# SENSITIVE DATA EXPOSURE INCIDENT CHECKLIST

INCIDENT #

	INGIBERT #	<del></del>
Date became aware:	Date reported to Security Office:	Date affected individuals notified: (should be within one week of incident discovery)
Type and scope of data exposed:		(Should be within one week of incident discovery)
Incident Team:		

#### STEP 1: IDENTIFICATION

Verify that an incident has actually occurred. This activity typically involves the Unit systems administrator and end user, but may also result from proactive incident detection work of the Security Office or central IT operations. If it is determined that an incident has occurred, inform appropriate authorities.

Task	Owner	Guidance	Examples	Additional Resources
1.1 Immediately contain and limit exposure:  - If electronic device has been compromised:  - Do not access (do not logon) or alter compromised device  - Do not power off the compromised device  - Do unplug network cable (NOT power cable) from the compromised device  - Write down how the incident was detected and what actions have been taken so far. Provide as much specificity as possible, including dates, times, and impacted machines, applications, websites, etc.	<b>Owner</b> Unit	Guidance	Examples	Additional Resources

1.2 Alert Security Office immediately.	Unit	Instructions for alerting the Security Office should include multiple contact methods. Instructions should also reference the institution's security incident reporting policy, if one exists.	Call John Smith at 999-999-9999 or Mary Jones at 999-9999. If you do not get one of them IN PERSON, then call the Help Desk at 999-999-9999 and have them contact the Information Security Office. Also send details to itincident@xxxxx.edu Report incident via online form (preferred) or call John Smith at 999-99-9999.	Indiana University Incident Reporting Procedures     University of Virginia Information Security Incident Reporting Policy and online reporting form
If the incident involves electronic devices or media stolen or lost within the local community, also alert law enforcement.	Unit	This sub-step should be included ONLY if advised to do so by your campus police department. Be certain to consult with them on this issue.	Call Campus Policy Hotline at 999-999-9999999999999999999999999999	
1.4 Conduct preliminary assessment of type and scope of data exposed. If the incident potentially exposed sensitive data, notify all appropriate institution officials and keep them informed as incident investigation progresses.	Security Office		Institution officials to be contacted might, among other, include:  • Executive in charge of IT for the institution, e.g., Vice President/CIO  • Executive in charge of organizational unit in which incident occurred, e.g., Vice President, Provost, Dean  • Campus Chancellor/President (or his/her Chief of Staff)  • Counsel for the institution  • Law enforcement, e.g., campus police, FBI local office, Secret Service local office  • Public Affairs  • Internal Audit  • Risk Management	

		<ul> <li>Appropriate Data Steward(s) for the type of data potentially at risk</li> <li>Health information compliance office, if HIPAA-protected potentially at risk</li> <li>Vice president for research, if research data potentially at risk</li> <li>Finance office, if credit card #, bank account #, or other sensitive financial data potentially at risk</li> </ul>	
1.5 If there is evidence of criminal activity connected with the incident, determine interest of law enforcement in leading the investigation. If law enforcement (e.g., FBI) takes lead, subsequent steps may be performed by law enforcement or require authorization from the law enforcement lead.	Security Office		

### STEP 2: DAMAGE CONTAINMENT AND DATA EXPOSURE ASSESSMENT

Identify an Incident Response Lead and assemble an incident response team charged with limiting further damage from the incident. Conduct a thorough assessment of the type and scope of data exposed following applicable laws, regulation and policy.

Task	Owner	Guidance	Examples	Additional Resources
2.1 Assemble Incident Response Team.	Security Office	Ensure that the representative from the organizational unit where the incident occurred participates and that this individual is high enough in the organization to make necessary decisions.		
<ul> <li>2.2 Review incident response process and responsibilities with Incident Response Team. In particular:</li> <li>Provide each member with current Sensitive Data Exposure Incident Checklist</li> <li>Discuss communications strategy</li> <li>Stress importance of maintaining chain of custody</li> </ul>	Security Office	Discussing the rules of communication with the team at this stage is particularly important to ensure accuracy of facts among team members and between the team and appropriate University officials.	Rules of communication might, among other things, include:  Team members must not discuss the incident with anyone outside the team until and only if authorized to do so by the Security Office head.  All documentation created by team members must be factbased, as it may become	

