Statement of Policy
Washington University in St. Louis (WashU) is committed to conducting business in compliance with all applicable laws, regulations and university policies. WashU has adopted this policy to outline the security measures required to protect electronic information systems and related equipment from unauthorized use.

Objective
This policy and associated guidance establish the roles and responsibilities within the WashU which is critical for effective communication of information security policies and standards. Roles are required within the organization to provide clearly defined responsibilities and an understanding of how the protection of information is to be accomplished. Their purpose is to clarify, coordinate activity and actions necessary to disseminate security policy, standards and implementation.

Applicability
This policy is applicable to all WashU infrastructure, network segments and systems.

Audience
The audience for this policy includes all WashU faculty, staff and students who are involved with the Information Security Program.

Awareness of this policy applies for all other agents of the university with access to WashU information and network for contracted services. This includes, but not limited to partners, affiliates, contractors, temporary employees, trainees, guests, and volunteers. The titles will be referred collectively hereafter as “WashU community”.

Roles & Responsibilities
The following Roles are defined.

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<th>Roles</th>
<th>Responsibilities</th>
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<td>Board of Directors Audit</td>
<td>• Presented annual IT state and risk update</td>
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<td>• Consults with Executive Leadership to understand University IT mission and risks and</td>
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<tr>
<td>Committee</td>
<td>provides guidance to bring them into alignment</td>
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| Executive Leadership    | • Approves Capital Expenditures for Information Security  
                          • Communication Path to Deans and Senior Faculty  
                          • Aligns Information Security Policy and Posture based on the University’s mission and risks |
| CIO                     | • Sponsors the ISO to ensure the information security risk process is followed for university activities, processes and projects  
                          • Coordinates with the CISO to ensure IT puts into practice the Information Security Framework |
| CISO                    | • Communicates information security risks to executive leadership  
                          • Reports information security risks annually to university leadership and gains approval to bring risks to acceptable levels  
                          • Coordinates the development and maintenance of information security policies and standards  
                          • Works with the ISO to establish an information security framework and awareness program  
                          • Serve as liaison to the Board of Directors, Law Enforcement, Internal Audit, and General Council |
| Data Trustees           | • Has oversight responsibility for information related to the university’s mission that is managed, administered or run by the depts. and schools  
                          • Authorizes/Defines policies, standards, and guidelines regarding business definitions of information, access and usage of that information  
                          • Appoints a data custodian(s) for their subject area  
                          • In some cases, responsible for the context, content and associated business rules and use. (Typically delegated to the data steward) |
| Privacy Officer WASHU Med | • Provides oversight and direction for privacy within the healthcare environment to include incident investigations and determination of notification requirements involving protected health information (PHI)  
                              • Work closely with senior administrators and compliance staff to enforce HIPAA privacy program policies within the medical school |
| Area Specific Compliance Offices (ASCO’s) | • Responsible for their specific privacy compliance areas  
                                             • Works with the ISO to ensure any information security requirements are met |
| Information Security Office (ISO) | • Responsible for conducting risk assessments, documenting the identified threats and maintaining risk register  
                                            • Assist WashU Departments and Schools in assessing their data for classification as defined in the Information Classification Policy and advises them of required controls  
                                            • Develop policy, standards, process and solutions to mitigate identified risk to an |
<table>
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<th>Role</th>
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| Internal Audit      | - Conduct sample audits to ensure compliance to information security policies and risk mitigation efforts  
                        - Interfaces with external auditors to provide independent audit of IT infrastructure and practices |
| Data Custodians     | - Implement and enforces University policies, standards, and guidelines for institutional information within their designated data sets  
                        - Accountable for the security, privacy, data definitions, data quality and compliance to data management policies and standards for a specific data domain  
                        - Has the primary responsibility for the accuracy, privacy, and security of a designated data set  
                        - Ensures Access to the data is authorized and controlled; Technical processes sustain data integrity and technical controls safeguard data  
                        - Works with the System Custodian to ensures that information which has been classified as confidential or protected adheres to University Information Security controls |
| Security Incident Manager | - Under the direction of the ISO, manage and coordinate incident response, communication, and notification  
                                - Serves as a lead in the investigation of security incidents  
                                - Coordinates and maintains incident documentation and documentation retention activities. |
| Dept. IT Liaisons   | - Serve as a point of technical contact for the university information security committees and as an official for the organizational area(s) for which they are responsible in matters related to information security  
                                - Communicate with and educate workforce members in IT regarding the confidentiality, integrity, and availability of institutional information, information systems, and relevant University information security policies, standards, and guidelines for their organizational area(s) for which they are responsible  
                                - Facilitate requests for access to information systems upon request by the data custodians, system owners, and managers, by obtaining proper approval and determining appropriate access needs for staff  
                                - Facilitate resolution of information security and privacy issues for the organizational area(s) for which they are responsible  
                                - Serve as focal point and coordinator during a security incident |
| **Dept. Privacy Liaisons** | • Act as the department or school's central contact regarding information security  
• Attend and participate in periodic privacy meetings, seminars and retreats  
• Propagate new information, policies and procedures to the appropriate school or departmental heads, division leaders, staff, Business Manager, etc.  
• Work with IT liaisons to Manage and track a detailed inventory of the department’s protected information  
• Provide input and feedback to the Information Security Office regarding policy making, procedures, exceptions and other department or school's issues pertaining to Information Security  
• Manage the implementation of compliancy rules and safeguards according to the policies and procedures  
• Coordinate Information Security training effort within the department or school  
• Serve as focal point and coordinator during a security incident |
| **System Owners** | • Manage the confidentiality, integrity, and availability of the information systems for which they are responsible. This shall include developing and implementing a process for managing access to information systems for which they are responsible, and other processes or controls in compliance with University policies on information security and privacy  
• Advise executive leadership on the financial resources necessary to develop and implement information systems and controls, including those specifically required by grants or contracts  
• Maintain critical information system documentation; and ensures and applies security controls per policies and standards  
• Formally appoint and delegate responsibility to system custodians |
| **System Custodians** | • Making and being accountable for operational decisions about the use and management of an information system  
• Responsibilities as delegated by system owners and data custodians for implementation of controls.  
• System Custodians may be the same as the owners |
| **WashU Faculty, Staff and Students** | • Acting at all times in a manner which does not place at risk the health and safety of themselves, other person in the workplace, and the information and resources they have use of  
• Helping to identify areas where risk management practices should be adopted  
• Taking all practical steps to minimize the University’s exposure to contractual and regulatory liability |
Policy
The Roles and Responsibilities established above shall be established within WashU to ensure efficient dissemination of university Information Security policies and the protection of information.
Policy Compliance
The ISO will measure the compliance to this policy through various methods, including, but not limited to - reports, internal/external audits, and feedback to the policy owner. Exceptions to the policy must be approved by the ISO in advance. Non-compliance will be addressed with management, Area Specific Compliance Office, Human Resources or the Office of Student Conduct.

Related Policies
None

Reference
None

Policy Review
This policy will be reviewed at a minimum every three years.

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Version Number: 1.0
Reference Number: PL-01.03
Creation Date: February 6, 2019
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Policy Owner: Information Security Office