><b>a.</b> Establish a log book that includes:</p> <ul style="list-style-type: none"> <li>• Date/time of transfer</li> <li>• Document subject</li> <li>• Document Type</li> <li>• Document Size</li> <li>• Transfer authorizing individual</li> <li>• Name of transferring authority</li> <li>• Computer Name/Unique ID used for Transfer</li> <li>• Confirmation of media scan after transfer.</li> </ul> <p><b>b.</b> Document log book entries in a “Classified Transfer Procedure” attachment to Security Documentation.</p> |  |  |  |  |  |
| 4 | <p>Scan all flash media transfers.</p> <p>(Applicable if flash media is used)</p> | <p><b>a.</b> Install and Confirm ability to scan Flash media with NSA’s File Sanitization Tool (FiST) with Magik Eraser (ME).</p> <p><b>b.</b> Document sanitization tool use in a “Classified Transfer Procedure” attachment to Security Documentation.</p>   |  |  |  |  |  |
| 5 | Re-Accredit Information system.   | Submit revised security documentation including Risk Acceptance Letter (RAL) and additional “Classified Transfer Procedure” along with any outstanding POAM items  |  |  |  |  |  |

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|---|----------------------------|--|--|--|--|--|--|
|   |                            | to DSS for re-<br>accreditation.   |  |  |  |  |  |
| 6 | Implement HBSS.            | Coordinate with Sponsor and DSS to implement a Host Based Security System on all systems connected to SIPRNET. |  |  |  |  |  |
| 7 | Report compliance to DISA. | Document compliance in Vulnerability Management System (VMS).  |  |  |  |  |  |
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|   |                            |  |  |  |  |  |  |

\* Milestone dates will be determined on a High/Medium/Low scale. High = 90 days, Medium = 180 days, Low = 365 days. The criteria for these elements are listed on the following page.

## Plan of Action and Milestone Template (POAM) Guidance

- The POAM apply to initial SSP submissions, as well as existing accredited systems that require accreditation under the new DSS Configuration Baseline.
- \*C/I – Enter C if non-compliance issue was identified during the C&A process. Enter I if non-compliance issue was identified during inspection. Milestone date for non-compliance issues should be completed within **XX** days.
- Milestone dates will be determined on a High/Medium/Low scale. High = 90 days, Medium = 180 days, Low = 365 days. Risk level settings will be vetted against each configuration setting and the NIST risk-factor (action item).
  - \* High Impact Code. The absence or incorrect implementation of the IA control may have a severe or catastrophic effect on system operations, management, or information sharing. Exploitation of the weakness may result in the destruction of information resources and/or the complete loss of mission capability. High impact codes will be assessed on a case-by-case basis. If approved, system must be compliant within 90 days.
  - \*Medium Impact Code. The absence or incorrect implementation of the IA control may have a serious adverse effect on system operations, management, or information sharing. Exploitation of the weakness may result in loss of information resources and/or the significant degradation of mission capability. Must be compliant within 180 days
  - \*Low Impact Code. The absence or incorrect implementation of the IA control may have a limited adverse effect on system operations, management, or information sharing. Exploitation of the weakness may result in temporary loss of information resources and/or limit the effectiveness of mission capability. Must be compliant within 365 days
- Items under Status are considered closed when validated by DSS.
- Self-certified systems – All new systems will require a new master and will have to be compliant with the new settings. To add a new workstation to an existing system by self-cert, it must be configured IAW the enhanced requirements. They may either update the entire IS at that time, or this may push them into a POAM whereby they plan migration of the entire IS to the new settings
- GCA must approve non-compliant settings due to program compatibility or contract requirements. Non-compliance with baseline configuration settings resulting from operating system limitations or capabilities will not require GCA approval.
- Documentation must reflect which items cannot be met, as well as why it cannot be met.
- All non-compliant issues that come up during an inspection that are not corrected on the spot must be put in the POAM. This will make a formal, trackable date for resolution.