Information Asset and Security Classification Schedule



1 Purpose

To provide a high-level default classification for each of the functional areas (Table 1), details regarding Information Systems responsibilities (Table 2), indicative starting points for the assessment of the potential impact (Table 3) and a list of standard safeguards applicable to all data classification levels (Table 4).

2 Scope

This schedule must be read in conjunction with the Information Asset and Security Classification Procedure and is subordinate to it.

3 Schedule

3.1 Table 1: Functional area responsibility and Information System Custodian

Table 1 provides a high-level default classification for each of the functional areas mentioned. These should be used as indicative starting points for the assessment of the potential impact (Table 3) for the further detailed classification for individual Systems within the functional areas.

| Functional Area | Information System Custodian | Classification |
|---|---|---------------------------|
| Academic data | Provost | Restricted Information |
| Alumni data | Pro Vice-Chancellor (Engagement) | Restricted Information |
| Corporate Website and Content Management | Pro Vice-Chancellor (Engagement) | Public Information |
| Course Material, Learning Management data | Provost | Internal Information |
| Facilities and Services data | Executive Director (Facilities Management), Enterprise Services Division | Restricted Information |
| Financial data | Chief Financial Officer, Enterprise Services Division | Restricted Information |

| Health, Medical and Counselling data | Associate Provost | Restricted Information |
|---|---|---------------------------|
| People Portfolio data | Chief People Officer, Enterprise Services Division | Restricted Information |
| Information Technology data | Chief Information Officer, Enterprise Services Division | Restricted Information |
| Library data | Director (Library Services), Academic Division | Public Information |
| Planning data | Director (Planning and Office of the Deputy Vice- Chancellor Enterprise Services), Enterprise Services Division | Restricted Information |
| Process data | Director (Planning and Office of the Deputy Vice- Chancellor Enterprise Services), Enterprise Services Division | Internal Information |
| Registered Records (Enterprise Information Management Services) | Chief Information Officer, Enterprise Services Division | Restricted Information |
| Research data and Research information | Deputy Vice-Chancellor (Research and Innovation) | Restricted Information |
| Student data | Deputy Academic Registrar and Director (Student Administration) | Restricted Information |

3.2 Table 2: Information Systems responsibilities

| Internal Procedural References | Description | Information System Custodian | ICT Services |
|--------------------------------------|--|---|--|
| 4.1 | Information System classification | Determine a classification in conjunction with ICT Services | Where ICT Services is the owner, classify the System appropriately. Where not, classify the System in conjunction with the ISO |
| 4.2(1) | Unique identification and designation of Information System Custodian for each Information System/applicatio | Within the relevant functional area, the most senior officer or Employee responsible for the management of a faculty or a management or support service or administrative area or subsection of which that is specifically identified for | In conjunction with the business and appropriate stakeholders, confirm ISO for all major Information Systems/Applications |

| | n | allocation of funding within the University's budget framework is assigned the role of the ISO | |
|--------|---|---|---|
| 4.2(2) | Monitoring the University's ICT network infrastructure and addressing audit issues | No responsibility, except to notify ICT Services if they become aware of any network infrastructure issues or concerns | Monitor the University's ICT network infrastructure and address audit issues related to this |
| 4.2(3) | Monitoring, authorising and revoking access and addressing audit issues | Monitor, authorise and revoke user access as required with the tools and means provided by ICT Services | Actioning requests from the ISO, and providing ISO with the means to either perform the tasks or perform the tasks requested by the ISO |
| 4.2(4) | Avoid breaches of legal, statutory, regulatory, contract or privacy obligations | Work in conjunction with ICT Services, to provide guidance as to compliance with respect to legal, statutory, regulatory, contract or privacy compliance obligations | Assist ISO in monitoring compliance to obligations with regard to University's Information Systems and Information Assets, and assist in internal and/or external audits, including reporting on the status of audit issues |
| 4.2(5) | Central Authentication System | No responsibility to implement System, but bring to the attention of ICT Services if it is found that a restricted System can be accessed without authenticating | Ensure that the centralised authentication System is implemented and that restricted Systems are only accessible after Users have authenticated through the System |
| 4.2(6) | Policy/procedure awareness | Advise University Users of security responsibilities specific to the System | Advise University Users of the relevant ICT security policy/procedures and general security responsibilities |
| 4.2(7) | Employee training | Ensure that Employees using the System are trained in its use | Ensure that Employees using ICT Systems are trained |

