Data Breach Policy and Procedure

Policy provisions

Purpose

This document sets out the policy principles and procedures for identifying, assessing, managing and responding to a breach of UNSW-held data. It establishes responsibility and accountability for all steps in addressing information security incidents resulting in data breaches and describes clear roles and responsibilities. It also describes the principles and procedures relating to internal and external notification and communication of such data breaches.

Scope

This policy and procedure applies to UNSW staff including academic staff, professional staff, students, contractors, consultants and other agents of the University.

Principles

The following principles guide UNSW staff in identifying, assessing, managing and responding to a breach of UNSW-held data:

1. Data is an important business asset that must be protected.
2. Personal information is collected, held, used, and disclosed in accordance with the Information Privacy Principles (IPPs) and Health Privacy Principles (HPPs).
3. A robust data breach management program assists UNSW in avoiding or reducing possible harm to affected individuals and UNSW; and may prevent future breaches.
4. Data breaches are reported as soon as they are identified.
5. Data breaches are assessed and managed systematically and effectively in accordance with the Data Breach Management Plan.
6. Affected individuals and entities are appropriately notified of a data breach in accordance with legislative obligations.
7. Data breaches are accurately recorded to enable UNSW to comply with legislative obligations and monitor, analyse and review the type and severity of suspected data breaches and the effectiveness of its response.
8. UNSW’s mandatory training in data governance, recordkeeping, privacy and cyber security enables UNSW staff to effectively and efficiently identify, respond and manage a data breach.
Types of Data Breaches

There are two types of data breach covered by this policy and procedure:

- an eligible data breach under the PPIP Act
- all other data breaches.

Eligible Data Breach

An eligible data breach involves personal information.

It occurs when there is ‘an unauthorised access to, or unauthorised disclosure of, personal information held by UNSW or there is a loss of personal information held by UNSW in circumstances that are likely to result in unauthorised access to, or unauthorised disclosure of, the information, and a reasonable person would conclude that the access or disclosure of the information would be likely to result in serious harm to an individual to whom the information relates’.

Examples of an eligible data breach include:

- the loss or theft of a device containing personal information of UNSW constituents, a UNSW database or information repository containing personal information being hacked.
- a device containing personal information of UNSW constituents, a UNSW database or information repository containing personal information being accessed without authorisation.
- UNSW inadvertently providing personal information to an unauthorised person or entity that would be likely to result in serious harm to an individual to whom the information relates.

Data Breach

However, a data breach can also occur when any information (whether in digital or hard copy) held by UNSW is lost or subjected to unauthorised access, modification, disclosure, or other misuse or interference.

Examples of a data breach include:

- unauthorised access to, or the unauthorised collection, use, or disclosure of, UNSW information
- accidental loss, unauthorised access, or theft of classified material, data or equipment on which such data is stored (e.g. loss of paper record, laptop, iPad or USB stick)
- unauthorised use, access to, or modification of data or information systems (e.g. sharing of user login details (deliberately or accidentally) to gain unauthorised access or make unauthorised changes to data or information systems)
- unauthorised disclosure of classified material information (e.g. email sent to an incorrect recipient or document posted to an incorrect address or addressee) or personal information posted onto the website without consent
- a compromised user account (e.g. accidental disclosure of user login details through phishing)
- failed or successful attempts to gain unauthorised access to UNSW information or information systems
- equipment failure
- malware infection
- disruption to or denial of IT services.

Procedure

1. Identify and Report Data Breaches

1.1 A staff member who has identified a suspected or confirmed data breach must immediately raise a ticket via the IT Service Centre (itservicecentre@unsw.edu.au). Upon receipt, the IT Service Centre will:

   (i) immediately refer the suspected or confirmed data breach to the UNSW privacy officer via email (privacy@unsw.edu.au); and
   (ii) assess the suspected or confirmed data breach to determine whether it amounts to a cyber breach.

1.2 If the suspected or confirmed data breach amounts to a cyber breach, the IT Centre will immediately refer the reported breach to the UNSW Cyber Security Team for action and the Chair of the Data Breach Management Committee for assessment.

1.3 If the suspected or confirmed data breach does not amount to a cyber security breach, the IT Service Centre will immediately refer the reported breach to the Chair of the Data Breach Management Committee for assessment.

2. Identify and Report Eligible Data Breaches

2.1 A staff member with reasonable grounds to suspect or confirm that an eligible data breach has occurred must immediately report the suspected data breach to the Chair of the Data Breach Management Committee.

