Purpose:
This policy delineates the responsibility for the UF HSC Information Security Program, the Program review periods, and the retention requirements. Additionally, it establishes a uniform format for the components of the Program.

Scope:
This policy applies to all Units of the UF Health Science Center and affiliated covered entities.

References:
1. Information Security Program Organization Structure.
2. Florida Department of State General Schedule for State Government Agencies GS1-S.
3. Florida Department of State General Records Schedule for Universities and Community Colleges GS5.
4. HIPAA Security Regulations.

Policy:
1. The Assistant VPHA for Information Services/CIO is responsible for the development and maintenance of the UF HSC Information Security Program.
   a. Program Policy and standards shall be reviewed on a staggered schedule every three years, and as necessary as a result of legal, environmental or operational changes.
   b. The Assistant VPHA for Information Services/CIO shall report the status of the Program to the Senior Vice President, Health Affairs annually by July 1st.
2. Each UF HSC Unit is responsible for adapting, supplementing as necessary, and implementing the Information Security Program in their Unit.
   a. Each component of the Unit’s implementation shall undergo an internal review periodically as determined by the Unit, but minimally every three years and as necessary as a result of legal, environmental, operational, or UF HSC Information Security Program changes. Such review must be approved by the Unit’s most senior administrator.
   b. Each Unit may specify and use a format of its choice.
c. The Unit shall report the status of the Unit’s program to the HSC Chief, Information Security, after each review.

3. Information Security Program documentation shall be retained according to the provisions of Florida Department of State General Schedule for State Government Agencies GS1-S, Florida Department of State General Records Schedule for Universities and Community Colleges GS5, and HIPAA Security Regulations.