3.3 Table 3: Potential impact on the University

| Security Objective | LOW - Public | MODERATE - Internal | HIGH - Restricted |
|---|--|--|---|
| Confidentiality Preserving authorised restrictions on Information access and disclosure, including means for protecting personal privacy and proprietary Information | The unauthorised disclosure of Information could be expected to have limited or no adverse effect on the University operations, assets or individuals | The unauthorised disclosure of Information could be expected to have a serious adverse effect on University operations, assets or individuals | The unauthorised disclosure of Information could be expected to have a major or severe effect on University operations, assets or individuals |
| Integrity Guarding against improper Information modification or destruction, and includes ensuring Information non-repudiation and authenticity | The unauthorised modification or destruction of Information could be expected to have a limited or no adverse effect on University operations, assets or individuals | The unauthorised modification or destruction of Information could be expected to have a serious adverse effect on University operations, assets or individuals | The unauthorised modification or destruction of Information could be expected to have a major or severe effect on University operations, assets or individuals |
| Availability Ensuring timely and reliable access to and use of Information | The disruptions of access to or use of Information/System could be expected to have a limited or no adverse effect on University operations, assets or individuals | The disruptions of access to or use of Information/System could be expected to have a serious adverse effect on University operations, assets or individuals | The disruptions of access to or use of Information/System could be expected to have a major or severe effect on University operations, assets or individuals |
| Reputation | No media coverage. Customer complaints within normal levels. | Limited national media coverage and/or customer loss. Large increase in customer complaints. | Sustained national and international media coverage and/or large scale customer loss leading to material decline in revenue. Council involvement in remediation. |

3.4 Table 4: Safeguards for protecting data and data collections based

on their classification

The below represents a standard set of safeguards applicable to data classifications levels. These must be considered by the ISO and an appropriate control set applied to meet control objectives, business requirements and risk assessment.

| | Public Information | Internal Information | Restricted Information |
|---------------------|---|--|--|
| Access Controls | No restriction for viewing Authorisation by ISO required for modification | Viewing and modification restricted to authorised individuals as needed for business related roles ISO grants permission for access Appropriate authentication and authorisation required for access | Viewing and modification restricted to authorised individuals as needed for business related roles on a need-to-know basis ISO grants permission for access with appropriate authentication and authorisation UniSQ Confidentiality Agreement required to be signed by contractors and lodged with the Legal Office |
| Network Security | May reside on a public network Protection with a firewall IDS/IPS protection is recommended | Protection with a network firewall required IDS/IPS protection required Servers hosting the data should not be visible to entire Internet May be in a shared network server subnet with a common firewall rule set for the set of servers | Protection with a network firewall using 'default deny' rule set required IDS/IPS protection required Servers hosting the data cannot be visible to the entire Internet, nor to unprotected subnets like the residence halls and guest wireless networks Must have a firewall rule set dedicated to the System The firewall rule set should be reviewed periodically |
| System Security | Must follow general best practice for System management | Must follow University-specific best practice for System management and security Host-based software firewall | Must follow University-specific best practice for System management and security Host-based software firewall |

