



The Athelstan Trust

Information Security Policy

Date of Review	Approved by	Date of Approval	Next Review	Website
May 2018	Board	24/5/18	May 2021	

1. Introduction

The Athelstan Trust issues this policy to meet the requirements incumbent upon them under The GDPR and The Data Protection Act 2018 for the handling of personal data in the role of controller.

The Athelstan Trust processes large amounts of personal and confidential information on its consumers, and has a responsibility to maintain privacy and security regarding this information. To this end the confidentiality, integrity, availability and accountability of this information needs to be protected from harm in a way that is proportionate to the risks to the information.

The purpose of this policy is:

- To protect the organisation's information and subsequently to protect the organisation's reputation
- To enable secure information sharing to deliver services
- To complement and safeguard information enabling business growth
- To protect the organisation from legal liability and inappropriate use
- To encourage consistent and professional use of information and systems
- To ensure everyone is clear about their roles in using and protecting information
- To maintain awareness of information security
- To protect the organisation's employees

2. Scope

This policy applies to all employees of The Athelstan Trust including contract, agency and temporary staff, volunteers and employees of partner organisations working for The Athelstan Trust whenever and wherever that they process the organisation's information.

The policy applies to all forms of information including, but not limited to, text, pictures, photographs, maps, diagrams, video, audio, CCTV and music, which is owned by, administered or controlled The Athelstan Trust, including information, which is:

- Spoken face to face, communicated by fixed line, by mobile telephone, or by two-way radio
- Written on paper or printed out from a computer system. This may include working both on-site or remotely (e.g. at home)
- Stored in structured manual filing systems
- Transmitted by email, over the Internet, fax (if in place), and via wireless technology



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- Stored and processed via computers, computer networks or mobile computing devices, including, but not restricted to, PCs, mobile phones, laptops, tablet PCs, electronic organisers and personal digital assistants (PDAs).
- Stored on **any** type of removable computer media including, but not restricted to CDs, DVDs, tapes, microfiche, diskettes, USB memory sticks, external hard disks, and memory stores in devices including, but not restricted to, digital cameras, MP3 and MP4 players.

3. Legal Principles

In execution of this policy The Athelstan Trust will comply with the data protection principles of the GDPR and the Data Protection Act 2018. Specifically the principle that personal data is processed in a manner that ensures appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures.

The Athelstan Trust will adopt the appropriate technological and organisational measures to ensure compliance with the Data Protection Principles by carrying out the necessary procedures.

4. Roles and Responsibilities

All consumers which include staff, contractors, consultants, suppliers, volunteers, governors and trustees must:

- a) Be familiar with this policy and other relevant policies and procedures including, but not limited to:
 - i. Data Protection Policy
 - ii. Special Categories of Personal Data Policy
 - iii. Data Breach Policy
 - iv. Data Retention Policy
 - v. Acceptable Usage Policies
- b) Play an active role in protecting information in their work
- c) Read and act on any training and awareness, and communications regarding information security and ask for clarification if these are not understood
- d) Take care when handling information to ensure it is not disclosed to those without the need to know or are not approved
- e) Report any breaches, near misses, or incidents to the organisation via the organisation's Data Breach Policy and procedures

Governors and Senior Leaders are required to:

- a) Approve this policy
- b) Actively promote a culture of privacy and security
- c) Ensure security and privacy is considered throughout the development of any new service, process or product
- d) Cascade any relevant communications regarding information security
- e) Ensure Information Owners and Information Custodians are assigned for its critical information assets

Ultimately this group are accountable for the organisation's information, therefore there may be other elements that this cohort deliver as part of their roles.



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Information owners are required to:

- a) Update the organisation's Record of Processing Activities (Information Audit / Inventory) at least on an annual basis
- b) Contribute to the risk assessment on their information assets, and own the risks, the potential mitigations, and the implementation of any controls
- c) Ensure Business Continuity Plans are in place for their information assets as well as being exercised / tested
- d) Be involved in any investigation regarding breaches, incidents or near-misses associated with their information assets

ICT are required to:

- a) Be the custodian of electronic systems which process information assets
- b) Assist information owners and the Data Protection Officer in identifying any risks associated with the processing of information on the organisation's electronic systems
- c) Assist from a technical level with any investigation regarding breaches, incidents or near-misses associated with the organisation's information assets
- d) Report any unauthorised access, or unauthorised access attempts to information systems
- e) Ensure software and operating systems are appropriately licensed

Data Protection Officer is required to:

- a) Monitor compliance with Data Protection Law and this policy, reporting this to the Senior Board
- b) Assist the organisation with any Data Protection Impact Assessment which could include recommending controls to reduce risk
- c) Assist the organisation with any queries they have regarding data protection

5. Data Protection by Design

It is a statutory requirement that any activity involving a high risk to the data protection rights of the individual when processing personal data be assessed by the Data Protection Impact Assessment. Prior to the assumption of any such activity i-west must be consulted and an initial screening be conducted assessing risk.

The concept of *data protection by design* will be a guiding principle in achieving the security of individual's data protection rights. The following will be considered as part of data protection by design

- **Encryption** – the use of strong cryptography to protect data at rest and in transit
- **Pseudonymisation** – the use of a unique reference number
- **Data Minimisation** – information is only personalised or personally identifiable for the minimum amount of time and only until the purpose is achieved

Any activity involving the processing of personal data must be registered on the Information Inventory and reviewed at the very least annually.



