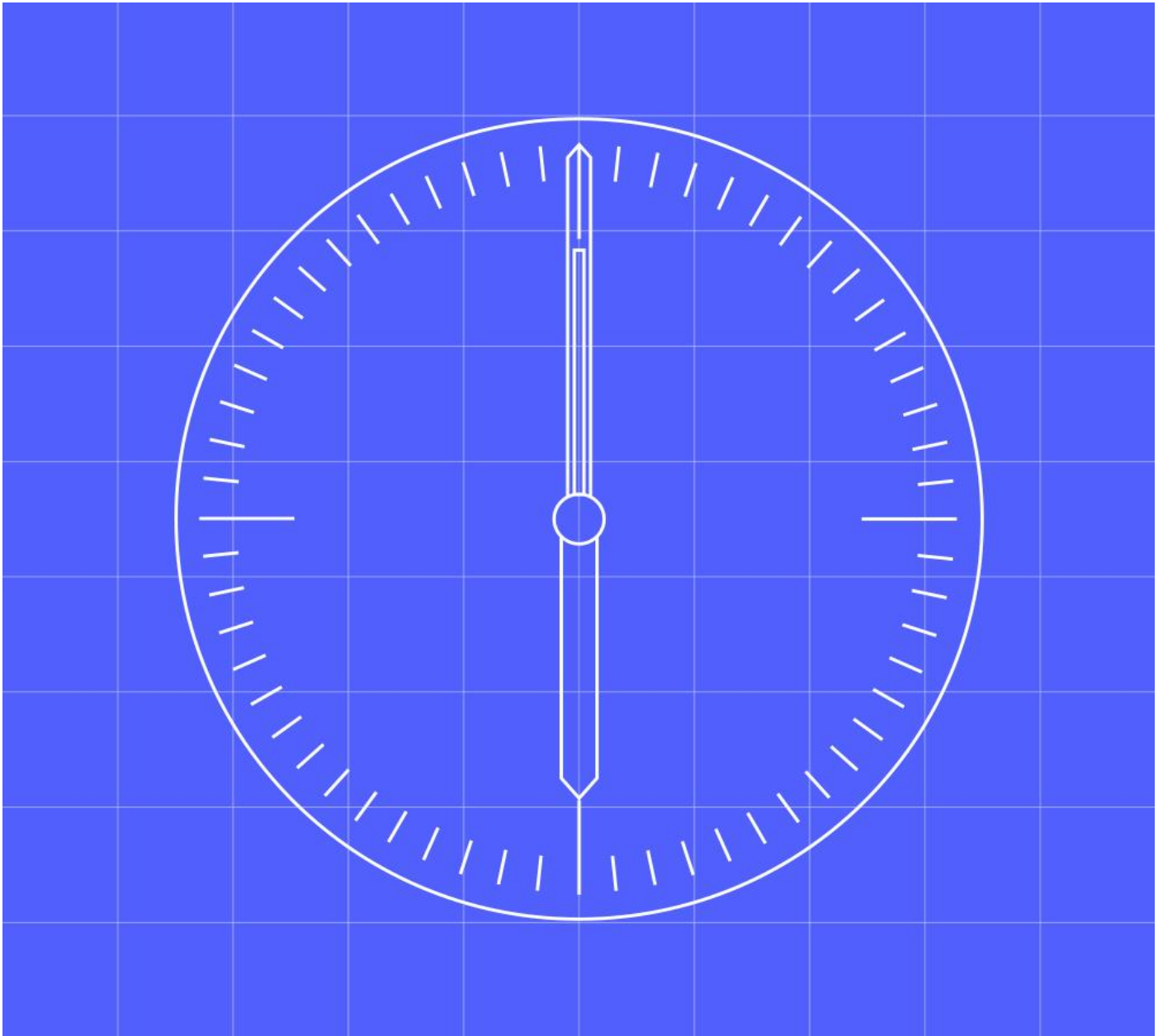


Self Qualification Assessment Document



Document Owner
BSC – Code Body
Status
Draft

Document Number
MHHS-DEL2876
Date
08/07/2024

Version
0.1
Classification
Public

1. Contents

1. Contents	2
2. House Keeping	3
2.1 Change Record	3
2.2 Linked Documents	3
3. Document Instructions	3
4. Organisation Section	5
4.1 Company Sign Off	5
4.2 General Information	6
4.3 Project Management	7
4.4 Change Management and Risk Assessment Process	8
4.5 Testing Declaration and Evidence Submission	9
4.6 Operational Readiness	10
4.7 Information Security and Data Protection	11
4.8 Initial Data Population and/or Data Migration	16
4.9 Data Integration Platform (DIP)	17
4.10 Interface Management	20
5. Role-Specific Sections	23
5.1 Advanced Data Services	24
5.2 Smart Data Services (SDS)	29
5.3 Unmetered Supplies Data Service (UMSDS)	37
5.4 Supplier	40

2. House Keeping

2.1 Change Record

Date	Author	Version	Change Detail
08/07/2024	Elexon Performance Assurance	0.1	Draft version for consultation. This document has not been through the BSC PAB governance process yet. The information provided may change, subject to review.

2.2 Linked Documents

Name	Link
Qualification Approach and Plan	https://www.mhhsprogramme.co.uk/testing/qualification/qualification-approach-and-plan
MHHS Qualification Glossary	MHHS Qualification Glossary

3. Document Instructions

The Qualification Assessment Document (QAD) is the mechanism through which all Programme Participants will provide the evidence required by Code Bodies for MHHS Qualification. Code Bodies expect Programme Participants to complete the QAD at an organisation level, covering all Market Roles they intend to operate within the new MHHS arrangements.

For further details on the Qualification process please refer to the [Qualification Approach and Plan \(QA&P\)](#) which sets out the purpose of MHHS Qualification during the MHHS Programme and the high-level plan and requirements for Programme Participants to undertake in relation to the Balancing and Settlement Code (BSC) and Retail Energy Code (REC).

To support the efficient review of evidence and to avoid unnecessary delay between the completion of Qualification Testing (QT) / MHHS Programme Systems Integration Testing (SIT) and MHHS Qualification being approved, evidence should be provided via an Initial QAD Submission and a Final QAD Submission. Where test evidence has been uploaded into Microsoft Azure DevOps (ADO), this should be referenced within the QAD, rather than uploading evidence in multiple places.

