**Electronic Information Security Policy**

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1. The University’s Electronic Information Security Policy

This policy applies to the use of any University IT facility, including any personally owned device that is attached to the University’s WiFi or to any other University IT asset or service. In order to use the University’s IT systems and services, all ‘users’ (students, staff and visitors) are required to comply with the following code of conduct:

1. All users are required to report any misuse of IT systems, any infringement of this policy and any issue that may endanger full compliance with relevant UK Data Protection legislation.
2. You must not use your University identification or passwords with non University services.
3. You must inform the University if you believe there may be any risk of breach or potential breach of UK Data Protection legislation through information loss, or of any unauthorised access to information.
4. All *private*[[1]](#footnote-2) and *confidential*1 information (electronic and paper), and the means of accessing it (using a PC/Laptop/ Smartphone) should be physically secured (locked away) when not being used.
5. You must report the loss of any computing equipment that might contain confidential1 information.
6. Users should not intentionally cause damage, access or alter admin device or systems settings, or otherwise jeopardise the integrity of computer equipment, software or network services.
7. Anti-virus software must be used on any personal equipment used to access University services.
8. Users must abide by all agreements and contracts by which software and any associated information are accessed using University computing services. Specifically, users must not install, replace or update information on University computing equipment without appropriate authority[[2]](#footnote-3).
9. Users must not alter or install software onto University computing equipment2.
10. Users must not take University IT equipment off-campus, without the appropriate authority2 to do so.
11. Users must not use any University computing services to gain unauthorised access to any computing system (internal or external). This includes unauthorised access to copyrighted, personal or confidential material[[3]](#footnote-4).
12. You must not solicit, encourage or endorse use of, any non University computer system, or use a University system in a new context without first having an (approved) Data Protection Impact Assessment.
13. You must not acquire or distribute *unauthorised*1 information, and you must not use University IT systems or services for acquiring, storing, receiving or transmitting offensive, indecent or obscene material. This includes through web browsing, where using proxy-avoidance and anonymiser websites is expressly prohibited[[4]](#footnote-5).
14. Information should be stored in the most suitable facility, for example in a case management system or Network folder, and not in ad-hoc general storage such as cloud or removable media such USB Sticks.
15. Users must avoid sharing any documents or folders made available to them, particularly if these contain any private1 or confidential1 information.
16. Users should not transform any confidential information communicated with them (for example using a recording of a video conference or copying any email or instant messaging) to any other media or facility.
17. Users must not create, download, store or transmit unlawful material, or material that is indecent, offensive, defamatory, threatening[[5]](#footnote-6), discriminatory or extremist. The University observes the [Prevent Duty of Care](https://www.gov.uk/government/publications/prevent-duty-guidance) and reserves the right to block or monitor access to such material
18. Users must not use University IT systems or services for any commercial activity[[6]](#footnote-7) without appropriate authority2 from IT Services or their Head of Department.
19. Users are not permitted to use University IT systems and services for private commercial purposes or any other employment outside the scope of that person’s official duties or functions.
20. IT Disposal – users must return any University owned IT equipment to IT Services for secure disposal.

The Code of Conduct is available for review in the log-in process of all University devices. At the login-page, type in the word help and the policy will be displayed.

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1. Background and Purpose of the Electronic Information Security Policy

Electronic information is increasingly essential to all aspects of the function of the University. The loss or exposure of some information would perhaps be no more than inconvenient. However, some information may be more sensitive, particularly if it is personal information that relates to an individual or to individuals.

Electronic information is acquired and created all the time, and perhaps unlike an overflowing filing cabinet, electronic data storage is seen as infinite, and unlike clearing away private or confidential papers in an office, the corresponding tidying of information after using it in various data systems can easily be forgotten.

UK Data Protection Legislation incorporates for example the Data Protection Act (**DPA**) and the General Data Protection Rules (**GDPR**) which aim to protect every individual’s right to privacy. These legislate that information created and held by an organisation is held securely, used only for the purpose for which it is intended, and is not retained for longer than that purpose required. This document focuses on the principle of ‘held securely’.