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6. Procedures

Appendix 1 includes procedures to aid consumers protecting the organisation's information assets.

7. Security Incidents

Wherever it is believed that a security incident has occurred or a 'near miss' has occurred, the organisation and the Data Protection Officer (i-west) must be informed immediately and the Security Incident Management (SIM) process must be carried out. The SIM is designed to manage, investigate, report and provide 'Learning from Experience' (LFE) to avoid future incidents occurring.

In any case an incident must be reported no later than 24 hours from identification, except where a malicious incident has occurred. The learning culture within the organisation seeks the avoidance of a blame culture and is key to allowing individuals the confidence to report genuine mistakes.

Further details on security incidents and data breaches can be found in the Data Breach Policy.

8. Monitoring and Discipline

Compliance with this policy shall be monitored through a review process. This will be agreed with the Data Protection Officer, and compliance will be reported to the senior management board.

Should it be found that this policy has not been complied with, or if an intentional breach of the policy has taken place, the organisation, in consultation with senior management, shall have full authority to take the immediate steps considered necessary, including disciplinary action.

**Review this Policy upon;
Change of Data Protection Officer,
Change of Legislation**



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Appendix 1 – Information Security Procedures

All consumers must protect personal data at rest by applying appropriate security:

- 1) **Locking screens** when away from their desks (using  +L)
- 2) By **disposing of information and equipment** in an appropriate manner:
 - a. Equipment – via the organisation’s accredited provider
 - b. Paper – using either a cross cut shredder or the organisation’s accredited provider which may be facilitated by Confidential Waste receptacles.
- 3) Ensuring **special categories of personal data**¹ is given extra security, and at a minimum is locked away when not in use (¹ *race/ethnicity, religion, genetics, health, photos, sexual orientation, trade union, political opinions*)
- 4) Using encryption when **processing personal data offsite** e.g. working at home (either on an encrypted device or an encrypted USB stick owned by the organisation). For encrypted sticks users must
 - a. ensure the information is uploaded back to the organisation’s network as soon as possible, and;
 - b. only process the data on the stick and not process or save the data outside of the stick (e.g. locally to the device).
- 5) When processing data on an unmanaged (**personal device**) users must ensure:
 - a. The device is protected by PIN, Password or fingerprint, and ideally encrypted
 - b. That the organisation’s systems (e.g. Webmail) are not left logged in
 - c. That attachments are not opened (and downloaded), unless in an emergency where measures are to be taken to delete the information after use
- 6) **Data taken offsite must be protected at all times**, as well as the above, users must:
 - a. Keep information and equipment on their person at all times (e.g. when stopping off on the way home)
 - b. Be held in an appropriate receptacle (e.g. bag) to reduce the risk of opportunistic theft
 - c. Not store or leave the information and equipment in a vehicle when not in use
 - d. Consider whether data minimisation could be used. For example:
 - i. Not making the information personally identifiable, by using pseudonymisation (e.g. Unique reference or initials)
 - ii. Using a code system or colour code system to identify key indicators (e.g. allergies)
 - iii. Not having the organisation logo on any hardcopy documents
 - iv. Using encryption to protect the data (e.g. encrypted device rather than hard copies)
- 7) **Ensuring care is taken with emails**, by applying the following:
 - a. Was I expecting this email?
 - b. Does it look and feel right?
 - c. Can I check (by other trusted means) that the email is legitimate?
 - d. Not clicking any links or opening any attachment with validating them
 - e. Using blind copy (BCC) when emailing more than one external user
 - f. Double checking the email address when sending emails
 - g. Encrypting personal data to external addresses ([See Appendix 3](#))
 - h. The Trust is in the process of setting up a two minute email delay rule on all emails sent (where possible), this provides a safety net where all emails sent are held in Outbox for one minute before delivery allowing the user to edit/delete
- 8) Ensuring any **information disclosed verbally** is
 - a. Validated – the person calling/present is known to have the need to know
 - b. Documented – a summary of what was disclosed and filed



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- 9) Ensuring any **information sent via post has the address double checked** – where possible copy and paste from a system and is marked Private & Confidential

Appendix 3 – Securing an email in transit

The three main risks associated with email are:

- 1) Emails are intercepted in transit
- 2) Emails are sent to the wrong recipient
- 3) Email addresses are disclosed to those without the need to know

This process covers risk (1) and enables the secure exchange of information over email (in the absence of a secure email portal).

- 1) Document the information in an MS Office document
- 2) Ensure that this is not the source/primary document – if it is then create a copy
Do not encrypt the source document – if you do, and forget the password you are unlikely to be able to gain access to the information again!
- 3) Have the document open, and then click
 - a. File
 - b. Protect Document
 - c. Encrypt with Password
 - d. Create a strong password (minimum of 8 characters) – you could use a password generator <https://passwordsgenerator.net/> or pre-agree one with the recipient
 - e. Apply this password to the document
 - f. Save
- 4) Attach the secured document to an email and send it to the recipient
- 5) Communicate the password by other trusted means e.g. Phone call, or message. Before telling them the password ensure you:
 - a. Are communicating with the correct person; and
 - b. Confirm that they have received the email

It should be noted that encrypted attachments are sometimes blocked by email gateways as they cannot inspect the contents