

# COMMONWEALTH OF VIRGINIA



## Information Technology Resource Management Information Technology Security Policy

Virginia Information Technologies Agency (VITA)

## ITRM PUBLICATION VERSION CONTROL

ITRM Publication Version Control: It is the User's responsibility to ensure they have the latest version of this ITRM publication. Questions should be directed to VITA's Director for Policy Practice and Architecture (PPA) within the Information Technology Investment and Enterprise Solutions (ITIES) Directorate. PPA will issue a Change Notice Alert and post on the VITA Web site, provide an email announcement to the Agency Information Technology Resources (AITRs) and Information Security Officers (ISOs) at all state agencies and institutions of higher education as well as other parties PPA considers to be interested in the change.

This chart contains a history of this ITRM publication's revisions.

Version	Date	Purpose of Revision
Original	1990	Base Document: COV ITRM Policy 90.1 Information Technology Security Policy
Revision 1	12/07/2001	Revision to align with current information security best practices.
Revision 2	07/01/2006	Re-designation of COV ITRM 90.1 to COV ITRM SEC500-02 and complete revision of the policy.
Revision 3	07/01/2007	Revision to align with changes to the <i>Code of Virginia</i> . A "legal black line" highlights all changes in this document.
Revision 4	10/30/2007	Revision to incorporate ITIB's directive (dated October 18, 2007) to change compliance date from July, 2008 to November 1, 2007 for section 3.1.8.
Revision 5	07/17/2008	Revision to remove language in the scope section that excluded "Academic Instruction and Research" systems and added language to recognize several legislative mandates relating to data security and privacy in the "Statement of Policy" section. The document was also revised to clarify the Commonwealth's IT Security Program and reference that the components of that program are implemented by requirements contained in related IT security standards. All changes are identified in "Blue" along with a "legal black line" to the right of these changes.

## Review Process

### Technology Strategy and Solutions Directorate Review

N. Jerry Simonoff, VITA Director of Information Technology Investment and Enterprise Solutions (ITIES), and Chuck Tyger, Director for Policy, Practices, and Architecture Division, provided the initial review of the report.

### Agency Online Review

The report was posted on VITA's Online Review and Comment Application (ORCA) for 30 days. All agencies, stakeholders, and the public were encouraged to provide their comments through ORCA. All comments were carefully evaluated and individuals that provided comments were notified of the action taken.

## PREFACE

**Publication Designation**

ITRM Policy SEC500-02

**Subject**

Information Technology Security Policy

**Effective Date**

July 17, 2008

**Compliance Date**

January 1, 2009 – for new and revised requirements except for academic and research systems previously exempted, the compliance date shall be July 1, 2009.

**Supersedes**

COV ITRM Policy 901 Information Technology Security Policy, dated December 7, 2001

**Scheduled Review**

One (1) year from effective date

**Authority**

Code of Virginia, § 2.2-603(F)  
(Authority of Agency Directors)

*Code of Virginia*, §§ 2.2-2005 – 2.2-2032.  
(Creation of the Virginia Information Technologies Agency; “VITA”; Appointment of Chief Information Officer [CIO])

Code of Virginia, §2.2-2827  
(Restrictions on state employee access to information infrastructure)

Code of Virginia, §2.2-2457  
(Information Technology Investment Board)

Code of Virginia, §2.2-3800  
(Government Data Collection and Dissemination Practices Act)

**Scope**

This policy is applicable to the Commonwealth’s executive, legislative, and judicial branches, and independent agencies

and institutions of higher education (collectively referred to as “Agency”). This policy is offered only as guidance to local government entities.

**Purpose**

To protect the Commonwealth information technology assets and the information processed by defining the minimum information technology security program for agencies of the Commonwealth of Virginia (COV).

**General Responsibilities**

*(Italics indicate quote from the Code of Virginia requirements)*

**Chief Information Officer of the Commonwealth**

In accordance with *Code of Virginia*, § 2.2-2009, the Chief Information Officer (CIO) is assigned the following duties: *“the CIO shall direct the development of policies, procedures and standards for assessing security risks, determining the appropriate security measures and performing security audits of government—electronic information. Such policies, procedures, and standards will apply to the Commonwealth’s executive, legislative, and judicial branches, and independent agencies and institutions of higher education. The CIO shall work with representatives of the Chief Justice of the Supreme Court and Joint Rules Committee of the General Assembly to identify their needs.”*

**Chief Information Security Officer**

The Chief Information Officer (CIO) has designated the Chief Information Security Officer (CISO) to develop Information Security policies, procedures and standards to protect the confidentiality, integrity, and availability of the Commonwealth’s information assets.