2.2 Upon receipt, the Chair of the Data Breach Management Committee will immediately:

   (i) notify the Vice Chancellor of the suspected eligible data breach
   (ii) notify the Chair of the University Critical Incident Team,
   (iii) raise a ticket via the IT Service Centre (itservice@unsw.edu.au)
   (iv) assess the suspected eligible data breach to determine whether it amounts to a cyber breach.

2.3 If the suspected or confirmed data breach amounts to a cyber breach, the Chair of the Data Breach Management Committee will immediately refer the suspected or confirmed eligible breach to the UNSW Cyber Security Team for action.

3. Data Breach Management Committee Triage

3.1 Upon the referral of a suspected or confirmed data breach by the IT Service Centre, the Chair of the Data Breach Management Committee will:

   - immediately update the IT ticket.
   - appoint a member of the Data Breach Committee (the lead investigator) to assess and manage the data breach in accordance with the Data Breach Management Plan.
• Notify the Critical Incident Response Team if the data breach is determined by the Chair to amount to a major data breach

3.2 Upon the referral of a suspected or confirmed eligible data breach by staff, the Chair of the Data Breach Management Committee will:

• raise a ticket via the IT Service Centre, and
• appoint a member of the Data Breach Committee (the lead investigator) to assess and manage the data breach within 30 days in accordance with the Data Breach Management Plan.

3.3 If the Vice Chancellor is satisfied that an assessment cannot reasonably be conducted within 30 days, they may approve an extension of the period to conduct the assessment. The extension may be approved for an amount of time reasonably required for the assessment to be conducted.

3.4 If the extension is approved, the Vice Chancellor must, within the 30-day period, request the lead investigator start the assessment; and give written notice to the Privacy Commissioner that the assessment has commenced and that an extension for the period of the assessment has been approved.

3.5 If the assessment is not conducted within the extension period, the Vice Chancellor must, before the end of the extension period, give written notice to the Privacy Commissioner that the assessment is ongoing and that a new extension period has been approved.

4. Data Breach Management Plan

4.1 Upon referral of a suspected or confirmed data breach or eligible data breach, the lead investigator will enact the Data Breach Management Plan as follows:

4.2 Contain the breach and conduct a preliminary assessment

4.2.1 The lead investigator will contain the breach and conduct a preliminary assessment.

4.2.2 The breach will be contained by:

• stopping the unauthorised activity and/or
• recovering or limiting the dissemination of records disclosed without authorisation, and/or
• shutting down a compromised system.

4.2.3 The following questions will be addressed by the lead investigator in their preliminary assessment:

• Who is affected by the breach?
• What information does the breach involve?
• If the information contains personal information, what types of personal information does the breach involve?
• Does the breach amount to a loss of personal information held by UNSW likely result in unauthorised access to, or unauthorised disclosure of, the information?
• Would a reasonable person conclude that the access or disclosure of the information will likely result in serious harm to an individual to whom the information relates?

4.2.4 In deciding whether the breach would be likely to result in serious harm to an individual to whom the information relates, the lead investigator will consider the following:

• the types of personal information involved
• the sensitivity of the personal information
• whether the personal information is or was protected by security measures such as encryption and therefore unlikely to be accessed or misused
• who had access to the personal information
• whether the person/s who accessed the personal information may have malicious intent and whether they may be able to circumvent security measures
• the nature of the harm that has occurred or may occur.

4.3 Evaluate the risks associated with the breach

4.3.1 The lead investigator will assess the risks associated with the breach by considering the following questions:

• What was the cause of the breach?
• What is the extent of the breach?
• Is there a risk of ongoing breaches or further exposure of the information?
• Is there evidence of theft?
• Is this a systemic problem within UNSW or an isolated incident?
• How many people are affected by the breach?
• What other harms could result from the breach?
• Have there been other breaches that could have a cumulative effect?
• How could the information be used?
• Has the information been recovered?
• What steps have already been taken to mitigate the harm?

4.3.2 The lead investigator will immediately report their conclusion to the Vice Chancellor and the Chair of the Data Breach Management Committee if there are reasonable grounds to suspect, or there is evidence to conclude, that an eligible data breach or a data breach has occurred.

4.4. Notifications to affected individuals or entities

4.4.1 Where the Vice Chancellor concludes or has reasonable grounds to suspect that the breach amounts to an eligible data breach, the Vice Chancellor will:

• immediately notify the Privacy Commissioner of the eligible data breach using the approved form published by the Privacy Commissioner, unless it is not reasonably practicable for the information to be provided, and
• as soon as reasonably practicable, notify each individual to whom the personal information the subject of the breach relates, or each affected
individual or their authorised representative, in writing about the breach, unless exempt from doing so.

