

THE WHY AND HOW OF DATA SECURITY

YOUR ROLE IN DATA STEWARDSHIP

DEPARTMENT OF MEDICINE IT SERVICES

What is data stewardship?

- Minimizing risk that private information falls into public hands
- Confidential – Protection of data required by law
 - Patient information (PHI) - Protected by HIPAA
 - Student information (FERPA) - Individual Student Records
 - Individual Financial Information - (e.g., credit card, bank) and Personal Information (e.g., social security #, driver's license #) – Protected by Washington state's Personal Information law
 - Personal information (Gotcha!) - (e.g., home address, personal contact information, performance reviews) – Protected by Washington state's public records law
 - Proprietary/research information - Intellectual property or trade secrets – Protected by Washington state's public records law
- Restricted - Data that is not regulated, but for business purposes, is considered protected either by contract or best practice.

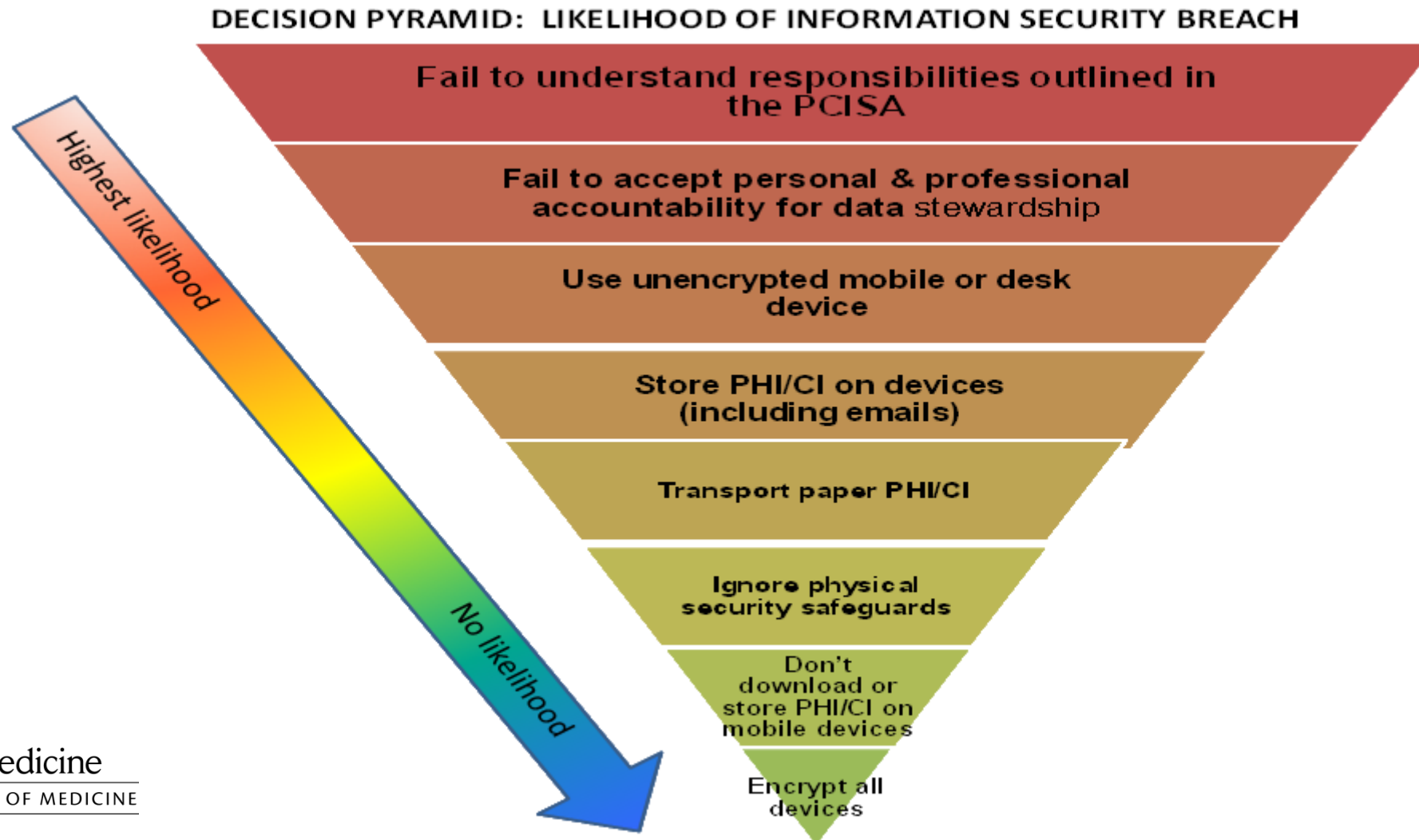
Why worry about it?

- Personal consequences
- Professional obligations
- HIPAA reporting cascade
 - All breaches must be reported to feds OCR (Office for Civil Rights investigation)
 - All individuals affected must be notified; if more than 10 lack addresses, public notice on web
 - If more than 500 affected, media must be informed

What is a Breach?