			<ul> <li>important reference or evidence</li> <li>Daily conference call of team members will be held discuss status.</li> <li>Instruct team to track time spent on the incident.</li> </ul>	
2.3 Collect and preserve evidence.	Incident Response Team	Collect sufficient physical and cyber evidence to provide a clear, detailed description of how the sensitive data was compromised.	Evidence types include, but are not limited to:  Image of hard drive(s) physical equipment  Network traffic flow to/from compromised device  Workstation and application logs  Access logs  Digital photographs of the evidence and surrounding area	http://www.educause.edu/R esources/ForensicOverview/ 161135     http://www.justice.gov/usao/eousa/foia reading room/usab5906.pdf     http://csrc.nist.gov/publications/nistpubs/800-61-rev1/SP800-61rev1.pdf
2.4 Establish and maintain appropriate chain of custody for all evidence.	Incident Response Team	Inventory pieces of evidence and track who accessed, used, stored, moved or returned each piece of evidence and when it was accessed.	Good chain-of-custody practices include, but are not limited to:  • Establishing what exactly the evidence is  • Documenting who handled it and why  • Documenting where and how it was stored  • When equipment is moved, ensuring that a detailed receipt is signed and dated by the previous person with possession, the mover and the new person with responsibility for the equipment	http://www.cert.org/csirts/s ervices.html     http://www.sans.org/score/incidentforms/ChainOfCustody.pdf
2.5 Take actions needed to limit the scope and magnitude of the incident.	Incident Response Team		Incident containment actions include, but are not limited to:  If the incident involves sensitive data improperly posted on one or more publicly accessible websites, remove active and cached content and request takedown of cached web	

			page(s) indexed by search engine companies and other Internet archive entities, e.g., Wayback Machine  Change passwords that may have been compromised  Cease operation of a compromised application or server	
Perform forensics and document findings:     Analyze evidence     Reconstruct incident     Provide detailed documentation	Incident Response Team	<ul> <li>Preserve original evidence and work on a copy of data.</li> <li>Conduct forensics with minimal disturbance to units, systems and original evidence.</li> <li>Results should be repeatable.</li> </ul>		http://www.nij.gov/pubs- sum/199408.htm
2.7 Complete final assessment and documentation of type and scope of data exposed, as well as the availability and type of contact data for individuals affected	Incident Response Team			

## STEP 3: ERADICATION AND RECOVERY

Take steps to remove the cause of the exposure, reduce the impact of the exposure of the sensitive data, restore operations if the incident compromised or otherwise put out of service a system or network, and ensure that future risk of exposure is mitigated

Task	Owner	Guidance	Examples	Additional Resources
3.1 Revisit 2.5 and look for additional ways to limit exposure	Incident Response Team		Additional ways to limit exposure include, but are not limited to:  Running web queries periodically to ensure that the data has not been further exposed or cached.  Reviewing the inventory of equipment and systems impacted and change additional passwords that may have been compromised  Ceasing operation of a compromised application or server and develop workarounds	

3.2 Eradicate and/or mitigate system vulnerabilities, review access privileges and remediate risks to sensitive data stores	Incident Response Team	Possible actions include, but are not limited to:  Run vulnerability scans on impacted systems;  Review and determine where data resides and make adjustments to ensure increased protection as needed.  Limit access to systems to only those who need it;  Use software tools to find, delete and secure sensitive data, e.g., Identity Finder
3.3 Return evidentiary equipment and systems to service once they are secured.	Incident Response Team	

#### STEP 4: NOTIFICATION

Determine the need to give notice to individuals whose data may have been exposed by the incident. Swiftness in notifying those affected by a breach of personally identifiable information, as well as informing certain government entities, is legally mandated in many states and, depending on the nature of the data, also federal law. Speed is also important from a public relations standpoint. To this end, many of the substeps can and should be undertaken in parallel to accommodate these needs.

