

Policy: GP0002	Category: General Provisions	Version Date: 09/02/2009
Title: Information Security Program Compliance		Effective Date: 03/31/2005
Originating Unit: Security Program for the Information and Computing Environment Project		Last Review: 06/17/2009
Reviewer: HSC Chief, Information Security		Next Review: 06/17/2012

Purpose:

To establish compliance policy for the Information Security Program

Scope:

This policy applies to all individuals and UF HSC Units that have been granted access to any Information Asset of the UF HSC Information and Computing Environment, including, but not limited to UF HSC faculty and staff, volunteers, students, and third parties.

References:

1. UF HIPAA Privacy Manual: Reporting, Investigating, and Responding to Privacy Violations:
<http://privacy.health.ufl.edu/policies/hipaamanual/operational.shtml/pp-og-03-violats.pdf>
2. Standard GP0003.06: Information Security Violation Levels

Policy:

1. All UF Health Science Center personnel shall comply with the UF HSC Information Security Program.
2. Failure to comply with the Information Security Program shall result in loss of computer and network access and other corrective action per Standard GP0003.06, and/or disciplinary action up to and including termination per University of Florida Rules.
3. The UF HSC Information Security Office, in conjunction with HSC Unit ISAs and ISMs, is authorized to:
 - a. Initiate information security compliance activities in HSC Units including but not limited to intrusion detection, vulnerability scanning, and security assessments
 - b. Temporarily suspend user or computer network access in the event of an unacceptable risk to the institution
 - c. Require a computer forensic examination on an HSC computer in the event of a suspected Restricted data breach.