A Programme Participant must provide the following in its **Initial QAD Submission**:

- Confirmation of Pre-Integration Testing (PIT) completion (test completion report including defects that cannot be resolved through PIT with supporting work-off plans and agreement with Code Bodies where elements of PIT have been deferred for later completion), which is outlined in section 4.2.2,
- Confirmation that it has service designs/Local Work Instructions (LWIs) covering each relevant process, which is outlined in section 4.2.3,
- Details of operational controls e.g. exception management etc, which is outlined in section 4.3.1, and
- Other organisation specific information requested in the Initial QAD Submission (not reliant on testing).

Code Bodies will then review this information and work with the Programme Participant to clarify and assure that the information provided meets Code Body requirements for MHHS Qualification.

Once the Programme Participant has completed QT/SIT, it must provide its **Final QAD Submission** covering the following:

- Confirmation of QT/SIT completion (test completion report including defects that cannot be resolved through

SIT/QT with supporting work-off plans that have been agreed by Code Bodies), which is outlined in section 4.2.4.

- Confirmation that it has completed DIP User requirements e.g. information security responses reviewed and agreed by DIP Manager and any contractual agreements, required between the Programme Participant and the DIP Manager to become a DIP User, have been signed (this includes DIP Connection Providers operating on a Programme Participant's behalf), which is outlined in section 4.5.

All sections must be completed during the initial submission of the QAD, and verified for the final submission of the QAD, unless stated.

The relevant MHHS requirements are provided for reference only, and Participants are not expected to delineate their responses for each MHHS requirement. Participants should respond to the specific questions in the form, using the guidance provided.

The finalised QAD must be signed by a Company Director (or delegate for roles governed only under REC) to confirm that the information and evidence provided is complete and accurate.