! The University has to balance legitimate access to information (for its intended purpose) and security from unauthorised access. This is particularly and specifically the case when dealing with all personal information

The consequences of misuse, unauthorised access to, or the loss of someone’s personal information the University is in some way responsible for, are significant ethically, reputationally and legally. If there is any negligence (however unintentional), the UK Government’s Information Commissioner’s Office (ICO) can fine an organisation up to £20,000,000 or if it is a larger amount, 4% of the organisation’s annual turn-over, over and above the (unlimited) damages that can be awarded by a court to any one or all of the people affected.

! Avoiding the loss or unauthorised access to information can only be partly met by technological safeguards, compliance also requires awareness and actions by the people who acquire, create and store information.

* 1. Purpose of this document

The policy set out in Section 1, helps ensure students, staff and visitors in how to best use IT in relation to the University whilst supporting the University in meeting the statutory responsibilities to data protection.

! This document particularly draws attention to the importance of your passwords, as this provides the gateway to your own, but potentially to information about other people.

For a fuller understanding of Data Protection and cyber-security, please undertake the on-line training available at; [link to course](https://moodle.chi.ac.uk/course/view.php?id=80951). There is further information on how to stay safe on at: [link to help site](http://help.chi.ac.uk/students/security). The remainder of this document sets out the background and mechanisms through which all students, staff and visitors can minimise the risks of the exposure of other people’s personal information.

* 1. Background to the need for an Electronic Information Security Policy

Technology is an enabler to creating, storing and accessing information, and the University applies the ‘best of breed’, secure, technical facilities and services in the physical and logical safeguards used across the University (encryption, passwords and anti-hacking measures). Excessive choice of mechanisms is sometimes avoided, to reduce incoherence in methods of communicating key messages as well as there being too many alternatives to support, securely.

This policy focuses on electronically held information, but it should be noted that Data Protection principles, equally applies to access to, and the loss of paper-based information. The University undertakes regular internal and external audits and reviews and can (at any time) be subjected to a review by the UK Government’s Information Commissioner’s Office.

Minimising risks requires the active participation of all University stakeholders (all students, staff, visitors and suppliers) that have access to create, acquire or access information, and particularly where that information involves the *confidential* details of other people, or information which would otherwise be considered *private*.

* 1. Review and update of the policy

The policy set out in Section 1 is reviewed at least annually or more regularly if new threats emerge.

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1. Categorising the sensitivity of information

In the context of the University, there are four main classes of information which may affect some or all students, staff and visitors and partners;

|  |
| --- |
| **Category A - Public**  Any data / information that can appropriately be viewed by anyone, anywhere e.g. press releases, course information, publications, released research data, conference papers etc. |
|  |
| **Category B - Private**  Private information is data / information which is intended to be limited to specified members of the University of Chichester on a need to know basis e.g. reports, financial plans, guidance, collaborative documents, draft documents, teaching materials etc. Private may also include information bound by copyright, or which relates to the performance rights or intellectual property of its originator. |
|  |
| **Category C - Confidential (Sensitive personal Information)**  Confidential information is that which relates to a living individual, and who can be identified from that information. Data Protection legislation typically focuses on where you (individually and / or as an organisation) have a copy of information relating to another person. This can be any data which identifies an individual, either on its own or by reference to other information and can include expressions of opinions about an individual of photographs of them. This data relating to other people requires the strongest possible technical safeguards and clearly defined processes to ensure it cannot be seen by anyone not authorised to do so. Examples of personal confidential data include;   * Name, date of birth, address, phone number, email address * Racial or ethnic origin. * Political opinions. * Religious beliefs or other beliefs of a similar nature. * Trade union membership. * Physical or mental health or condition. * Sexual life. * Proceedings for any offence committed or alleged to have been committed, the disposal of such proceedings or the sentence of any court in such proceeding.   Any piece of information which contains any of the above is inherently confidential. This includes, a student’s assessment (because it names them) is confidential[[7]](#footnote-8). |
|  |
| **Category D – Unauthorised**  Any data/information which is personally owned, or which belongs to a 3rd party should not be accessed through, downloaded to, stored on or distributed using University equipment and services, this includes.   * Data that is no longer required, whose time or original purpose has elapsed or passed * Data that could be considered inappropriate and potentially harmful to the University’s reputation * Information that would be better protected by being stored in a case management system[[8]](#footnote-9) * Personally owned music files, video files and photographs, * Using a University ID/log-in in software or services not provided by the University * Using any system for which there has not an approved University Privacy Impact Assessment. * Personally owned (whether free or licensed) software, * University branded or owned information on (or linked from) Social Media * Any information created or stored on counterfeit equipment, or in unlicensed software * Unregistered personal information (see Data Protection Act, 1998) * Any information (incusing music and video) that is not compliant with University policies, procedures or current legislation, and any information being accessed, viewed or used consciously or unconsciously in any illegal act, including their copyright conditions and licencing. |