Task	Owner	Guidance	Examples	Additional Resources
4.1 Make decisions based upon Incident	Appropriate	<ul> <li>Those responsible for</li> </ul>		EDUCAUSE Data Incident
Response Team findings	institution	making these decisions will		Notification Toolkit
<ul> <li>Does level of exposure risk warrant</li> </ul>	officials	vary from institution to		
notification letters?		institution, but typically is a		Determining Notification in
- If yes,		subset of officials informed		Event of Breach
<ul> <li>If applicable, has law</li> </ul>		in Sub-step 1.4. Decisions		
enforcement authorized		made should be in line with		
notification to affected parties?		previous decisions or any		
o Who will issue letter?		deviations fully justified.		
<ul> <li>Who will handle telephone and</li> </ul>		Obviously, all relevant		
email responses to questions		incident notification laws,		
from affected individuals? Does		regulations, and contractual		
expected volume warrant setting		requirements must be		
up call center?		followed.		
<ul> <li>Does magnitude of exposure</li> </ul>		<ul> <li>Opinions diverge on which</li> </ul>		
warrant a press release? Incident		state notification law(s) must		
information website?		be followed when individuals		
<ul> <li>Does exposure risk warrant free</li> </ul>		affected by the breach are		
credit monitoring?		citizens of states other than		
<ul> <li>If a reasonable risk of exposure</li> </ul>		the state where the incident		
does not exist, all remaining sub-		occurred. The advice of		
steps in this section should be		University Counsel should be		
bypassed and STEP 5 Follow-up		sought on this matter.		

should commence.		While breach notification laws, regulations, and contractual requirements vary, alternatives to issuing written notices by postal mail are often allowable depending upon the cost of providing notice, the number of individuals who must be notified, and/or the availability of contact information. These alternatives might, for example, include, but are not limited to, one or more of the following: conspicuous posting of notices on the institution's website, press releases, email notices where addresses are known, telephone notices.	
4.2 Collect name and contact information on affected individuals	Unit, advised by Security Office	This could be a laborious process if individuals are not current students, faculty, staff, donors, patients, etc. of the institution. It is advisable that the best sources of address data for former students, faculty, and staff, as well as alumni, volunteers, contractors, and other affiliates of the institutions whose sensitive data are maintained by the institutions be identified in advance, so that notifications can be made quickly in the event of data exposures.  Ensure that data is collected, transmitted and stored securely and removed when it is no longer needed.	
<ul> <li>4.3 Set up telephone and email support for affected individual questions:</li> <li>Identify appropriate person(s) to handle calls and emails</li> <li>Establish telephone call line/routing</li> </ul>	Unit, advised by Security Office		EDUCAUSE Data Incident Notification Toolkit – FAQ Section

infrastructure, if not available  - Identify/set up telephone number to use  - Identify/set up email address to use  - Train individuals handling calls and emails, including providing them with a list of anticipated questions and answers			
4.4 If deemed appropriate by institution officials in Sub-step 4.1, create website for affected individuals  - Identify URL and location  - Restrict access until ready to go live  - Draft content	Unit, advised by Security Office	Incident websites are typically reserved for situations in which contact information for individuals affected by the breach is unknown or incomplete.  Website content should be approved by appropriate institution officials, e.g., Executive in charge of IT for the institution, e.g., Vice President & CIO Executive in charge of organization in which incident occurred Public affairs office Counsel for the institution	EDUCAUSE Data Incident Notification Toolkit – Website Section
4.5 If deemed appropriate by institution officials in Sub-step 4.1, obtain free credit monitoring services for affected individuals	Unit, advised by Budget and Purchasing Offices	Obtain clear instructions to provide affected individuals signing up for free credit monitoring services and include this information in notification letters, websites, and email/telephone support FAQs.	
4.6 If deemed appropriate by institution officials in Sub-step 4.1, prepare press release  - Identify contact for media  - Compose text for press release  - Develop talking points	Public Affairs	<ul> <li>Press releases are often reserved for situations in which contact information for individuals affected by the breach is unknown or incomplete, but it's wise to have a pre-approved media statement in hand to use in addressing media inquiries.</li> <li>Content should be approved by appropriate institution officials, e.g.,</li> </ul>	EDUCAUSE Data Incident Notification Toolkit – Press Release Section