Acronyms and defined terms used across the MHHS Programme are hosted in a MHHS Programme artefact - [MHHS Qualification Glossary](#), and further terms relating to qualification are defined in 'Appendix A – Glossary' of the Qualification Approach and Plan.

[Although Code Bodies have provided a Word version of the QAD for this consultation, the format of the QAD submission is likely to change to an electronic version which will be demonstrated at the appropriate Qualification Working Group (QWG) meeting. Please note that Code Bodies will provide further guidance on the evaluation criteria for each section as part of a QAD walkthrough webinar and within the electronic version.]

4. Organisation Section

4.1 Company Sign Off

To be completed in final submission of the QAD

Name of Programme Participant Organisation:

Except for the matters detailed below (delete if not applicable), having made appropriate enquiries of other directors and officials of the organisation, I confirm that:

- 1) The information and evidence provided in this Qualification Assessment Document is true and accurate and not misleading because of any omission or ambiguity or for any other reason.
- 2) The processes and controls noted within this Qualification Assessment Document are an accurate reflection for our arrangements for MHHS live operations, and I acknowledge that any further changes will be required to be disclosed to BSC and/or REC as detailed in 7.3.7 of the Qualification Approach and Plan.
- 3) The arrangements as documented are adequate and appropriate to deliver and operate our in-scope service(s) in-line with the BSC obligations brought about by Marketwide Half-Hourly Settlement.

Please detail any exception(s) here:

Approved by

Print Name

Signature (Electronic)

Position

Date

Note: Signed by Authorising Director i.e. a registered Director of the company (verifiable with Companies House, or in the case of a non-UK company a person having an equivalent position)

4.2 General Information

Questions	Guidance	Participant Response	
What is the name of the organisation as registered with Companies House?			
What is your Company Registration Number as per Companies House			
What is the MPID(s) with the Role Code(s) that you wish to apply for MHHS Qualification?	<i>Please note while we will endeavour to grant you your preferred MPID, this will be subject to availability.</i>	Supplier	
		ADS	
		SDS	
		UMSDS	
		LDSO/SMRA/UMSO	
Who is the Key Contact?	Please provide their Name, Role and Email		
Who are the authorised signatories for the service(s) for Qualification matters?	Qualification-related documentation should be authorised by a registered Director of the company (verifiable with Companies House), for and on behalf of their company in respect of Qualification issues. A sign off sheet has been provided for this purpose.		

4.3 Project Management

Questions	Guidance	Participant Response
4.3.1 How have you ensured that the development or modification of the service, including systems and processes, has been planned, monitored and controlled properly using a structured project management framework in accordance with Good Industry Practice?	<p>Good Industry Practice should include the following:</p> <ul style="list-style-type: none">(1) The development or modification should have a senior management supporter or 'sponsor' and/or an appropriate project board.(2) The scope, and as appropriate, the project's deliverables, phases and/or milestones should be defined.(3) Risks/issues which threaten project timescales, costs or overall success should be identified and planned for.(4) Formal mechanisms to initiate the project, grant financial approval, instruct relevant parties to proceed, monitor progress and, finally, close the project should exist.(5) On completion of a project/phase, there should be an evaluation of its success.(6) All documentation relating to the project should be retained, either through a physical central location or a document register.	