There no exact or universally adopted definitions for sensitivity of data. The terms *Data* and *Information* are often used interchangeably when describing privacy and the responsibility for their protection that any host (and especially one such as a University) is expected to ensure to protect its associated staff and students.

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1. Information Security and Devices and Storage

For confidential information, case management systems with their inherent access controls and their data management facilities should be used wherever possible. Where this is not possible, network storage is the most secure ad-hoc storage.

**!** Lock away your equipment when not in use.

* 1. Network Storage

**Home drives:** All students and staff have access to network storage known as their home drive or H: drive. This is secure network storage for personal University data attached to their network account, which can be securely accessed from any computer or device connected to the Internet.

**Shared drives:** There are additional network storage called shared drives or S: drive. This network storage is linked to groups of network accounts enabling users to collaborate and share files.

**Advantages of using Network Storage:** The University’s network storage can be used for all categories of information. Data is protected by University information security systems. Data is routinely backed up for business continuity purposes as well as to enable the recovery of data that is accidentally deleted.

* 1. Portable Devices



**University Issued Devices:** Portable devices (such as laptops, tablets and smartphones) may be issued/loaned to enable access University resources whether at a desk, or on the move. Security measures are installed, and data is directed to network storage.

**Personal Devices:** The University enables access to University systems and services through a staff, student or visitor’s own device. Access is controlled through authentication to each system or service. Users also have a responsibility to ensure their devices are protected, e.g. use a boot password, a screen saver with a password, disk encryption and anti-virus software, even if you only ever access public data. You must not download private or confidential data to a personal device.

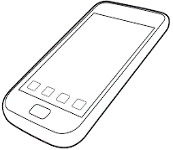
**Working off campus:** Please remember to exercise extra caution when connecting to 3rd party wireless networks (at home, in a coffee shop or hotel for example). Any WiFi which does not require authentication via a user ID and password should be regarded as risky and non-secure.

**!** If you need to leave equipment temporarily, ideally log-out, or at least lock the screen (put the device to sleep), and ensure it is secured (most laptops can be leash locked, and leash locks can be loaned from SIZ)

* 1. Portable Storage

**University Issued Storage Media:** Portable storage media (CDs/DVDs, USB drives and external hard drives) are discouraged. Security measures (such as encryption software) are used to help reduce the risks, however due to the risks of their being lost, portable storage media are not suitable for storing confidential information.

**Personal Storage Media:** The University does not currently restrict the use of personal storage media; however, their use for private and confidential University data is **not** permitted.

**Mobile Telephones:** Data on mobile phones cannot be backed-up. Mobile phones can be lost or stolen, and have very little security. They must not be used to store private or confidential data

**Considerations when using Portable Devices and/or Storage Media**

* Files stored only on portable devices and/or storage media have no provision for backup or recovery if they become lost, stolen or corrupted.
* There is a significant risk of reputational damage and/or litigation and fines if data is stored inappropriately on portable devices, especially when it could have been stored in network storage.

! Portable devices and storage media must only be used for the temporary storage of any category of data. The data must be removed and transferred to network storage at the earliest opportunity.

* If it cannot be avoided, any private and confidential data that *has* to be temporarily copied to University issued devices or storage media, these devices and media **must** be encrypted. Following such use, this media must be returned to SIZ for secure cleaning and disposal.
* Personal devices/storage media, including personal email accounts must **not** be used to store private and confidential data.
  1. Cloud Storage

**University Cloud Storage:** All staff and students have access to the University’s cloud storage system – *OneDrive for Business*. One Drive for Business (ODFB) provides cloud storage (in a data centre in the UK) which can be accessed on and off campus. ODFB should not be used for confidential data, (and networked H / S storage ideally should be used).

