**Data Breach Notification Policy**

This policy was approved by the Committee of Management on 20th May 2020.

It should be reviewed again no later than 2024.

The policy has been assessed through the organisational impact assessment process.

We can, if requested, produce this document in different formats such as larger print or audio-format. We can also translate the document into various languages, as appropriate.

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| **SCOTTISH**  **HOUSING**  **REGULATOR STANDARDS** | **STANDARD 1:**  The governing body leads and directs the RSL to achieve good outcomes for its tenants and other service users.  **STANDARD 2:**  The RSL is open about and accountable for what it does. It understands and takes account of the needs and priorities of its tenants, service users and stakeholders. Its primary focus is the sustainable achievement of these priorities.  **STANDARD 4:**  The governing body bases its decisions on good quality information and advice and identifies and mitigates risks to the organisation’s purpose.  **STANDARD 5:**  The RSL conducts its affairs with honesty and integrity.  **STANDARD 6:**  The governing body and senior officers have the skills and knowledge they need to be effective. |

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# 1.0 INTRODUCTION

Data Controllers and Data Processors are both subject to a general personal data breach notification regime. This means that Data Processors must report personal data breaches to Data Controllers and Data Controllers must report personal data breaches to their supervisory authority in certain situations (and in some cases, affected data subjects).

Data Controllers are required to maintain a breach register, which needs to be kept up to date and freely accessible for audit (ICO / External Auditors / FOI (if applicable). Each and every breach occurrence MUST be logged within the breach register (example at appendix 1 – attached).

Although all breaches must be recorded within the breach register and notified to our Data Protection Officer (DPO), the duty to notify the Information Commissioner’s Office (ICO) of a breach is only applicable where it is **likely to result in a risk to the rights and freedoms of individuals**. Our DPO will advise if any of our breaches are deemed ‘reportable’ to the ICO.

In the event that a breach is likely to result in a **high risk to the rights and freedoms of individuals**, the data controller shall communicate details of the data breach both to the ICO ***and*** to the data subjects affected without undue delay. This refers to breaches that are likely to have a significant detrimental effect on individuals. Our DPO will advise if any of our breaches are deemed ‘reportable’ to the ICO and to the affected data subjects.

A sound understanding of this Policy by management and all employees is crucial, as non-compliance can lead to an administrative fine up to £8,000,000.00 or in case of an undertaking, up to 2% of the total worldwide annual turnover of the preceding financial year, whichever is higher.

# **2.0 REGULATION & BEST PRACTICE**

This Policy has been developed taking into account: the relevant law and sector best practice. The Regulation considered when drafting this Policy was the General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

# 3.0 REGISTRATION WITH THE ICO

All organisations that control and process data have to register with the Information Commissioner’s Office (ICO). West Granton Housing Co-operative are registered as a Data Controller with the ICO and our registration number is **Z7465766**. Our Governance & Compliance Manager fulfils the role of our Data Protection Officer (DPO)**.**

The ICO website has more information about their role, people’s rights, guidance and assistance - visit [ico.org.uk](https://www.ico.org.uk)

Further reading and updates can be found on the ICO website: <https://ico.org.uk/for-organisations/data-protection-reform/overview-of-the-gdpr/breach-notification/>

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# 4.0 AIMS & OBJECTIVES OF THIS POLICY

This Policy aims to detail our approach to data breach notification. It is important that the relevant governing body and staff know how to deal with data breaches and when to notify the relevant authority. Our DPO is on call to provide advice for all breaches.

# 5.0 WHAT CONSTITUTES A PERSONAL DATA BREACH?

One of the requirements of the GDPR is that, by using appropriate technical and organisational measures, personal data shall be processed in a manner to ensure the appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage.

The following is considered a data breach- this is not an exhaustive list and common sense should be used when assessing any data incident:

* *“Personal data breach”* – a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted, stored or otherwise processed.
* “*Destruction”-*  this is where the data no longer exists, or no longer exists in a form that is of any use to the controller;
* *“Damage*” - this is where personal data has been altered, corrupted, or is no longer complete;
* *“Loss”* of personal data, this should be interpreted as the data may still exist, but the controller has lost control or access to it, or no longer has it in its possession;
* “*Unauthorised or unlawful processing*” - include disclosure of personal data to (or access by) recipients who are not authorised to receive (or access) the data, or any other form of processing which violates the GDPR;
* Any type of data breach should be categorised under one of the following sub-categories when reporting it to the appropriate authorities:
* “*Confidentiality breach” -* where there is an unauthorised or accidental disclosure of, or access to, personal data;
* *“Availability breach”* - where there is an accidental or unauthorised loss of access to, or destruction of, personal data;
* *“Integrity breach”* - where there is an unauthorised or accidental alteration of personal data.

