# **General Welfare Requirement: Documentation**

Providers must maintain records, policies and procedures required for the safe and efficient management of the settings and to meet the needs of the children.

# Record keeping

### 5.6 Data Breaches

### Statement of Intent

This policy has been written to take into account of the General Data Protection Regulation (May 2018) (GDPR), Data Protection Act 2018 (DPA), together with advice from the Information Commissioner's Office (ICO), and should be read in conjunction with Policy 5.4 'Data Protection' and Policy 5.5 'Data Subject Access Requests'.

There is a heightened duty of care place on early years providers to protect the data of the children who attend their setting. In response to this, St Joseph's Pre-school pays an annual subscription to the Information Commissioner's Office (ICO) to be listed on their Data Protection Register<sup>1</sup>. The Pre-school's reference number in this respect is ZB019647.

#### Aim

The aim of this policy is to reassure parents of how we will deal with a reported breach.

As an organisation should we experience a personal data breach under the GDPR or the DPA we will report such incidents to the ICO based on the following:

- Does the breach pose a risk to people?
- We will consider the likelihood and severity of the risk to the people's right and freedoms, following the breach.
- If, after assessment, it is likely there will be a risk we will <u>notify</u> the ICO; if it is unlikely then we do not have to report.
- We will ensure that we record all breaches, regardless of whether or not they need to be reported to the ICO. Any that we do not report to the ICO we will make sure that we have a written record of the justification for this decision.

#### Definition of a "personal data breach"

A personal data breach can be broadly defined as a security incident that has affected the confidentiality, integrity or availability of personal data. In short, there will be a personal data breach whenever any personal data is accidentally lost, destroyed, corrupted or disclosed; if someone accesses the data or passes it on without proper authorisation; or if the data is made unavailable and this unavailability has a significant negative effect on individuals.

Personal data breaches can include:

- access by an unauthorised third party;
- deliberate or accidental action (or inaction) by a controller or processor;
- sending personal data to an incorrect recipient;
- computing devices containing personal data being lost or stolen;
- alteration of personal data without permission;

<sup>&</sup>lt;sup>1</sup> A public list maintained by the ICO. This official record shows which UK organisations (including charities) process personal data and that data protection is taken seriously.

loss of availability of personal data.

At the beginning of (and during) the investigation we will record:

- what happened and why;
- how many people were involved;
- a timeline when it happened; and
- what actions have been taken so far.

If we can recover the data we shall do so immediately. For example, if it has been sent to someone by mistake (eg. via email), we will ask them to delete it, or if in paper format to send it back to us securely (eg. Special Delivery), or we will arrange for a member of Pre-school to collect it.

We will review our working practices and put into place any measures to prevent such a breach/potential breach occurring again.

# Failure to notify the ICO of a notifiable breach

Failing to notify a breach when required to do so can result in a <u>penalties</u>. The fine can be combined with the ICO's other corrective powers under Article 58.

# Responsibilities of Employees, Committee Members and Volunteers

All employees, committee members and volunteers will:

- take steps to ensure the security of personal data at all times;
- know how to recognise a personal data breach;
- IMMEDIATELY report any breach of which they become aware to the Data Protection Officer (DPO)<sup>2</sup>. Prompt action is essential, because reports to the Information Commissioner's Office (ICO) must take place within 72 hours of the breach being discovered<sup>3</sup>:
- if the breach is likely to result in a high risk of adversely affecting individuals' rights and freedoms, then we will also inform the individuals without undue delay;
- record the nature of the breach and the action they have taken on a Data Breach Form (attached to this procedure).

### Responsibilities of the DPO

Dealing with a personal data breach must be treated as an urgent priority and given adequate resources.

#### 1. Assessment

- Assess the severity and likelihood of the potential adverse risks of the breach see Appendix 1 'Level of Risk'. This assessment will include:
  - o nature of data involved;
  - sensitivity of data;
  - security mechanisms in place, eg. password protection;
  - o information which could be conveyed to a third party about the individual:

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<sup>&</sup>lt;sup>2</sup> St Joseph's Pre-school's DPO is the Committee Chairperson

<sup>&</sup>lt;sup>3</sup> NOT when it occurred.

- o number of individuals affected by the breach.
- the risk of harm to those affected (eg. safeguarding issues)\*;

## 2. External reporting

- Based on the assessment, decide whether the breach requires external reporting to:
  - the ICO\*\*. If it needs reporting, this must be done within 72 hours of the initial discovery of the breach even if full details are not yet known. Reasons must be given for any delay. Failure to notify the ICO when required to do so can result in a significant fine;
  - o the individual/s concerned: this must be done directly and without undue delay;
  - o data processors for which the setting is a data controller;
  - o A description of the nature of the personal data breach; including:
  - o data controllers for which the setting is a data processor;
- Reports to the ICO must include:
  - o a description of the nature of the personal data breach; including:
    - the categories and approximate number of individuals concerned;
    - the categories and approximate number of personal data records.
  - the name and contact details of the setting's DPO;
  - o a description of the likely consequences of the personal data breach;
  - a description of the measures taken or proposed to be taken to deal with the breach, including measures to mitigate any possible adverse effects.
- Reports to individuals must be in clear and plain language and must include:
  - the name and contact details of the setting's DPO;
  - o a description of the likely consequences of the personal data breach;
  - o a description of the measures taken or proposed to be taken to deal with the breach, including measures to mitigate any possible adverse effects.
- Reports to data processors and data controllers must be according to their contracts.

## 3. Containment and Action

Decide what action needs to be taken to contain the breach and by whom.

- Decide what action can be taken to recoup losses and/or limit damage caused by the breach.
- Inform all relevant individuals of the action they need to take.