**Other Public Cloud Storage:** Other cloud providers, such as Dropbox, iCloud, we-transfer Google docs etc. also offer public online storage. As the services offered by these providers cannot be checked and confirmed by the University their use for University data is **not** permitted.

**Considerations when using Cloud storage**

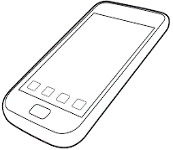
* OneDrive for Business is protected by industry standard security systems, where if/what/when can be confirmed by the University and even files you delete are recoverable (for up to 90 days).
* Private and confidentialdata **must not** be uploaded to any personal cloud storage service
* Synchronisation between ODFB and non University devices **must** be turned off for all categories of data.
  1. Email

**University email:** Staff and Students are provided with University email accounts. Many day-to-day activities are undertaken using email, e.g. meeting requests, documents, business decisions, and requests for service/information. Confidential data should not be sent or stored as an email, (and should be removed to a case management system as soon as possible).



**Personal email:** Many staff and students also have personal email through providers such as Gmail and Yahoo. The University permits users to access their personal email accounts on campus, however their use for private and for confidential data is **not** permitted.



**Email on mobile telephones:** Mobile phones (of all makes) have very little security. Email on a mobile phone increase the risks of unauthorised access to accounts data and passwords. With a mobile phone, only web-email can be used. Email passwords should not be set to be ‘remembered’ by the device, and email should not be downloaded to the device.

**! Considerations when using email and instant messaging**

* Be careful to ensure you have spelled the email address you are sending to, correctly, a misspelled email could mean information being sent to an unauthorised person.
* Be careful when using non University video conferencing, this can be intercepted (and recorded)
* Email and instant messaging are unsecured communication tools, what you send can easily be intercepted
* University email should only be used for temporary storage of any type of data. Email attachments, and any email containing private or confidential data should always be removed to network storage.
* Personal email and personal instant messaging must not be used to transmit or store private and confidential data in or out.
* Mobile phones should only use password protected web-based email. You should not use an email ‘client’ service that downloads email to the device.
* The University’s email system will delete appointments and sent mail that is more than 12 months old.

**! If you are unsure about how to categorise your data and where you can store your data please contact the Support and Information Zone (SIZ)**

* 1. Summary view of methods of its storage.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Category[[9]](#footnote-10) | Method | | | | | | | | | | | | | | | | |
| **University**  **Corporate Systems[[10]](#footnote-11)** | **University Network** | | **Laptop or Mobile Telephone** | | **Portable media**  **USB Sticks / SD Cards** | | **Cloud & File transfer**  **(OneDrive)** | Dropbox - B2B Commerce Platform | Pepperi  **Cloud store & File Transfer** | **Secure Email** | | ****  **Email** | | **Video Conferencing** | **zoom-logo | Propel Marketing & Design, Inc.**      **Other Video[[11]](#footnote-12) Conferencing** | **Skype for Busienss Instant and Direct Messaging** | **Other**  **instant and Direct Messaging** |
|  | (H) | (S) | UoC | Personal**[[12]](#footnote-13)** | UoC | Personal11 | UoC | Non UoC11 | UoC | Personal11 | UoC | Personal11 | UOC | Personal11 | UoC | Personal11 |
| **A**  Public |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **B**  Private |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **C**  Confidential |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **D**  **Unauthorised** |  |  |  |  | ! |  | ! |  | ! |  | ! |  | ! |  | ! |  | ! |

 Approved storage method

* Approved storage method only if encrypted, and only temporarily until the data can be relocated to a corporate system

 Only for use if a suitable corporate system is not available, but must have restricted access, and retention management switched off.

**** Strictly Prohibited

! This is outside of University responsibilities, but we would strongly counsel you to consider this carefully

1. Information Security, for Identifiers and Passwords

Access to systems comprises of regulated access to the University’s infrastructure (internet for example) and devices (printers for example) , and then on a *by* role basis to each of the University’s business systems (Moodle, SITS etc.). Each University device is supported by a single sign on process, to all systems and services. For personal devices, the password for access to University Systems and Services has to be entered manually after the device has been started, inclusive of any personal, local passwords this might entail.