4.4 Change Management and Risk Assessment Process

Questions	Guidance	Participant Response
<p>4.3.1 How do you ensure that any risks arising as a result of changes to be made to your organisation, systems and processes are identified and assessed?</p>	<p>Ongoing procedures should exist to ensure that all risks identified are assessed to ensure that any issues which present a risk to Settlement are identified and addressed.</p> <p>Procedures to ensure that where a risk has been identified, a link has been provided to the mitigating action to be taken to address the risk.</p>	
<p>What change control procedures do you have and how do you ensure these are operating effectively?</p>	<p>The response should address the following areas:</p> <p>(1) An individual (or team) is responsible for coordinating the change control process to ensure that it operates effectively and for ensuring that any potential issues are addressed.</p> <p>(2) Management have developed and documented change control procedures covering the implementation of (where relevant) new system software, application software, network systems, computer hardware operating programs as well as manual processes and procedures.</p> <p>(3) Change control procedures are in place to identify all changes made to the relevant sections of the BSC and other relevant Code Subsidiary Documents and ensure that the necessary changes to the service and relevant local working procedures are implemented within the required timescale.</p> <p>(4) Formally documented procedures have been developed and implemented to ensure that only authorised changes are processed.</p> <p>(5) Staff are aware of the change control procedures and their individual roles and responsibilities.</p> <p>(6) Appropriate data (including paper files or simple spreadsheets and databases) and system back-ups are taken prior to and after each change to ensure an operational system can be recovered if the change does not function as expected.</p> <p>(7) Management instigates regular reviews, perhaps by internal or external auditors, of the practices adopted by staff to ensure compliance with the change control procedures.</p> <p>(8) Procedures to identify whether any changes made internally will impact interfaces with other relevant BSC Systems and the services operated by other participants to ensure that these are notified to BSCCo and executed in accordance with the BSCP40.</p>	

4.5 Testing Declaration and Evidence Submission

Questions	Guidance Points	Participant Response
<p>4.2.1. Please confirm if there have been any changes to the information provided in the Pre-Qualification Submission form, or Placing Reliance Proposal, if you submitted one.</p>	<p>[Yes/No/Not Applicable]</p> <p>If yes, please provide an updated Pre-Qualification Submission or Placing Reliance form, highlighting the parts that have changed.</p> <p>If you were not required to submit a pre-qualification submission, please select N/A.</p>	
<p>4.2.2. Please confirm that for each MHHS requirement, you have successfully completed the relevant testing requirements in Pre-Integration Testing (PIT) to satisfy the BSC Assessment Criteria, have provided PIT documentation including an approved MHHS-DEL1052 PIT Test Completion Report, and where applicable, agreed a work-off plan with the BSC for any outstanding defects.</p>	<p>[Yes/No]</p> <p>If no, please detail which requirements you have not successfully completed testing for, and any mitigation or alternative evidence you have agreed with the relevant Code Bodies.</p> <p>If you have an agreed work-off plan, please provide an update here of the latest status of agreed actions.</p> <p>Your PIT Approach and Plan should have included your defect identification and resolution policy, release management policy, and regression testing policy; if it does not, please provide these separately.</p>	
<p>4.2.3. Please confirm that all relevant process documentation, including Local Work Instructions (LWIs) for operatives have been created for all business processes required to meet the BSC MHHS Assessment Criteria.</p>	<p>[Yes/No]</p> <p>If no, please detail expected timeframes to complete; these should be completed by the final submission of the QAD.</p> <p>These updates should cover all the relevant 'Business Processes' to your role(s) from Section 5 of the QAD.</p>	

<p>4.2.4. Please confirm that for each testable MHHS requirement, you (and/or your third-party software provider) have successfully completed the relevant testing requirements in SIT or QT, and where applicable, agreed a work-off plan with the REC and BSC for any outstanding defects.</p>	<p>[Yes/No]</p> <p>If no, please detail which requirements you have not successfully completed testing for, and any mitigation or alternative evidence you have agreed with the relevant Code Bodies.</p> <p>If you have an agreed work-off plan, please provide an update here of the latest status of agreed actions.</p>	
--	---	--

4.6 Operational Readiness

Questions	Guidance Points	Participant Response
<p>4.3.1 Please provide details on your user readiness plan to ensure that operatives will be able to perform the updated processes during live operations.</p>	<p>This should include plans for additional training, guidance documentation, user testing, dress rehearsals, and post go-live monitoring. For the initial submission of the QAD you should outline timeframes for planning, creating, and executing these activities, and in the final submission of the QAD you should outline the latest status of these activities. You may wish to provide a written summary of these planned activities, and/or upload relevant support documentation outlining this.</p>	
<p>4.3.2 What adjustments, if any, are required in your organisation's resource needs to meet the design brought by MHHS, and how does your organisation intend to fulfil these requirements?</p>	<p>This response should include a resourcing plan, specifically highlighting areas in which you would like to onboard expertise. Please reference changes required for both the migration period and post-migration activities.</p> <p>You may wish to provide a written summary of these planned activities, and/or upload relevant support documentation outlining this.</p>	