# 6.0 DATA BREACH - DATA PROCESSORS

In case of a breach, staff should notify the Depute CEO, or CEO in their absence and our DPO *w*ithout undue delay after becoming aware of it. In all instances, the CEO should be made aware of any breach reported. There are no listed exemptions from this in the Regulation and all such breaches will be reported.

# 7.0 DATA BREACH - DATA CONTROLLERS

In case of a breach, staff should notify the Depute CEO, or CEO in their absence and our DPO *w*ithout undue delay after becoming aware of it. In all instances, the CEO should be made aware of any breach reported. Following advice from our DPO, In case of a reportable breach, we will:

* Report the breach to the ICO, without undue delay; and, where feasible, do so no later than 72 hours after becoming aware of it;
* Where the breach notification was delayed by the more than 72 hours, an enclosed letter of explanation of grounds of the delay will be attached;

Reporting of the breach will be done through:

<https://ico.org.uk/for-organisations/report-a-breach/> or via post on their current mailing address

If the data breach contained sensitive personal information regarding of the data subject we will disclose this breach to the data subject affected, detailing the following in plain, clear language:

* The name and contact details of the Data Protection Officer or other contact point where more information can be obtained;
* The likely consequences of the personal data breach; *and*
* The measures taken or proposed to be taken by us to address the personal data breach, including, where appropriate, to mitigate its possible adverse effects.

This is subject to the following exemptions:

* The breach is unlikely to result in a high risk for the rights and freedoms of data subjects;
* Appropriate technical and organisational protection were in place at the time of the incident (e.g. encrypted data); *or*
* This would trigger disproportionate efforts (instead, a public information campaign or “*similar measures”* should be relied on so that affected individuals can be effectively informed).
* If any of the above exemptions apply, we will not be required to notify the ICO.

**Any such breach will, however, still be recorded in the breach register.**

Cross border data breach incidents will be reported to the relevant Members States Supervisory Authority. A list containing details of names and addresses of all registered Worldwide Supervisory Authorities can be found on the following page:

<http://ec.europa.eu/justice/data-protection/bodies/authorities/index_en.htm>.

# 8.0 DOCUMENTATION REQUIREMENTS

A breach register will be created and regularly updated by us to document each and every Incident, irrespective of how minor or trivial. This register shall comprise of:

* The facts relating to the personal data breach;
* Effects of the breach;
* the remedial action taken;
* *and* any communications the ICO or the data subjects;

# 9.0 ROLES & RESPONSIBILITIES

***All Staff***

* Reporting any/all security incidents, breaches, or suspected breaches to the Governance & Compliance Manager
* Assisting with any investigation
* Implementing any actions to contain and recover information

***Governance & Compliance Manager / Data Protection Officer***

* Recording all security incidents
* Deciding if incident has resulted in a personal data breach
* Manage investigations and actions to contain and recover information
* Notify the relevant staff, ICO, data subjects
* Identify lessons learned and implement actions to reduce future reoccurrence

***CEO / Board***

* Ensure appropriate resources are allocated to assist in breach investigations, containment and recovery
* Review Breach Register and reports

# 10.0 WHAT TO DO IF YOU WISH TO COMPLAIN ABOUT THIS POLICY

If any party involved wishes to complain about our approach to breach notification they should refer to our Governance & Compliance Manager who is responsible for overseeing this Policy and, as applicable, developing related policies and guidelines.

The post is held by: David Mills, 0131 551 7230 or [david.mills@westgrantonhc.co.uk](mailto:david.mills@westgrantonhc.co.uk)

# 11.0 EQUAL OPPORTUNITES

**Error! Bookmark not defined.**We are committed to ensuring equal opportunities and fair treatment for all people in its work. In implementing this policy, our commitment to equal opportunities and fairness will apply irrespective of factors such as gender or marital status, race, religion, colour, disability, age, sexual orientation, language or social origin, or other personal attributes.

# 12.0 REVIEW CYCLE

This policy will be reviewed by 2024

# APPENDIX 1 – Example of Breach Register