! The named account holder is accountable for all use of the ID and passwords for their University account.

* 1. Risks – Identifiers and Passwords

The Identifier (ID) and a password to the device (your Laptop for example), corelates to information systems you can access, and are mechanisms that aim to protect both your own information, and to assist you in protecting other people’s information you may have access to. The approach you take to your identifier(s), and your passwords are significant to the risks of someone else finding these out, and impersonating (spoofing) you.

Having a different ID and password for the device (Laptop for example), and for the locations (Cloud Storage) and different ID/Password for access to each system reduces risks, however this approach is seen as being inconvenient and unpopular. Consequently, it is important to realise that your ‘single-sign-on’ IDs and Passwords can, if ‘harvested’, be used on other equipment to get further and deeper unauthorised access.

! Your University ID and Password should be only used for University services - you must not use them for non University provided services such as Zoom, WeTransfer Dropbox and social media (Discord) etc

In any case, keeping your ID and Passwords secret is absolutely essential. Allowing your device to remember your passwords (caching) is extremely high risk, a risk that is exponentially increased if you do not set a device password (AKA a boot password) that prevents the device being switched on without a password. Please note that the locations in which devices store the ‘caches’ of your individual and single-sign-on passwords are the prime target of hackers, and NB University students and staff may well be targeted because of access you have to valuable personal, financial, copywrited and research data

! Stealing your device in the hope of finding your stored passwords is primarily what thieves are after

Over 2000 smartphones and about 1500 laptops are stolen every day in the UK, and it is the potential access to ID and password information that is of most value to most criminals, not the resale value of a second hand IT.

Provided you report it, IT can help you disable your single-sign-on and the individual passwords that give access to network storage, and corporate systems.

! NB the more systems you have access to, the higher your risks and the greater your responsibilities

Access for devices attached to the University’s network and systems is monitored, and access is suspended where there has been inactivity for more than 5 minutes. The systems that contain more sensitive information may require that you re-enter your password after a period of inactivity to reduce the risks of an opportunist individual finding an unattended device, and therefore having access to everything *you* have access to.

* 1. Password Hygiene

All users must manage the password associated with their identifiers for each service they are authorised to access in a safe and secure manner. It is good practice that;

* Each password is appropriate and secret
* Passwords should not be guessable i.e. not! your partner’s name, dates of birth, or names of your children
* Passwords or logon details should never be divulged to **any** person; this includes the account holder’s manager, colleagues, staff and members of IT Services
* Identifiers, Passwords and logon details should **not** be written down
* You should not let your web-browser remember (*cache*) your passwords

! You should never use your University ID and Password with any non-University website, device or service

To facilitate the secure management of passwords on the IT systems, the following rules are applied:

* It is good practice to change passwords regularly, recommendations from the Information Commissioner’s Office, and under ISO27001 vary in advising this is done between every 15 to every 60 days.
* Passwords for the main University network will automatically **expire after a maximum of 6 months for staff and after 3 years or the life of the course for students**; passwords may not be reused.
* Passwords require a minimum of EIGHT characters (one of which must be numeric) with a mixture of upper and lower case characters. A stronger password will include at least one symbol (+, -, \*, #, etc).
* Requests for password resets can be made via the self-service password reset facility available (24 hours a day, 7 days a week) via the University Internet site or alternatively can be handled by the SIZ.

! Help and advice is available from the Support and Information Zone 01243 816222, [help@chi.ac.uk](mailto:help@chi.ac.uk) and general guidance is published on the IT Help web pages [Link to help site](http://help.chi.ac.uk/) .

1. Information Security and University Monitoring

In addition to our own commitments to privacy and confidentiality, the University is legally obliged to ensure that computing services (hardware, software, network services) are used appropriately in support of institutional activities and to ensure compliance with statutory provisions, Privacy and licence agreements.

The University provides secure and appropriate systems and services. However, new facilities are offered (paid for an not) that can be accessed using the University’s devices, and internet connection etc.