| | and security | required | required |
|-------------------|--|---|---|
| | Host-based software firewall | Host-based software IDS/IPS recommended | Host-based software IDS/IPS recommended |
| | recommended | Current antivirus | Current antivirus |
| | Current antivirus | | File integrity checker |
| Remote Access | No restriction for Public facing Systems | Access restricted to local network or VPN Remote access by 3 rd party for technical supported limited to authenticated VPN secure protocols, e.g. SSL | Additional, Unsupervised remote access by 3 rd party for technical support not allowed |
| Copying/Print ing | No restriction | Data should only be printed when there is a legitimate need | Data should only be printed when there is a legitimate need |
| | | Copies must be limited to individuals with a need-to-know Data should not be left unattended on a printer/fax | Copies must be limited to individuals authorised to access the data and have a signed UniSQ Confidentiality Agreement |
| | | May be sent by Internal mail | Data should not be left unattended on a printer/fax |
| | | | Copies must be labelled 'CONFIDENTIAL' |
| | | | May be sent via a Confidential envelope |
| Data Storage | Storage on a secure server recommended | Additional, Storage in a secure Data Centre recommended | Additional, Storage on a secure server in a secure Data Centre required |
| | | NOT stored on an individual's PC or mobile device | Not on a PC or personal device unless using whole-disc encryption |
| | | | Encryption on back-up media required if taken off-site |
| Transmission | No restriction | No requirements | Encryption required (via SSL |

| | | | or secure file transfer protocols) Cannot transmit via email |
|------------------------------|---|---|---|
| | | | unless encrypted and secured with a digital signature |
| Backup/Disas ter recovery | Backups required Daily incremental recommended. Weekly full recorded | Daily backups required Backup tapes are stored across 3 buildings on the Toowoomba Campus. The tape library and tape drives reside in a dedicated back-up room on a purpose-built site within the Toowoomba campus | Daily backups required Backup tapes are stored across 3 buildings on the Toowoomba Campus. The tape library and tape drives reside in a dedicated back-up room on a purpose-built site within the Toowoomba campus |
| Disposal | No restrictions | Shred reports Wipe/erase or destroy electronic media; hard drives, USBs, CD and DVDs, printer drums, magnetic media Note: All disposals of data (ele be made in accordance with the and recorded on the Records I | e approved Disposal Schedule |
| Register/Audi t Logs | Not required | As a minimum, the Register should include: • Information Asset Owner • name or unique identifier of asset or group of assets • description of Information Asset • location of Information Asset • security classification of the Information Asset | Additional Information is required for Restricted category assets: Audit Logs containing • Full details of logged Information on activity for Access, Modify, Delete • number of copies in circulation and their location • disposal details where Information Asset has been disposed of |

| | | date of security classification with details of the authority of the classifier reason for the security classification of the Information Asset, including legislative, regulatory, policy or other reference where applicable, or a copy of the impact assessment made date to review security classification | For Restricted Information Assets, the ISO owner must either conduct a spot check of a small sample of Restricted Information Assets to ensure that these are accounted for and are being handled, stored, in accordance with the minimum standards set out in this framework |
|--|--------------------------------|--|---|
| Audit Log Controls (Ad ministrator) | Log in/out, File A | Access, Administrators are not to audit logs | o have Read, Write, Modify or |
| Audit Log Controls (General User) | Log in/out, Failed attempts | Log in/out, Failed attempts, Delete | Log in/out, Failed attempts, Read, Write, Modify and Delete |

4 References

Nil.

5 Schedule Information

| Accountable Officer | Chief Information Officer | |
|---------------------|--------------------------------|--|
| Responsible Officer | Chief Information Officer | |
| Policy Type | University Procedure | |
| Policy Suite | Enterprise Architecture Policy | |
| Approved Date | 13/12/2024 | |
| Effective Date | 13/12/2024 | |
| Review Date | 17/10/2028 | |