		- Executive in charge of IT for the institution, e.g., Vice President & CIO - Executive in charge of organization in which incident occurred - Public affairs office - Counsel for the institution		
4.7 Prepare notification letter to affected individuals  - Identify letter issuer and letterhead to be used  - Compose draft text	Unit, advised by Security Office	Letter content should be approved by appropriate institution officials, e.g.,  - Executive in charge of IT for the institution, e.g.,  Vice President & CIO  - Executive in charge of organization in which incident occurred  - Public affairs office  - Counsel for the institution		EDUCAUSE Data Incident Notification Toolkit – Letter Section
4.8 Prepare mailing of notification letters   (postage, addresses)   - Finalize address information   - Arrange for mail merge and   printing/stuffing` of letter and   envelopes	Unit	Avoid personalizing each letter with the affected individuals name, as this increases the risk of mismatched letters and envelopes		
4.9 If required by state law, notify the State's Attorney General and/or other appropriate state agency within the required notification timeframe	University Counsel or other designated office			
4.10 Notify appropriate Federal agency as required by law	University Counsel or other designated office		Appropriate agencies might include, but are not limited to:  U.S. Department of Education, when FERPA-protected student data is exposed  U.S. Department of Health and Human Services, when HIPAA-protected medical data is exposed	HIPAA: http://www.hhs.gov/ocr/privac y/ http://www.hhs.gov/ocr/privac y/hipaa/administrative/breachn otificationrule/index.html  FERPA: http://www2.ed.gov/policy/gen /guid/fpco/ferpa/index.html Other data protection laws, http://protect.iu.edu/cybersecu rity/data/laws

4.11 Notify granting organizations and research partners if research data compromised, as dictated by contractual obligations	University Counsel or designated office			
4.12 Notify appropriate third-party service providers for the institution if doing so would reduce the risk of identity theft for affected individuals or dictated by contracts.	Unit		Appropriate third-party service providers might include, but are not limited to:  • Employee benefit vendors  • Student services vendors	
4.13 If Credit Card data exposed, notify the credit card processor(s) or merchant banks	Treasurer	Specific notification requirements are governed by the card brand.	VISA http://usa.visa.com/merchants /risk_management/cisp_if_com promised.html	
4.14 Notify Credit Bureaus as required by State and upon consultation with University Council	Treasurer with advice from University Counsel			
4.15 Coordinate simultaneous mailing of letters to affected individuals, issuance of press release if applicable, activation of website if applicable, notifications to regulatory entities and third-party vendors.	Unit, Security Office, University Counsel, and Public Affairs			
4.16 Ensure that notification of the data breach is added to the record of access to the affected individuals file as required by Federal or State law.	Data Custodian			

# STEP 5: FOLLOW-UP Identity lessons learned from the incident, implement any remediation needs, and securely store a complete record of the incident.

Task	Owner	Guidance	Examples	Additional Resources
5.1 Collect staff time spent during event and record in the incident documentation (especially for those cases that might be prosecuted)	Unit gathers data from all affected parties and provides to			

	Security	
	Office	
5.2 Schedule a debriefing meeting two to six weeks afterwards to review what could have been done better in responding to the incident.	Security Office, Public Affairs, University Counsel, and appropriate others	
<ul> <li>5.3 Assess remediation needs <ul> <li>Issue report to unit manager and executive management if appropriate</li> <li>Follow up to ensure completed</li> </ul> </li> </ul>	Security Office	Issues for consideration include, but are not limited to:  • Why was the data stored in a vulnerable place?  • What more could have been done to avoid the intrusion?  • Is the unit taking appropriate steps to remediate?
<ul> <li>5.4 Initiate plans and projects to implement remediation needs.</li> <li>Apply lessons learned and recommended changes to access, sensitive data stores, systems and processes to increase protection</li> </ul>	Unit	
5.5 Securely file all records, communications, notes, and other incident artifacts. Retain and eventually securely destroy this incident information in accordance with established records retention policies and schedules.	Security Office	