

Procedure No. VI-51

Security Breach Procedure	
Adopted: 28 December 2021	Last Reviewed/Revised: December 6, 2021
Next Scheduled Review: 2024-2025	
Associated Policies & Procedures: I-001 Privacy & Information Plan VI-81 Privacy Procedure I-000 Video Surveillance VI-83 Video Surveillance Procedure I-43 Use of Technology and Digital Citizenship VI-62 Use of Technology and Digital Citizenship	

Purpose

This procedure is designed to protect the confidentiality, integrity, and availability of information regarding and processing from data security incidents in a manner that minimizes its business and legal risks and complies with all legal obligations and relevant legislation, including the *Education Act*, the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA), the *Personal Information Protection and Electronic Information Privacy Act* (PIPEDA), the *Personal Information Protection and Electronic Information Privacy Act* (PHIPA), the *Personal Information Protection and Electronic Information Privacy Act* (PIPEDA) and any other applicable legislation.

Application and Scope

This procedure applies to all HCDSB employees, ~~Technical staff,~~

A
collected, used, disclosed, retained, or destroyed in a manner inconsistent with privacy legislation or other legal obligations. Confidential information can be personal information, or it can be third-party information or technical information that, if exposed to unauthorized users, can lead to significant harm to HCDSB's technology infrastructure



- o notify the appropriate law enforcement agencies if the breach involves personally identifiable information that is protected under the Health Information Privacy Act (HIPA) or other applicable laws
- o notify the appropriate regulatory agencies if the breach involves personally identifiable information that is protected under the Health Information Privacy Act (HIPA) or other applicable laws
- o notify the appropriate regulatory agencies if the breach involves personally identifiable information that is protected under the Health Information Privacy Act (HIPA) or other applicable laws
- o temporarily shut down the system

Document the breach and containment activities in detail



Review of physical and/or technical security

Review of relationships with third party service providers

APPROVED: Barbara Martinez, Director of the Administrative Council

AUTHORIZED BY: _____
Director of Education and Secretary of the Board



Appendix A

Security Breach Report

Date of Incident

Name of School/Dept/Business:

Contact information (include contact name, title, facility, address and work number/email)

Third Party reporting the Breach

Coordinates of other contacts if applicable

Details of the Incident:

1. Description of the breach (include the cause, how the incident occurred, and date of discovery).
2. Description of the types of information involved (e.g., financial, medical, etc.). **Do not include the content of information that was breached, but list the types of information that was breached)
3. If the breach involved the loss or theft of a computer, tablet, USB stick, was it password protected or encrypted and if not, what the procedure for implementing the protection?
4. How many individuals are affected?
5. How many records are affected?
6. Did the breach involve the 3110 workers' comp?
7. Does the breach involve paper or electronic records?
8. How to track how the personal information happened?
9. Has any other organization (such as law enforcement) been notified of the breach? If so, when were they notified?
10. Security (criminal, etc.) are any other investigation related to this breach? (insurance, other?)
11. Describe the measures taken to contain the breach.
12. Has the information been recovered? If not, please explain the steps you have or will be taking to obtain the records?
13. How to track how the personal information happened?
14. Describe the measures contemplated or being taken to prevent a recurrence of this incident? Please include details of the training, new policies or procedures, other actions you will be taking?
15. Submit report to the Privacy Officer (Chief Privacy Officer), cc Director of Education and appropriate