4.7 Information Security and Data Protection

Questions	Guidance Points	Participants Response
4.4.1 How do you ensure that you have appropriate security and control arrangements in place that are reviewed on a regular basis?	<p>The response should address the following areas:</p> <ul style="list-style-type: none">(1) The assignment of accountable owners for the security of business data and/or systems.(2) Existence of a Security Policy that complies with good industry practice such as ISO27001 and on-going communication and education of this to all staff.(3) Clear assignment of responsibilities for the review and update of the Security Policy.(4) Competence and independence from day-to-day operations of the individual(s) responsible for review and update of the Security Policy.(5) Formal procedures and schedules in place for reviewing the Security Policy and adherence thereto, and reporting findings to Senior Management.(6) Procedures for resolving issues identified through the above review, updating the Security Policy and communicating the changes to all staff.	
4.4.2 How do you ensure the confidentiality of your data?	<p>The response should address the following areas:</p> <ul style="list-style-type: none">(1) Communication of confidentiality requirements to all staff either via a formal policy or within employment contracts.(2) Formal procedures to update policies / contracts and to communicate changes to all staff as and when they occur.(3) System controls in place to ensure data confidentiality is applied appropriately where relevant.	
4.4.3 What plans does your organisation have in place to	Your answer will need to cover each data centre and key process.	

<p>address Disaster Recovery of all key data, systems and processes and how will you ensure business continuity considering the people, knowledge resources and office space required to operate the service?</p>	<p>Refer to Appendix 2 for additional guidance on Disaster Recovery and business continuity planning and testing.</p> <p>The response should address the following areas:</p> <p>(1) Existence of a Disaster Recovery Plan that complies with good industry practice. This should consider the following key areas:</p> <p>(a) A comprehensive assessment of the risks facing the service, mitigating actions required to address these risks and the assumptions made in the plan, such as the availability of key staff to implement the plan.</p> <p>(b) IT infrastructure, i.e. hardware and software, (including the identification of replacement sources of hardware and access to a copy of the latest live version of relevant software).</p> <p>(c) Surrounding procedures and supporting documentation, (including the invocation procedures in place to initiate the plan, clear assignment of responsibilities to appropriate staff within the plan for invocation).</p> <p>(d) Supporting services such as telecommunications.</p> <p>(2) Clear assignment of roles and responsibilities for the ongoing maintenance of the Disaster Recovery plan.</p> <p>(3) The existence of an alternative location from which to operate the full service.</p> <p>(4) The plans in place to transfer IT and business staff from the existing site to an alternative location.</p> <p>(5) Arrangements to bring in additional staff with an adequate level of knowledge to run the service in the event that existing staff are unavailable.</p> <p>(6) Existence of comprehensive IT and business local working procedures and system documentation and its suitability to be used by new staff unfamiliar with the service.</p> <p>(7) The back-up of local working procedures, system documentation and training material.</p> <p>(8) Documentation and back-up of key management reports and information used to monitor the service.</p> <p>(9) Commitment to the plan by Senior Management, e.g. Director review and sign-off.</p>	
<p>4.4.4 How have you tested your Disaster Recovery plans prior to go-live (or for a re-Qualification within the 12 month period prior</p>	<p>Refer to Appendix 2 for additional guidance on Disaster Recovery and business continuity planning and testing.</p> <p>Disaster Recovery and business continuity plans should have been tested, with reasonable results within the 12 month period prior to your application.</p>	

