

# **Privacy Breach Report Form**

Reporting Suspected or Confirmed Privacy Breaches

**Consult** *Privacy Breach Notification Procedure* before completing this form. Contact the Freedom of Information and Privacy Coordinator at <u>privacy@brocku.ca</u> 905-688-5550 x5380.

**NOTE**: To fill in this form and save a copy for your records, open the form in Adobe Acrobat Pro X or later. You may open the form in Adobe Reader but you cannot save the form – fill in and print only.

Ensure that the necessary details of the incident and any corrective actions are documented in **Steps 1 to 2** below, to aid in the investigation and corrective action (Step 4) by the Freedom of Information & Privacy Office.

#### **General Information**

Name and title of un head/Dean in charge assessment and investigation:	
Date of incident:	
Location of incident:	
When and how incident was discovered:	
What happened (brief description):	

### Step 1: Contain

Have the records concerned been retrieved or access to them stopped?  $\Box$  Yes  $\Box$  No

Can you confirm that no copies have b	been made or retained by the individual(s) concerned who were not authorized to
receive the information? $\Box$ Yes	

Provide contact information for individual receiving unauthorized information (for any required follow-up action – if more than one individual, attach details in separate sheet)

Name:	Phone:	Email:	

## **Privacy Breach Report Form**

CONFIDENTIAL

a system was breached, date the system was shut down:
omputer access codes or authorizations revoked or hanged on:
lentify and describe any reaknesses in physical or lectronic security:
orrective actions recommended:
tep 2: Assess the Risks
ersonal Information
/hat personal iformation was ivolved? List the ata elements:
ormat of records:
/as information encrypted, anonymized or otherwise not easily accessible?
oes the information concern an individual who is an EU (European Union) resident?   Yes   No
escribe the physical or technical ecurity measures in place at ne time of the breach:
ensitivity of personal information: 🗌 High 👘 🗌 Medium 👘 Low
general, the more sensitive the personal information, the greater the harm to individuals from a privacy breach. ote that these are general examples only; content also determines sensitivity.
igh – e.g. health, name in conjunction with SIN or credit card number
<b>1edium</b> – e.g. opinion material
ow – e.g. name and student ID# only
ause and extent of the breach
ause of breach:
isk of ongoing or further exposure of the information: 🛛 High 🛛 🖓 Medium 🖓 Low
this breach: 🛛 an isolated incident 🔹 the result of a systemic problem

Describe the incident in full:
Number of individuals whose personal information is affected by the breach:
Affected individuals or groups:  Students  employees  external  others,  describe:
Foreseeable harm
Is there foreseeable harm from the breach? $\Box$ Yes $\Box$ No $\Box$ I don't know
Harm to individuals
□ risk to physical security □ financial loss □ identity theft □ damage to reputation/relationships
other, describe:
Harm to Brock University <ul> <li>Ioss of trust in institution</li> <li>I damage to University reputation</li> <li>I financial losses or exposure</li> <li>I legal proceedings</li> </ul>
□ other – describe:
Harm to Public
□ risk to public health □ risk to public safety □ other – describe:
Report completed by (name, unit, position title):
Date:

Send completed Privacy Breach Report Form to the FIPPA Coordinator. If sending by email, save this form with a new name and attach to email. PDF form requires Adobe Acrobat Pro X or later.

**IMPORTANT NOTE**: Limit distribution of the completed Privacy Breach Report Form to only those individuals who need to be informed about the incident as part of their duties and responsibilities.

### Step 3: Notify Affected Individuals (To be completed by FIPPA Coordinator)

Depending on the circumstances, notifications could include some or all of the following - see the Privacy Breach

*Notification Procedure* for details. Notice applicable? □Yes □No If yes:

- Have all affected individuals been notified as to: Description of breach 
  Yes 
  No
- The specifics of the information inappropriately accessed, collected, used or disclosed  $\Box$ Yes  $\Box$ No
- Steps taken so far to address the breach 
  Yes 
  No
- Future steps planned to prevent further privacy breaches  $\Box$ Yes  $\Box$ No
- Additional information, if required, about how individuals can protect themselves 

  Yes 
  No
- Contact information for individual (include position title) within the University to answer questions or provide further information  $\Box$  Yes  $\Box$  No

Date(s) of notification:							
Form of notification:	□letter	□ir	n person	□telephone	□email	□other – describe:	
If all affected individual been notified, please e		t					
<b>GDPR:</b> Did the breach affect the	•						data subjects, records concerned

	If yes, has individual been notified of the categories and appr	oximate number of data subjects, records o	concerned,
	and likely consequences of the breach? □Yes □No	Date(s) of Notification:	
Does a	Student Exchange Agreement require Brock University to noti-	fy the home university? □Yes □No	
	If yes, has the home university been notified? $\Box$ Yes $\Box$ No	Date(s) of Notification:	
	Was notification within the timeframe set out in a Student Ex	(change Agreement? □Yes □No	

### Step 4: Investigate and Correct (To be completed by FIPPA Coordinator)