**Council on Technology Services**

In accordance with the *Code of Virginia* § 2.2-2009, the Council on Technology Services is assigned the following duties: *“In developing and updating such policies, procedures and standards, the CIO shall consider, at a minimum, the advice and recommendations of the Council on Technology Services.”*

**Information Technology Investment and Enterprise Solutions Directorate**

In accordance with the *Code of Virginia* § 2.2-2010, the CIO has assigned the Information Technology Investment and Enterprise Solutions Directorate the following duties: *Develop and adopt policies, standards, and guidelines for managing information technology by state agencies and institutions.*”

**Regulatory References**

1. Health Insurance Portability and Accountability Act.
2. Privacy Act of 1974.
3. Children's Online Privacy Protection Act.
4. Family Educational Rights and Privacy Act.
5. Executive Order of Critical Infrastructure Protection.
6. Federal Child Pornography Statute: 18 U.S.C. & 2252
7. Bank Secrecy Act.
8. Virginia Computer Crime Act, *Code of Virginia*, §18.2-152.3, .4, .5, and .6.

9. Library of Virginia Records Management Program, *Code of Virginia*, Title 42.1, Chapter 7, sec 42.1-85.
- 10.
11. Federal Information Security Management Act (FISMA).
12. Office of Management and Budget (OMB) Circular A-130.

**International Standards**

1. International Standard, Information Technology – code of practice for information security management, BS ISO/IEC 17799:2005.

**Definitions**

| See [Glossary](#)

**Related ITRM Standard**

ITRM Standard SEC501-01: Information  
Technology Security Standard

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## 1. INFORMATION TECHNOLOGY (IT) SECURITY POLICY STATEMENT

### 1.1 Background

The Commonwealth of Virginia (COV) relies heavily on the application of information technology (IT) for the effective delivery of government services. Rapid and continuing technical advances have increased the dependence of COV agencies on IT. COV data, software, hardware, and telecommunications are recognized by Agencies as important resources and must be protected through agency IT security programs.

Agency IT security programs shall be built on the concept of public trust. An agency IT security program provides sustainability consistent approach to IT security that can be replicated across networks, applications, and transactions. The COV IT Security Program provides the generally acceptable principles and practices for Agencies to use in securing their IT systems and data.

### 1.2 Guiding Principles

The following principles guide the development and implementation of the COV IT Security Program.

- a. COV Data is:
  1. A critical asset that shall be protected;
  2. Restricted to authorized personnel for official use.
- b. IT security must be:
  1. A cornerstone of maintaining public trust;
  2. Managed to address both business and technology requirements;
  3. Risk-based and cost-effective;
  4. Aligned with COV priorities, industry-prudent practices, and government requirements;
  5. Directed by policy but implemented by business owners;
  6. The responsibility of all users of COV IT systems and data.

### 1.3 Statement of Policy

It remains the policy of the COV that each Agency Head is responsible for the security of the agency's data and for taking appropriate steps to secure agency IT systems and data through the development of an agency IT security program.

This policy and related standards provide the security [framework that each state agency shall use to establish and maintain their](#) IT security program. Agency Heads may establish additional, more restrictive IT security policy and program but must, at a minimum, implement a policy and related standard that extend and/or improve upon this policy and related standard. If, in the judgment of the Agency Head, the agency cannot meet one or more of the requirements contained in the related standard, [the agency shall submit](#) a request for an exception to the Chief Information Security Officer of the Commonwealth (CISO) [by following the exception request procedures defined in Appendix of this document.](#)

In addition, agencies that have access to or handle data that is subject to legislations, regulations and/or industry standards such as the Health Insurance Portability and Accountability Act of 1996 (HIPAA); Internal Revenue Service (IRS) 1075; the Privacy Act of 1974; [the Payment Card Industry \(PCI\) standard](#); the Rehabilitation Act of 1973, § 508; the Federal National Security Standards, etc., shall include the respective requirements within the agency's IT security program.

The function of this policy is to [establish the framework for an IT Security Program](#) to protect COV IT systems and data from credible threats, whether internal or external, deliberate or accidental. It is the policy of COV to use all reasonable IT security control measures to:

- a. Protect COV data against unauthorized access and use;
- b. Maintain the integrity of COV data;
- c. Ensure COV data residing on any IT system is available when needed;
- d. Comply with the appropriate federal, state and other legislative, regulatory and industry requirements.

The remainder of this policy is divided into sections that define the framework that will be used to develop agency IT security programs.