to your re-Qualification application)?		
4.4.5 How will you ensure that your Disaster Recovery plans continue to be tested on an ongoing basis?	<p>Refer to Appendix 2 for additional guidance on Disaster Recovery and business continuity planning and testing.</p> <p>The plans should be reviewed, update and tested on an ongoing basis (this should include the establishment of frequency and trigger criteria for updating the plan(s), and demonstration of commitment to test).</p>	
4.4.6 How has your business taken steps to ensure appropriate physical security and control procedures are in place to prevent unauthorised / inappropriate access to services and the supporting infrastructure?	<p>The response should address the following areas:</p> <ol style="list-style-type: none"> (1) Service premises should be physically secure, with full supervision over visitors. (2) Location of key server hardware in a physically secure location or data centre that has appropriate environmental controls in place. (3) Access restricted to only key personnel needing to perform essential support activities. (4) Regular review of the employees permitted physical access to key server hardware. (5) Visitors requiring data centre or server room access (e.g. contractors) should be fully supervised and a record of their access retained. (6) 'Desktop' workstations only held in physically secure locations. (7) Review of the security of any remote working performed outside of business premises. 	
4.4.7 How has your business taken steps to ensure appropriate application security and control procedures have been developed with respect to your service to guard against unauthorised logical access to data and programs?	<p>The response should address the following areas:</p> <p>Application level security controls in place over the service including:</p> <ol style="list-style-type: none"> (1) Formal procedures in place for authorising the set up of application-level user access. (2) Provision of individual user IDs/profiles and passwords for application-level access only (multiple concurrent logons and generic user IDs should be prohibited, application-level passwords should adhere to the good practice / security policy requirements). (3) Access to service system(s) assigned to individual users according to training undertaken and roles and responsibilities assigned. (4) Account lock-out procedures following repeated failure by a user to logon. (5) Formal requirements to periodically review existing user access to applications (and remove access where necessary) to ensure that changes to employee roles and responsibilities are mirrored by the application-level access. 	
4.4.8 How has your business taken steps to ensure	The response should address the following areas:	

<p>appropriate operating system and privileged security and control procedures have been developed with respect to your service to guard against unauthorised logical access to data and programs?</p>	<p>Operating system level security and privileged access controls in place including:</p> <ul style="list-style-type: none"> (1) Access to operating systems (e.g. UNIX, NT) restricted to IS support staff only. (2) Assignment of individual user IDs and passwords to all users authorised to have operating system access (e.g. For UNIX authorised users should log onto their own accounts and then "SU" to "root"; in the case of NT, authorised administrators should be assigned an individual profile in the "Administrator" group). (3) Invocation of audit trails to enable tracing of any activities to individual user ID accounts. (4) Segregation of duties between IS Support (e.g. IS support staff and security administrators) and business users carrying out day-to-day input and processing of data within the service system. 	
<p>4.4.9 How has your business taken steps to ensure appropriate database administration security and control procedures have been developed with respect to your service to guard against unauthorised logical access to data and programs?</p>	<p>The response should address the following areas:</p> <p>Database Administration security and access controls in place including:</p> <ul style="list-style-type: none"> (1) Formal procedures to manage database administrator access to the live production environment. (2) Assignment of individual user IDs and passwords to database administrators (wherever possible) adhering to good practice / policy. (3) Application of changes to production only upon formal authorisation from the appropriate data owners. (4) Audit trail controls in place over DBA access to production data, including regular review of the audit trail produced. 	
<p>4.4.10 How has your business taken steps to ensure appropriate security and control procedures have been developed over external connections with respect to your service to guard against unauthorised logical access to data and programs?</p>	<p>The response should address the following areas:</p> <p>Security and controls in place over external connections (including email, internet, web servers, connections to third parties, removable media, etc.) including:</p> <ul style="list-style-type: none"> (1) Use of firewalls, (including regular review over firewall configuration and monitoring over firewall reporting). (2) Virus detection and cleansing controls and procedures over all external network connections, servers and desktops (including regular update of anti-virus software and email monitoring over attachments). (3) Additional security controls in place over dial-up access (including additional risk assessment procedures over third party connections into the organisation's information systems to ensure appropriate controls are in place). 	