All University staff are expected to exercise good and informed judgement to avoid Students (or other staff) being exposed to unsupervised technology, or technology whose integrity cannot be assured. In addition to privacy legislation, all staff and students are expected to recognise the risks of grooming, bullying and radicalisation and to ensure that any systems referred to, recommended or used by them have adequate safeguarding. Any system that is proposed to be used, or whose use changes, must be assessed by the University’s Data Protection Officer as suitable (for the intended use), through a Data Projection Impact Assessment (DPIA) before being initiated.

The University’s IT Systems and services are provided to enable staff, students and guests to carry out their work, research or studies. On activating an IT account at the University, the user is explicitly bound by this Policy.

The University fully supports the Prevent Duty of Care, and in addition to ensuring privacy, ensures that any systems any University staff uses or endorses (however indirectly) are supported with a Data Protection Impact Assessment (DPIA). This includes for any new, or changed context of its use in relation to any University activity.

No new systems should be commissioned without a DPIA, whose evaluation will include whether there are already similar systems in place, (and their relative security) and in particular, the facilities needed to ensure that radicalisation, grooming, bullying and any data loss etc can be prevented, detected and resolved. This will include reviewing the facilities capability for the right to be forgotten, and permanent, secure deletion.

Initial awareness of the policy (Section 1) is incorporated into induction training for staff and students. For any member of staff who is inviting a partner, or a visiting academic to the University, they should advise the partner / visitor to review this policy. Incidents and questions logged with SIZ, and the incidence of access to this document is logged as a relative measure of the levels of awareness, to inform additional guidance and advice.

* 1. Monitoring the awareness and compliance with the policy

The policy is made available to students, and to staff. Staff awareness of the policy is assisted by inclusion in the induction process and is refreshed annually, or more frequently if new threats or new practices emerge.

The policy is referenced in the log-in process of all University owned PCs and Laptops. This include that the user may review but is inherently bound by the policy if they log into the device.

* 1. Monitoring IT and telehony systems

In order to ensure the University’s compliance with UK Data Protection Legislation, (for example the Data Protection Act and General Data Protection Regulations - GDPR), use of the University’s IT Systems, telephony and infrastructure may be subject to monitoring and logging.

! You should not use any University IT devices or services in contravention of the IT Code of Conduct to access information (such as websites) that might damage the University’s reputation.

Accessing internet sites (using the University’s IT services, including those accessed from off-campus) is **routinely** monitored and analysed. Accessing certain classifications of internet sites, or making calls to certain types of telephony services is prohibited (copyright infringement, threat of violence, known sources of extremism etc).

All attempts to access all types of websites sites or cloud-services are logged. These are analysed for aberrant trends and evaluated for general safeguarding and or where needed, formal investigation. Where you need access for legitimate, approved research these can enabled for named individuals, for fixed periods of time.

Only in exceptional circumstances, or where the analysis of trends suggest an issue are the logs of websites visited assessed in detail, and this follows the same process for if there is a need to access a user’s stored information. Exceptional circumstances includes where;

* A request is made by the security forces
* There are concerns that the user of the IT is at the risk of radicalism
* A request is made by a police force investigating alleged criminal activity, or in support of other law enforcement processes
* The University is undertaking an internal investigation in line with its published Policies and Procedures
* The University is required to provide information to external bodies such as a software licensing company in line with the terms and conditions of a licensing agreement
* The Vice Chancellors Group (VCG) determines that monitoring or investigation is necessary to ensure compliance with the law or with University Policies and Procedures.
  1. Reporting

All incidents where there is any risk of information loss, or unauthorised access should be reported to SIZ. SIZ will liaise with the key IT and senior staff (For example the Academic Registrar, who is also responsible for the University’s DPA policy, and who is the liaison with the Information Commissioner’s Office (ICO), to assess the level of risk.

Where there is a risk of the loss of information, the incident will be referred to the University’ Serious Incident Management Team (SIMT).

* 1. The consequences

! You as well as the University can be prosecuted and, or fined under UK Data Protection legislation, or for example; the Computer Misuse Act, and the Federation Against Software Theft.

Penalties under UK Data Protection Legislation can be applied if the organisation is unable to prove that a device, or password that gives access to information has *not* been lost (even temporarily), or if the University is unable to prove that unauthorised access has not taken place.

