# Information Security Incident Management Policy v1.0

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<tr>
<th>Organisation</th>
<th>Oxford Brookes University</th>
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<tbody>
<tr>
<td>Title</td>
<td>Information Security Incident Management Policy</td>
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<tr>
<td>Creator</td>
<td>Gareth Packham - Head of Information Management</td>
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<tr>
<td>Approvals Required</td>
<td>1. Information Security Working Group 2. CIO 3. Executive Board</td>
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<tr>
<td>Version</td>
<td>Version 1.0</td>
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<td>Owner</td>
<td>Chief Information Officer</td>
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<td>Subject</td>
<td>The formal approved information security incident management policy of Oxford Brookes University</td>
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<td>Review date and responsibility</td>
<td>Annually by Head of Information Management</td>
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## Revision History

<table>
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<tr>
<th>Date</th>
<th>Author</th>
<th>Version Number</th>
<th>Comments</th>
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<tbody>
<tr>
<td>14/09/16</td>
<td>Gareth Packham</td>
<td>0.1 (draft)</td>
<td>Original draft</td>
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<tr>
<td>25/11/16</td>
<td>Gareth Packham</td>
<td>1.0 (live)</td>
<td>Minor revisions following review by Legal Services</td>
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1. **Introduction and Scope**

1.1 The University holds a large amount of information in a variety of media, physical and otherwise (including photos and videos). This includes personal and sensitive personal data, and also non-personal information which may be sensitive or commercially confidential (e.g. financial data) and may be subject to legal obligations of confidence, whether contractual or otherwise.

1.2 The University has legal responsibilities both under the Data Protection Act and in respect of its own business (for example, under the common law of confidence) to safeguard information in its control. Care should be taken to protect information, to ensure its integrity and to protect it from loss, theft or unauthorised access.

1.3 In the event of an information security incident (also referred to as a 'data breach'), it is vital that appropriate action is taken to minimise associated risks. A risk analysis should be performed, factors which need to be considered are:

- The number of individuals affected
- Type of data involved
- Impact (on individuals, the University or its contractors)

1.4 Any member of staff, student, contractor or pseudo-employee discovering or suspecting an information security incident must report it in accordance with this policy.

2. **What is an information security incident?**

2.1 An information security incident in an event whereby data held by the University, in any format, is compromised by being lost, destroyed, altered, copied, transmitted, stolen, used or accessed unlawfully or by unauthorised individuals whether accidentally or on purpose. Some examples:

- Loss, or theft of equipment on which data is stored, e.g laptop or mobile phone
- Unauthorised access to data
- Human error, e.g. emails to wrong recipient; public posting of confidential material online; incorrect sharing of Google documents
- Failure of equipment or power leading to loss of data
- Hacking attack
- Data maliciously obtained by way of social engineering (an attack in which a user
is ‘tricked’ into giving a third party access, often by purporting to be someone other than they actually are)

2.2 Information security incident reporting also includes instances of ‘near misses’ and identification of vulnerabilities where IT Services considers there is a high likelihood of an actual incident occurring.

3. **Reporting of the breach**

3.1 All Information security incidents should be reported immediately to The IT Service Desk (via phone on ext. no. 3311, or the ServiceNow Portal), as the primary point of contact.

3.2 The report should include full and accurate details of the incident, including who is reporting the incident; what type of data is involved (not the data itself unless specifically requested); if the data relates to people and if so, how many people are involved.

3.3. The IT Services Information Management team is responsible for maintaining a confidential log of all information security events.

4. **Investigation and Response**

4.1 The Information Management team will consider the report, and where appropriate, instigate a Response Team. IT Services will lead the Response team and membership will depend on the type and severity of the incident. The response team will be responsible for investigating the circumstances and effect of the information security incident. An investigation will be started into material breaches within 24 hours of the breach being discovered, where practicable.

4.2 The investigation will establish the nature of the incident, the type of data involved, whether the data is personal data relating to individuals or otherwise confidential or valuable. If personal data is involved, associated individuals must be identified and, if confidential / valuable data is concerned, what the legal and commercial consequences of the breach may be.

4.3 The investigation will consider the extent of the sensitivity of the data, and a risk assessment performed as to what might be the consequences of its loss. This will include risk of damage and/or distress to individuals and the institution.

4.4 The response team is responsible for formally documenting the incident and
associated response. This information will (as a minimum) be subject to review by the Oxford Brookes University Information Security Working Group (ISWG) with serious incidents reviewed by the Chief Information Officer and other senior managers.

5. **Containment and Recovery**

5.1 The Response Team and IT Services Lead will determine the appropriate course of action and the required resources needed to limit the impact of the breach. For instance this may require isolating a compromised section of the network; alerting relevant staff or contractors; changing access codes/locks or shutting down critical equipment.

5.2 Appropriate steps will be taken to recover data losses and resume normal business operation. This might entail attempting to recover any lost equipment, using backup mechanisms to restore compromised or stolen data and changing compromised passwords.

5.3 For incidents that involve a suspected or actual criminal offence all efforts will be made to preserve evidence integrity.

6. **Escalation & Notification**

6.1 The details of the escalation and notification process are schematised in the appendix. A summary of this process is provided below.

6.2 The information management team is responsible for initial assessment of an incidents severity based on the scope, scale and risk of the incident.

6.3 This preliminary decision is then reviewed by the CIO and/or Director of IT Strategy, Information Management and Business Partnerships.

6.4 If at this stage the incident is deemed serious then the University Senior Management Team will be notified.

6.5 If a personal data breach has occurred of sufficient scale The Information Management team will notify the Information Commissioner’s Office (ICO) within the prescribed statutory time limits and manage all communications between the University and the ICO.

6.6 If the breach is deemed of sufficient seriousness (in line with ICO guidance), and
concerns personal data, notice of the breach will be made to affected individuals to enable them to take steps to protect themselves. This notice will include a description of the breach and the steps taken to mitigate the risks, and will be undertaken by the Response Team. Liaison with the Police or other authorities may be required for serious events.

7. **Review**

7.1 Once the incident is contained a thorough review of the event will be undertaken by the Response Team, to establish the cause of the incident, the effectiveness of the response and to identify areas that require improvement.

7.2 Recommended changes to systems, policies and procedures will be documented and implemented as soon as possible thereafter. Targeted training may be offered to the department affected.

7.3 All information security incidents will be subject to summary review by the ISWG so that any weaknesses or vulnerabilities that may have contributed to the incident can be identified, documented and resolved.
APPENDIX: Information Security Incident Escalation Process

1. **InfoSec Incident**
   - Reported via ServiceNow
   - Initial triage assessment by InfoComp team

2. **Is breach serious?**
   - No
   - Full investigation and report by InfoComp team
     - Review & Sign-off by ISWG
   - Yes
     - Discussed with Dir. of IT Strategy, IM & Bus. Part. or CIO
       - Agress breach is serious?
         - No
           - Full investigation and report by InfoComp team
             - Review & Sign-off by ISWG
         - Yes
           - Senior Management notified
             - Notification via email and phone, acknowledgement of receipt required
             - Affected data subject/s
             - ICO
             - Other regulatory bodies
             - Police
     - Yes
       - Breach containment & limitation applied where possible
       - < 30 minutes
       - < 1 hour