| Relevant Legislation | | |
|---------------------------|---|--|
| Policy Exceptions | Policy Exceptions Register | |
| Related Policies | ICT Information Management and Security Policy | |
| | Records and Information Management Policy | |
| Related Procedures | Research Data and Primary Materials Management Procedure | |
| Related forms, | Disposal Schedules | |
| publications and websites | Records Disposal Register Form | |
| | Privacy website | |
| Definitions | Terms defined in the Definitions Dictionary | |
| | <u>Information</u> | |
| | Any collection of data that is processed, analysed, interpreted, organised, classified or communicated in order to serve a useful purpose, present facts or represent knowledge in any medium or form. This includes presentation in electronic (digital), print, audio, video, image, graphical, cartographic, physical sample, textual or numerical form. | |
| | Information Asset | |
| | An identifiable collection of data stored in any form and recognised as having value for the purpose of enabling the University to perform its business functions, thereby satisfying a recognised University requirement. | |
| | Information System Custodian | |
| | An individual or group of people who have been officially designated as accountable for specific data that is transmitted, used, and stored on a System within the University. | |
| | Information Systems | |
| | The organised collections of hardware, software, equipment, policies, procedures and people that store, process, control and provide access to information. | |
| | Internal Information | |
| | Information should be classified as Internal when the unauthorised disclosure, alteration, or destruction of that Information could result in | |

a moderate level of risk to the University. By default, all Information Assets that are not explicitly classified as Restricted Information or Public Information should be treated as Internal Information. A reasonable level of Security Controls should be applied to Internal Information. Access to Internal Information must be requested from, and authorised by, the Information System Custodian. Access to Internal Information may be authorised to groups of persons by their job classification or responsibilities (e.g. role-based access). Internal Information is moderately sensitive in nature. Often Internal Information is used in making decisions, and therefore it is important this information remain timely and accurate. The risk for negative impact on the University should this information not be available when needed is moderate.

Personal Information

Is 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.

Public Information

Information should be classified as Public when the unauthorised disclosure, alteration, or destruction of that Information would result in little or no risk to the University. While little or no controls are required to protect the confidentiality of Public Information, some level of control is required to prevent unauthorised modification or destruction of that Information. Public Information is not considered sensitive; therefore, it may be granted to any requestor or published with no restrictions. The integrity of Public Information should be protected and in particular, the growing social media phenomenon casts doubts on the messages contained within. The appropriate Information System Custodian must authorise replication or copying of the Information in order to ensure it remains accurate over time. The impact on the University should Public Information not be available is low.

Restricted Information

Information should be classified as Restricted when the unauthorised disclosure, alteration, or destruction of that Information could cause a significant level of risk to the University or its affiliates. Restricted Information includes Information protected by the State or Commonwealth privacy regulations and Information protected by confidentiality agreements. The highest level of Security Controls should be applied. Access to Restricted Information must be

controlled from creation to destruction, and will be granted only to those persons affiliated with the University who require such access in order to perform their job (e.g. need-to-know). Access to Restricted Information must be individually requested and then authorised in writing by the Information System Custodian. Restricted Information is highly sensitive and may have personal privacy considerations, or may be restricted by law. In addition, the negative impact on the institution should this Information be incorrect, improperly disclosed, or not available when needed, is very high.

University

The term 'University' or 'UniSQ' means the University of Southern Queensland.

University Members

Persons who include: Employees of the University whose conditions of employment are covered by the UniSQ Enterprise Agreement whether full time or fractional, continuing, fixed-term or casual, including senior Employees whose conditions of employment are covered by a written agreement or contract with the University; members of the University Council and University Committees; visiting, honorary and adjunct appointees; volunteers who contribute to University activities or who act on behalf of the University; and individuals who are granted access to University facilities or who are engaged in providing services to the University, such as contractors or consultants, where applicable.

Definitions that relate to this schedule only

System

A combination of Information Assets and ICT Assets supporting a business process.

Users

Users are defined as all University Members, any person enrolled in an award course of study at the University and any person registered to attend short courses, seminars or workshops in any unit of the University as well as all other persons including members or the general public, who have been granted access to, and use of, the University's ICT Resources. A member of the public reading public University web pages from outside the University is not by virtue of that activity alone considered to be a User.

Keywords

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