Whether or not there is ever any direct link of any criminal activity, unlimited compensation can be awarded to the individuals affected by information ‘loss’. In addition, the Director Public Prosecutions, instructed by the UK Government’s Information Commissioner can apply fines of up to £20,000,000 or 4% of the organisational annual turn-over (whichever is the larger), per incident, over and above any damages awarded.

The Information Commissioner’s Office can also serve compliance orders, and fines, which might include appointing external experts (at further cost to the University) until they can ensure that the policies, awareness, technical and people procedures are secure.

! Please note: ignorance of the law, or transgressing law in ignorance does not exonerate you from its penalties

* 1. Personal consequences of infringement

This policy (in Section 1) is a guide and not an exhaustive list of what you should or should not do, and you should satisfy yourself of the best practices and the principles of law, a selection of which is listed in Appendix 1.

Any suspected failure to apply reasonable care, and any suspected infringement of the policy or any related legal requirements may result in the user’s access being withdrawn pending appropriate investigation, and

* action under the Disciplinary Policy and Procedure (for staff)
* action under the Academic Regulations (for students).

! Any investigation may lead to civil or criminal proceedings for the University, and this may also be jointly or severable undertaken with you

1. Archiving and data disposal

All of the University’s systems are secured using the latest and best methods and technologies. The technologies and polices seek to help us avoid unauthorised access and failure to achieve the Prevent Duty of Care, but the legislation expects that organisations should not unnecessarily acquire, or retain confidential data.

Data disposal includes the integrity of the *right to be forgotten*, and the oversight facilities needed in any system approved for use in the University to ensure that; if, what, when and who of any access can be established, across all data acquisition, use, and disposal.

* 1. University Systems

The most secure location for confidential information is a case management system (for example the University’s Student Information System, or HR Systems), specifically designed with approved access controls, and with agreed data management (retention / disposal) mechanisms.

Where possible, any ad-hoc confidential data (especially including emails) should be transferred to and stored in a suitable case management system.

! Please contact SIZ if you need help in copying confidential information to a case management system

* 1. Email and Instant Messaging Folders

In order to reduce the risks of data being compromised through unauthorised access, or overly long retention, certain folders in the University’s email and instant messaging systems are automatically deleted each August.

* **Automatic, annual deletion of “Deleted Items”.** When you delete an email from your inbox this is actually just removed into your Deleted Items folder. Any items older than 12 months in the Deleted Items folder will be automatically deleted each August.
* **Automatic, annual deletion of historic “Sent Items” and Calendar appointments.** Copies of sent emails, and of past calendar appointments that are than 24 months old will be automatically deleted each August.
* **Automatic, annual deletion of historic “Instant Messages”.** Instant messages you sent and receive using the University’s Skype, are recorded in your email account, in an email folder called ‘Conversation History’. Any items older than 12 months in the Conversation History folder will be automatically deleted.

For anything that must be kept for a longer period, these can be transferred to a case management system (student record for example) to a different folder, and or to your H:\ storage.

! Please contact SIZ if you need help in deleting emails diary appointments or messages more frequently, and if you need help in transferring a confidential email to a more suitable storage facility

* 1. Leaving the University

On leaving the University your access to systems and services is ceased. Your University storage areas and email account are archived for between 30 and 90 days before being permanently deleted.

Students may be offered an Alumni email account, however we equally respect the right-to-be-forgotten

Where there is agreement to do so (and so long as it does not contravene UK Data Protection Legislation) copies of private and public data (for example teaching notes, or your own research) may be made available for you to transfer to another organisation, or to a home account.

! Please contact SIZ if you need help in copying private and public data (whether you are staff of student)

* 1. Equipment Disposal

In order to reduce the risks of data loss, and to ensure compliance with environmental policies, (as well as to avoid unachievable liabilities for example from the sale of goods act), redundant or surplus IT equipment is rarely allowed to be retained by a leaving member of staff or a student, and is rarely sold.