<p>4.4.11 How do you ensure that your IT 'housekeeping' procedures, such as initiating data processing, system monitoring and back-ups are managed in an effective manner to ensure appropriate system availability?</p>	<p>The response should address the following areas:</p> <ul style="list-style-type: none"> (1) 'Housekeeping' activities performed by the core operations/data centre team. Please define the extent to which these procedures are automated. (2) Formal documentation and training in place to ensure IT staff are aware of their responsibilities and are competent to perform them. (3) Scheduling/monitoring performed to ensure that all daily/weekly/monthly housekeeping tasks are completed as necessary. (4) Procedures to ensure timely identification, logging and resolution of errors and/or problems. (5) Formal senior management review procedures to ensure that all IT operations/'housekeeping' activities are performed as required in a timely manner. 	
<p>4.4.12 How have you ensured that appropriate data back-up, archive and restoration arrangements have been established and operate effectively?</p>	<p>This question is not referring to the specific Disaster Recovery plans you have in place (4.1.3) but to daily operational back-up processes that should be performed.</p> <p>The response should address the following areas</p> <ul style="list-style-type: none"> (1) The back-up strategy implemented through user or computer operations procedures and task schedules. (2) Procedures and processes in place to regularly test back-up data to ensure it could be used to restore lost business data. (3) Regular and independent reviews of the back-up practices and formal reporting back to management. (4) Procedures and processes in place to ensure the security of any physical storage of back-up data (including USB drives, hard copies of documents). (5) Procedures and processes in place to ensure that any personal data is not kept for longer than is necessary, in accordance with the General Data Protection Regulation (GDPR). 	

4.8 Initial Data Population and/or Data Migration

Question	Guidance	Response
4.8.1 How have you ensured that a data population / migration strategy has been developed to an appropriate level of detail to demonstrate that you are able to operate the service following data population / migration?	Evidence would be expected to include a data population / migration strategy defining: (1) A clear approach to the initial data population / migration of the records/systems. (2) Responsibilities and timescales for each element of the plans. (3) Any risks associated with the plans and mitigating controls to be implemented. (4) Success or acceptance criteria for each stage of data population / migration activity together with an explanation as to how these will be measured. (5) Contingency procedures to ensure a continuing service in the event that the migration process fails.	
4.8.2 How can you ensure that the service is populated with data that has a level of accuracy such that it meets the data quality requirements and performance standards as set out in the BSC, BSCPs, PSL100 and, where relevant, data cleansing is performed?	The response should address the following areas of the data population / migration process: (1) The measures put in place to ensure the timely transfer of all MSID-related data to the system supporting the service prior to go-live. (2) Controls implemented to ensure the completeness, accuracy and integrity of the migration of data (including procedures for ensuring incoming and outgoing data flows are processed appropriately during the data migration process). (3) Procedures to ensure that any poor quality data is cleansed prior to migration onto the new system.	

	(4) Procedures to identify and resolve any data migration failures / exceptions. (5) Demonstration of an appropriate audit trail.	
--	--	--

4.9 Data Integration Platform (DIP)

Prior to moving to the production environment, the DIP Manager will review the following section in adherence with DSD002 requirements.

*[Please note that Issue 101 'Ongoing Governance, Funding and Operation of the DIP' is currently being consulted on and this section will be updated as required to reflect the outcome of this consultation.]*¹

Questions	Participants Response
4.5.1. Do you comply with ISO 27000 series? (<i>note: or equivalent provision</i>)	
4.5.2. Provide evidence of process for retaining all audit logs of basic user activities (e.g., logon, logoff, failed attempts) and security events for all information systems and services that interact with the DIP, within legal constraints, for a minimum of 3 months of live data and 12 months archived	
4.5.3. Provide an overview of your process in place to retain any security events for all information systems that interact with the DIP.	
4.5.4. Provide evidence of logical network schematic of the information systems and services in scope that interact with the DIP, and include: <ul style="list-style-type: none"> a) services and functionality; b) gateway/boundaries functionality 	

¹ <https://www.elexon.co.uk/documents/change/issues/101-150/issue-101-issue-consultation/>