4.4.2 The notification to each individual will provide affected individuals with an accurate description of what happened, what risks may arise and what they can do to protect themselves. The notification will specifically contain the following information:

- the date the breach occurred
- how the breach occurred
- the type of breach that occurred
- the personal information that was the subject of the breach
- the amount of time the information was disclosed for
- actions UNSW has taken or plans to ensure the personal information is secure
- actions UNSW has taken to control or mitigate the harm done to the individual
- recommendations about the steps the individual should consider taking in response to the eligible data breach, and
- information about:
  - how to make a privacy-related complaint to the Privacy Commissioner
  - how to seek an internal review of UNSW’s conduct, and
  - the contact details for UNSW or a person nominated by UNSW for the individual to contact about the breach.

4.4.3 If it is not reasonably practicable to directly notify any or all of the individuals affected by the breach, the Vice Chancellor will:

- publish a public notification on UNSW’s website for at least 12 months detailing information about the breach, such as: the date the breach occurred, how the breach occurred, the type of breach that occurred, the amount of time the information was disclosed, actions taken or planned to ensure the personal information is secure, where to contact for assistance or information, and
- take reasonable steps to publicise that notification, and
- provide the Privacy Commissioner with information about how to access the public notification on UNSW’s website.

4.4.3 In addition, the Data Breach Management Committee will determine if it is appropriate and necessary to notify other third parties, such as:

- the Police
- insurance providers
- credit card companies and/or financial institutions
- professional or other regulatory bodies
- other internal or external parties who have not already been notified
- agencies that have a direct relationship with the information lost/stolen.
In determining whether it is appropriate and necessary to notify the Office of the Australian Information Commissioner (OAIC), the Data Breach Management Committee will consider the following factors:

- any applicable legislation that may require notification
- the type of personal information involved and whether there is a risk of serious harm arising from the breach
- whether a large number of people were affected by the breach
- whether the information was fully recovered without further disclosure
- whether the affected individuals have been notified, and
- if there is a reasonable expectation the OAIC may receive complaints/inquiries about the breach.

4.5 Prevention of future breaches

4.5.1 Once immediate steps have been taken to mitigate the risks associated with a breach, and relevant notifications have been made, the Chair of the Data Breach Management Committee will:

a) investigate the cause of the breach and conduct a post-breach review and evaluation on the root cause of the breach and the effectiveness of this Policy
b) provide a brief to the UNSW Audit Committee on the outcome of the post-breach review and relevant recommendations, and
c) publish information about the data breach, the steps UNSW took to mitigate the harm done by the breach and the actions to prevent future breaches in UNSW’s internal Data Breach Incident Register.

5. Roles and Responsibilities

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<tr>
<th>Role</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>UNSW Staff</td>
<td>Identifies and reports a suspected or confirmed data breach or eligible data breach</td>
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<td>Data Breach Management Committee *</td>
<td>Implements the Data Breach Response Plan for suspected or confirmed data breach or eligible data breach</td>
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<td>Chair of the Data Breach Management Committee</td>
<td>Appoints lead investigator, notifies Vice Chancellor of suspected or confirmed data breach or eligible data breach</td>
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<td>Lead Investigator</td>
<td>Investigates the suspected or confirmed data breach or eligible data breach</td>
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<td>IT Service Centre</td>
<td>Reports any communications regarding data breach or eligible data breach to the Data Breach Management Committee</td>
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<tr>
<td>Vice Chancellor</td>
<td>Notifies the NSW Privacy Commissioner and affected individuals in the case of an eligible data breach</td>
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Membership of the Data Breach Management Committee includes (but is not limited to):

- Chief Data & Insights Officer (UNSW Planning & Performance)
- Director Cyber Security (UNSW IT, Chief Information Security Officer)
- Head Compliance and Controlled Entities Law (Legal)
- Privacy Officer (Legal)
- Director, Customer Services Delivery (UNSW IT)
- Director of Risk (Division of Planning & Assurance)

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<th>Accountabilities</th>
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<tr>
<td>Responsible Officer</td>
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<td>Contact Officer</td>
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**Supporting Information**

This policy supports the University’s compliance with the following legislation:

- Privacy Act 1988 (Cth)
- Privacy Amendment (Notifiable Data Breaches) Act 2017 (Cth)
- Health Records and Information Privacy Act 2002 (NSW) (HRIP Act) (NSW Legislation website)
- Health Records and Information Privacy Code of Practice 2005 (NSW) (NSW Legislation website)
- Health Records and Information Privacy Regulation 2012 (NSW) (HRIP Regulation) (NSW Legislation website)
- Privacy and Personal Information Protection Act 1998 (NSW) (PPIP Act) (NSW Legislation website)
- Privacy and Personal Information Protection Regulation 2014 (2014-549) (NSW) (PPIP Regulation)