- Unauthorized acquisition, access, use, or disclosure of sensitive information that compromises the security or privacy of the information.
- The US Department of Health and Human Services (DHHS) identifies two methods of securing PHI:
 - Destruction
 - Encryption
- No breach occurs if a compromised device is encrypted and password protected.
- If a device is compromised and is not encrypted and password protected, the burden of proof is on you to show there was no confidential data stored on it.

Decision Pyramid: Likelihood of Information Security Breach



Responsibilities

- Everyone who is using or viewing confidential or patient information must be personally and professionally accountable for safeguarding that information.
- Users (YOU) are responsible for the safekeeping of data under your care.
- Minimize your responsibility by limiting the data under your care.

Who to Contact if a Breach Occurs?

- Contact Jennifer Dickey and Walt Morrison if a breach occurs.
 - Jennifer Dickey: jennd@medicine.washington.edu; 221-5947
 - Walt Morrison: wmorrison@medicine.washington.edu; 616-4726

Principle: Data thrift

- Don't be responsible for data you don't need
 - Only store sensitive material on mobile devices if it is absolutely necessary.
- Compute in place:
 - Use internal systems (e.g. ORCA/Epic patient lists) to track information
 - Use institutionally owned servers to store data
 - Utilize the Department of Medicine's NetExtender SSL VPN or AMC's Juniper SSL VPN service for remotely accessing UW resources.
 - Use a terminal server or remote desktop access to your workstation
 - Avoid using computers you are not personally responsible for to access UW resources.
- Can you do it with de-identified information?

Principle: Physical security

- Keep paper and physical documents in a safe place
- Keep computers behind locked doors
- Keep mobile devices close at hand
- Lock computers while unattended.
 - ▣ CTRL + ALT + DEL → Enter
 - ▣ Windows Key + L

Principle: Encrypted storage

- Encryption: scrambling data so it's practically irretrievable without the key (passphrase)
- All desktop and most mobile operating systems support encryption; many flash drives also include encryption software
- Encryption is only as strong as its passphrase
- “Cloud” storage is generally unsafe and not approved for use unless specifically approved by UW

Principle: Encrypted transport

- A minimally skilled hacker (or moderately skilled lawyer) can read the email you send outside of UW
- “From” addresses can easily be faked
- Secure web connection prevents “listening in”, helps verify authenticity of both parties
- VPN, Citrix both good options for enterprise use

Principle: Strong Passwords

- Use the full keyboard.
 - ▣ Variety in character types and length makes passwords exponentially stronger.
- Don't use single words or names.
- String multiple random words together to form a long password.
 - ▣ Random sentences are a good example.
- A strong password (required by policy) must:
 - ▣ Be at least 8 characters long.
 - ▣ Mix upper and lower case letters.
 - ▣ Include numbers and symbols.

Smartphone/Tablet Security

- Use a strong password to lock the device.
- Enable encryption.
- Set an automatic lockout timer on the device.
 - No greater than 15 minutes.
- Don't use cloud backup services.
 - iOS devices – Use iTunes encrypted backups (<http://support.apple.com/kb/HT4946>)
 - Android devices – Helium (available in the Play Store)
- Initiate a device wipe after 10 failed password attempts.
 - If the device supports this
- Don't store data on the SIM card (contacts, SMS, etc).

Email Security

- All email containing Restricted or Confidential data must be secured in transport.
 - Encrypted connections must be used between email servers.
- Messages between University email systems (Outpost, UW Exchange, and UW Deskmail) and some recipients are automatically encrypted.
 - This encryption only applies to message data while it moves between servers. It likely will not be encrypted once it reaches its destination mail server.
- Restricted or Confidential information sent over email must be delivered to a secure system.
 - UW Medicine maintains a list of pre-approved email systems on their site:
https://security.uwmedicine.org/guidance/technical/email/approved_list.asp.
- Email in Outlook (and other email clients) is cached on the local machine, as are any attachments you open from email messages.
 - This information can be retrieved offline if the local storage of the device is not encrypted.

Key points

- Delete anything sensitive; better yet don't copy it in the first place
- Keep everything you can in a safe place
- Encrypt anything that moves
- Use multiple, secure passwords
- Be suspicious; trust no email
- Spread the word!

Informational Resources

- Discussion Tool / Checklist for Employees
https://depts.washington.edu/domweb/forms/IT_PCISADiscussionTool.pdf
- Privacy, Confidentiality and Information Security Agreement for all Employees (part of onboarding process/DoM IT inventory of current users)
https://depts.washington.edu/domweb/forms/IT_PCISA.pdf
- UW Medicine Security: <https://security.uwmedicine.org/>
- The Office of the Chief Information Security Officer for the UW provides resources on their site regarding safe computing - <https://ciso.washington.edu/>
 - Risk Advisories and Best Practices - <https://ciso.washington.edu/resources/risk-advisories/>
 - Online Training - <https://ciso.washington.edu/resources/online-training/>
- A copy of this presentation, as well as technical documentation for securing computers and mobile devices, will be emailed to you.

Where to Get Help

- Department of Medicine IT Services
 - 206.616.8805
 - ishelp@medicine.washington.edu

End of Presentation