<sup>\*</sup> If we do not think there is a high risk to those affected of their rights and freedoms, then the ICO advises that we do not have to let them know about the incident. Nevertheless we will document the breach and record the justification of the decision not to report<sup>4</sup>. If we do think there is a high risk, then by law we will tell the ICO without undue delay.

<sup>\*\*</sup> If the breach is reportable, we will do this via the <u>ICO website</u>, following their guidance. However, if we are unsure if the breach is reportable we will use the ICO <u>self-assessment tool</u> to help us decide. As a last resort we will the ICO on 0303 123 1113<sup>5</sup> but note that this number is primarily for data protection registration or fees.

<sup>&</sup>lt;sup>4</sup> Article 33(5) requires you to document the facts regarding the breach, its effects and the remedial action taken.

<sup>&</sup>lt;sup>5</sup> Open Monday to Friday 9am to 5pm (excluding Bank Holidays)

- 4. Internal Investigation and Review
  - Carry out an internal investigation into how the data breach occurred.
  - Determine whether the breach was a result of human error or a systemic issue.
  - Identify ways of preventing a recurrence, eg. through better processes or training.
  - Review and update processes as appropriate.
  - Review and update training and information for Employees, Volunteers and Committee Members as appropriate.
- 5. Recording and Internal Reporting
  - Record full details of the breach, its effects and all decisions and action taken on a Data Breach Form (attached to this procedure).
  - Provide a written report on the breach to the Committee.
- 6. Responsibilities of Committee Members (for Charitable Settings)
  - Individual Committee Members have the same responsibilities as employees and volunteers, as stated above.
  - The Committee Members are responsible for advising the DPO, for receiving and making reports on data breaches, and for reviewing the setting's responses to data breaches.

## Level of risk<sup>6</sup>

Low

Low risk breaches may lead to possible inconvenience to those who need the data to do their job, such as the loss of, or inappropriate alteration of a telephone list. These should be dealt with internally but not reported to the ICO.

High

These are risks which may have adverse effects on individuals such as emotional distress and physical or material damage. They may include:

- loss of control over personal data;
- discrimination;
- identity theft or fraud;
- financial loss;
- damage to reputation; and
- significant economic or social disadvantage.

These must be reported to the ICO

#### Further information

Information Commissioner's Office (<u>www.ico.org.uk</u>)

## **Associated Policies and Procedures**

- 1.2 Safeguarding Children and Child Protection
- 5.4 Data Protection
- 5.5 Data Subject Access Requests

<sup>6</sup> These are examples taken from the ICO website. It is likely that guidance will become clearer over time.

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| Version<br>Number | Author              | Purpose of change  | Date   |
|-------------------|---------------------|--|--|
| 1.0               | K Coupe             | Comply with GDPR   | 19 September<br>2018                                   |
| 2.0               | K Coupe             | Review of policy; inclusion of hyperlinks;<br>more information on how a personal data<br>breach will be dealt with   | 29 April 2021<br>Committee via<br>email (quorate)      |
| 3.0               | K Coupe &<br>L Finn | Reviewed and updated: • further clarification about breaches • Inclusion of "Associate Policies & Procedures" section as per Safeguarding Audit 2022 section 175/157 | 14 February<br>2023<br>Committee<br>Member<br>(L Finn) |
| 4.0               | K Coupe             | Reviewed and update:   | 18 June 2025<br>Committee<br>Member<br>(L Finn-Powers) |

# **Data Breach Recording Form**

| Date and time breach occurred | Date and time breach discovered | Breach reported by | Description of breach | Details of IT systems/software involved | Other Information |
|-------------------------------|---------------------------------|--------------------|-----------------------|---|-------------------|
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |
|                               |                                 |                    |                       |   |                   |

| Form completed by: | Date: |
|--------------------|-------|
|                    |       |
| Signature:         |       |

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Providers must maintain records, policies and procedures required for the safe and efficient management of the settings and to meet the needs of the children.

# **Data Risk Assessment Form**

| Number of Security mechanisms in place (eg. passwords, encryption etc). |  |
|---|--|

| Nature of risk                     | Nature of risk     |  |
|------------------------------------|--------------------|--|
| X                                  | X                  |  |
| Inconvenience                      | Financial loss     |  |
| Loss of control over personal data | Personal security  |  |
| Discrimination                     | Emotional distress |  |
| Identity theft or fraud            | Other              |  |

| Overall Severity of risk | Overall likelihood of risk |
|--------------------------|----------------------------|
|                          | Low                        |
| Negligible               | Medium                     |
|                          | High                       |
|                          | Low                        |
| Low                      | Medium                     |
|                          | High                       |
|                          | Low                        |
| Medium                   | Medium                     |
|                          | High                       |
|                          | Low                        |
| High                     | Medium                     |
|                          | High                       |

| Reporting Requirement |        |              |        |
|-----------------------|--------|--------------|--------|
| ICO                   | Yes/No | Individual   | Yes/No |
| Processor/s           | Yes/No | Controller/s | Yes/No |

| Form completed by: | Date: |
|--------------------|-------|
| Signature:         |       |

# **Data Breach Review Form**

| Nature of Data Breach  |  |
|------------------------|--|
|                        |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
| Date of Data Breach    |  |
| Date of Data Breach    |  |
|                        |  |
| Recommended actions to |  |
| reduce risk of future  |  |
| breaches and minimise  |  |
| their impact           |  |
| •                      |  |
|                        |  |
| Recommended changes    |  |
| to existing processes  |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
| Recommended changes    |  |
| to security controls   |  |
|                        |  |
|                        |  |
|                        |  |
| New training needs     |  |
| now training noods     |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
| Financial implications |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
|                        |  |
| Other notes            |  |
| Other notes            |  |
|                        |  |
|                        |  |
|                        |  |