**Legislative Compliance**

**Supporting Documents**

- Data Breach Management Procedure
- Data Breach Management Plan

**Related Documents**

- IPC Data Breach Guidance
- Data Classification Standard
- Data Governance Policy
- Data Handling Guidelines
- IT Security Policy
- IT Security Standards

**Superseded Documents**

- Data Breach Policy, v1.1

**File Number**

- 2018/07574
### Definitions and Acronyms

<table>
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<tr>
<th>Definition</th>
<th>Description</th>
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<tr>
<td><strong>Constituent</strong></td>
<td>A person in respect of whom UNSW stores personally identifiable information during the normal course of business.</td>
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<td><strong>Cyber Breach</strong></td>
<td>A cyber breach is a breach of data that results in a cyber security incident.</td>
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<td><strong>Cyber Security Incident</strong></td>
<td>A cyber security incident is a cyber security event that has been assessed (in accordance with the Cyber Security Standards) to have a potential adverse impact on the confidentiality, integrity, or availability of an UNSW Information Resource”.</td>
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<tr>
<td><strong>Data Breach</strong></td>
<td>A data breach occurs when personal information held by UNSW is lost or subjected to unauthorised access, modification, disclosure, or other misuse or interference. Examples of a data breach may include the loss or theft of a device containing personal information of UNSW constituents, UNSW’s database or information repository containing personal information being hacked or accessed without authorisation, or UNSW mistakenly providing personal information to an unauthorised person or entity.</td>
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<td><strong>Data Breach Management Committee</strong></td>
<td>Senior personnel at UNSW who are responsible for ensuring that a data breach is managed appropriately.</td>
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<td><strong>Data Breach Response Plan</strong></td>
<td>The plan of action that is determined by the Data Breach Management Committee so as to contain and remediate the data breach.</td>
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<td><strong>Data Owners</strong></td>
<td>Data Owners are responsible for ensuring effective local protocols are in place to guide the appropriate use of their data. Access to, and use of, institutional data will generally be administered by the appropriate Data Owner. They are also responsible for ensuring that data conforms to legal, regulatory, exchange, and operational standards.</td>
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<tr>
<td><strong>Eligible Data Breach</strong></td>
<td>An eligible data breach means (a) there is unauthorised access to, or unauthorised disclosure of, personal information held by a public sector agency and a reasonable person would conclude that the access or disclosure of the information would be likely to result in serious harm to an individual to whom the information relates, or (b) personal information held by a public sector agency is lost in circumstances where (i) unauthorised access to, or unauthorised disclosure of, the information is likely to occur, and (ii) if the unauthorised access to, or unauthorised disclosure of, the information were to occur, a reasonable person would conclude that the access or disclosure would be likely to result in serious harm to an individual to whom the information relates.</td>
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<tr>
<td>Health Information</td>
<td>Information about an individual’s physical or mental health, disability, and information connected to the provision of a health service.</td>
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<tr>
<td>Personal Information</td>
<td>Information or an opinion (including information or an opinion forming part of a database), whether true or not, and whether recorded in a material form or not, about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion.</td>
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| Serious Harm | Serious harm can include ‘physical, financial, or material harm, emotional or psychological harm or reputational harm. The impact of the harm can vary from person to person, but may include:  
- financial loss through fraud  
- a likely risk of physical or psychological harm, such as by an abusive ex-partner  
- identity theft, which can affect your finances and/or credit record  
- serious harm to an individual’s reputation.’ |

<p>| Revision History |
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<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Approval date</th>
<th>Effective date</th>
<th>Sections modified</th>
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<tr>
<td>1.0</td>
<td>President and Vice-Chancellor</td>
<td>18 April 2018</td>
<td>18 April 2018</td>
<td>This is a new Policy</td>
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<td>1.1</td>
<td>Director of Governance</td>
<td>21 May 2018</td>
<td>21 May 2018</td>
<td>Added IPC Data Breach Guidance to the Related Documents section</td>
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<tr>
<td>1.2</td>
<td>Director of Governance</td>
<td>12 June 2019</td>
<td>12 June 2019</td>
<td>Administrative update: Section 5 and Responsible Officer</td>
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<tr>
<td>1.3</td>
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<td>Full review addressing amendments to the Privacy and Personal Information Protection Act 1998 (NSW) (PPIP Act). Consolidation of Data Breach Policy and Data Breach Procedure into one policy.</td>
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