Appendix 1: Summary of relevant legal frameworks

This policy is a high level summary of the practices expected of any organisation, and its members. The policy is not exhaustive, nor does it over-ride statutory requirements. Use of University information and IT systems is subject to all relevant legislation, licence agreements, University Policies and other regulatory requirements which include the latest versions of, but are not limited to:

* Data Protection Act 1998
* The Protection from Harassment Act 1997
* Section 76 of the Serious Crime Act 2015 (Controlling or coercive behaviour)
* ss28-32 of the Crime and Disorder Act 1998 (CDA), (Harassment and Stalking)
* Stirring up racial or religious hatred under Part III of the Public Order Act 1986, in particular: publishing / distributing written material, and distributing / showing / playing a recording of visual images or sounds
* Computer Misuse Act 1990
* Regulation of Investigatory Powers Act 2000
* Protection of Children Act 1978
* Freedom of Information Act 2000
* Digital Economic Act 2010
* Malicious Communication Act 1988
* Prevention of Terrorism Act 2005
* Terrorism Act 2006
* The Prevent Duty of Care (identification of vulnerability to extremism)
* Discrimination: <https://www.gov.uk/discrimination-your-rights/types-of-discrimination>
* Copyright Designs and Patents Act 1988
* Criminal Justice and Public Order Act 1994
* Chest Code of Conduct (See <http://www.eduserv.org.uk/services/Chest-Agreements>)
* Educational Recording Agency Licence
* Employment Code of Practice 2002
* General Data Protection Rules 2018
* Human Rights Act 1998
* Intellectual Property <https://www.gov.uk/government/organisations/intellectual-property-office>
* JANET Acceptable Use Policy (**J**oint **A**cademic **NET**work)
* Police and Criminal Evidence Act 1984
* Police and Justice Act 2006
* Marketing and Communications Policy
* Newspaper Licensing Agency Licence
* Obscene Publication Acts 1959 and 1964
* Obscenity: <http://www.cps.gov.uk/legal/l_to_o/obscene_publications/>
* Software Licence Agreements
* The Prevent Duty of Care (see https://www.gov.uk/government/publications/prevent-duty-guidance)
* WEEE Directive (Waste Electrical and Electronic Equipment Directive)

! Please note: It is the responsibility of each individual staff member, student or other stakeholder associated with the University to ensure they fully comply with the relevant and most up to date versions of legislation and any other regulatory requirements. The University’s policy should be used as a guide to good practices, and not an exhaustive or authoritative statement of what you should do to comply with any relevant legislation.

! Please Remember: in accordance with UK Data Protection legislation and GDPR, you as well as the University are jointly and severally liable for your actions and their consequences; these could endanger our students, staff and partners, and can include both financial and reputational damage to the University.

1. For definitions of Private, Confidential and Unauthorised information please see the Electronic Information Security Policy [↑](#footnote-ref-2)
2. If there is a specialised need, this may reviewed through IT, recorded through the SIZ support desk. [↑](#footnote-ref-3)
3. This particularly includes downloading copies of films and music outside of their copyright requirements. [↑](#footnote-ref-4)
4. Exceptions can be made for the collection and storage of sensitive materials for authorised research [↑](#footnote-ref-5)
5. This includes anything that might be considered as bullying, grooming, radicalisation, harassment or stalking [↑](#footnote-ref-6)
6. This is because University equipment uses discounted HE software licensing, and commercial licenses may be required. [↑](#footnote-ref-7)
7. Further information is available at  [link to policy](http://www.chi.ac.uk/about-us/about-us/how-we-work/policies/data-protection) [↑](#footnote-ref-8)
8. For example HR data, and photographs of staff or students and any other confidential information for which explicit consent has not been established should not be retained in ad-hoc storage such as network drives, PC hard drives, USB sticks, mobile telephones. Such information should only be stored in case management systems. [↑](#footnote-ref-9)
9. See definitions on page 5 [↑](#footnote-ref-10)
10. For example, the Tribal Students Record System (SITS), the ITrent Human Resource system etc, [↑](#footnote-ref-11)
11. These examples are not to be used, and no services such as these should be used without first undertaking, and having approved a Data Privacy Impact Assessment. [↑](#footnote-ref-12)
12. NB you MUST NOT use your University identifiers and passwords with personal services, or for services not provided by the University’s IT Department, (without an approved Privacy Impact Assessment). [↑](#footnote-ref-13)