<p>4.5.5. DIP Users systems are backed-up in accordance with best practice – demonstrable by adherence to ISO 27000 series processes and production of written process to back up systems, to include logical process diagrams;</p>	
<p>4.5.6. Provide an overview of your process in place for Key Management. As the question is in relation to the DIP, then the 'keys' in question are the DIP keys i.e. those keys used to establish APIs and Webhooks between the DIP and the DIP User's systems</p>	
<p>4.5.7. Provide an overview of processes, protocols, and liabilities between the DIP User and any third Party you have contracted with are in place.</p>	
<p>4.5.8. Do systems using the DIP have the ability to store messages for at least two years?</p>	
<p>4.5.9. Please provide details of the following documents and processes that you have in place to ensure your compliance with data protection legislation:</p> <ul style="list-style-type: none"> a. Relevant data protection policies, b. Relevant data protection processes, and c. Where applicable, data protection impact assessments. 	
<p>4.5.10. Provide an overview of your contingency plan in place for data breaches, security events, and other emergencies in relation to DIP data, demonstrated by the production of written documents.</p>	
<p>4.5.11. How are DIP Users made aware of their responsibilities as a Data Processor in accordance with relevant Legislation?</p>	
<p>4.5.12. Can you confirm your adherence to the Authority's Data Best Practice?</p>	
<p>4.5.13. Have you signed the Access Agreement with the DIP Manager to start DIP onboarding?</p>	

4.10 Interface Management

Data Management Area	Questions	MHHS requirements	Participant Responses
<p>4.6.1 Data Integration Platform (DIP)</p>	<p>a) What controls and procedures do you have in place around Market Message management to ensure they are robust and appropriate to meet the BSC and REC obligations brought about by MHHS that are relevant to your role(s)? (e.g.</p> <ul style="list-style-type: none"> - <i>Error resolution</i> - <i>Monitoring of missing or erroneous DIP interfaces</i> - <i>Data backups and recovery processes</i>) <p>This may include controls in systems directly to the DIP, or middleware such as the DIP adapter.</p> <p>You may wish to provide a written summary of these processes and controls, and/or upload relevant support documentation outlining these.</p>	<p>MHHS-BR-SU-122 MHHS-BR-SU-123.1 MHHS-BR-SU-123.2 MHHS-BR-SU-124 MHHS-BR-SU-126 MHHS-BR-SU-127 MHHS-BR-SU-128 MHHS-BR-SU-129 MHHS-BR-SU-140 MHHS-BR-LD-058 MHHS-BR-LD-059.1 MHHS-BR-LD-059.2 MHHS-BR-LD-062 MHHS-BR-LD-063 MHHS-BR-LD-064 MHHS-BR-MS-070 MHHS-BR-MS-072 MHHS-BR-MS-073 MHHS-BR-MS-074 MHHS-BR-MS-075 MHHS-BR-MS-083 MHHS-BR-MS-091 MHHS-BR-DS-138 MHHS-BR-DS-139.1 MHHS-BR-DS-139.2 MHHS-BR-DS-143.1 MHHS-BR-DS-144</p>	

<p>4.6.2 Data Transfer Network (DTN)</p>	<p>a) How is your connection to the DTN maintained to send and receive flows?</p> <p>b) What systems do you use to send DTN flows and what automation steps do you have in place?</p> <p>c) What are your validation steps for DTN flows received via the DTN?</p> <p>d) How are details updated and maintained onto your system?</p> <p>e) How have you tested the DTN flows and to what extent?</p>	<p>MHHS-BR-SU-138 MHHS-BR-RS-143 MHHS-BR-MS-083 MHHS-BR-DS-149</p>	
<p>4.6.3 Industry Standing Data (ISD)</p>	<p>a) What controls do you have in-place to ensure that ISD updates are captured within all relevant systems to support wider business processes?</p>	<p>MHHS-BR-SU-123 MHHS-BR-LD-059 MHHS-BR-MS-071 MHHS-BR-DS-139</p>	
<p>4.6.4 Electricity Enquiry Services (EES)</p>	<p>a) Will you require access to the Electricity Enquiry Service to receive up-to-date Electricity Market information, and if so, do you already have the access you need via the GUI and/or API? Else, will you make an application for the access you need?</p>	<p>MHHS-BR-SU-139 MHHS-BR-DS-156 MHHS-BR-MS-090 MHHS-BR-DS-156</p>	