- a. Section 2 addresses key roles and responsibilities of managers to provide IT security measures and controls to protect the COV IT systems and data.
- b. Section 3 addresses the COV IT Security Program and outlines the IT security subprograms.
- c. Section 4 addresses IT security compliance and proper administration of the COV IT Security Program with program management oversight.
- d. Section 5 addresses IT security audits to test for adequacy of controls and assess the level of compliance with established policies, standards, or procedures.
- e. Section 6 defines COV policy for the confiscation and removal of IT resources.
- f. Section 7 describes the process for requesting an exception to the requirements of this policy and the related standards.
- g. Section 8 contains a glossary of IT security definitions.

- h. Section 9 contains a list and description of IT security acronyms and the terms to which they refer.

## 2. KEY IT SECURITY ROLES AND RESPONSIBILITIES

This Section defines the key IT security roles and responsibilities included in the Commonwealth's IT Security Program. These roles and responsibilities are assigned to individuals, and may differ from the COV role title or working title of the individual's position. Individuals may be assigned multiple roles, as long as the multiple role assignments provide adequate separation of duties, provide adequate protection against the possibility of fraud, and do not lead to a conflict of interests. While this section defines the roles and responsibilities, specific requirements related to these roles and responsibilities are established by the IT security standards included in the Commonwealth's IT Security Program.

### 2.1 Chief Information Officer of the Commonwealth (CIO)

The *Code of Virginia* §2-2.2009 states that *"the CIO shall direct the development of policies, procedures and standards for assessing security risks, determining the appropriate security measures and performing security audits of government electronic information."*

### 2.2 Chief Information Security Officer (CISO)

The CISO is responsible for development and coordination of the COV IT Security Program and, as such, performs the following duties:

- a. Administers the COV IT Security Program and periodically assesses whether the program is implemented in accordance with COV IT Security Policies and Standards.
- b. Reviews requested exceptions to COV IT Security Policies, Standards and Procedures.
- c. Provides solutions, guidance, and expertise in IT security.
- d. Maintains awareness of the security status of sensitive IT systems.
- e. Facilitates effective implementation of COV IT Security Program, by:
  - i. Preparing, disseminating, and maintaining IT security, policies, standards, guidelines and procedures as appropriate;
  - ii. Collecting data relative to the state of IT security in the COV and communicating as needed;
  - iii. Providing consultation on balancing an effective IT security program with business needs.
- f. Provides networking and liaison opportunities to Information Security Officers (ISOs).

### 2.3 Agency Head

Each Agency Head is responsible for the security of the agency's IT systems and data. The Agency

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Head's IT security responsibilities include the following:

- a. Designate an ISO for the agency and providing the person's name, title and contact information to VITA no less than biennially. The Agency Head is strongly encouraged to designate at least one backup for the ISO, as well. [Agencies with multi-geographic locations or specialized business units should consider designating deputy ISOs as needed.](#)
- b. Determine the optimal place of the IT security function within the agency hierarchy with the shortest practicable reporting line to the Agency Head.
- c. Maintain an agency IT security program that is sufficient to protect the agency's IT systems, and that is documented and effectively communicated.
- d. Review and approve the agency's Business Impact Analyses (BIAs), a Risk Assessment (RA), and a Continuity of Operations Plan (COOP), to include an IT Disaster Recovery Plan, if applicable.
- e. [Review the IT System Security Plan for each sensitive agency IT system, and disapprove those that do not provide adequate mitigation of risks to which the IT system is subject.](#)
- f. Maintain compliance with [the current version of the IT Security Audit Standard](#) (COV ITRM Standard SEC502). This compliance must include, but is not limited to:
  - Requiring development and implementation of an agency plan for IT security audits, and submitting this plan to the CISO;
  - Requiring that the planned IT security audits are conducted;
  - Receiving reports of the results of IT security audits;
  - Requiring development of Corrective Action Plans to address findings of IT security audits; and
  - Reporting to the CISO all IT security audit findings and progress in implementing corrective actions in response to IT security audit findings.
- g. Facilitate the communication process between data processing staff and those in other areas of the agency.
- h. Establish a program of IT security safeguards.
- i. Establish an IT security awareness and training program.
- j. Provide the resources to enable employees to carry out their responsibilities for securing IT systems and data.

Managers in all agencies and at all levels shall provide for the IT security needs under their jurisdiction. They shall take all reasonable actions to provide adequate IT security and to escalate problems, requirements, and matters related to IT security to the highest level necessary for resolution.

#### **2.4 Information Security Officer (ISO)**

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The ISO is responsible for developing and managing the agency's IT security program. The ISO's duties are as follows:

- a. Develop and manage an agency IT security program that meets or exceeds the requirements of COV IT security policies and standards in a manner commensurate with risk.
- b. Verify and validate that all agency IT systems and data are classified for sensitivity.
- c. Develop and maintain an IT security awareness and training program for agency staff, including contractors and IT service providers.
- d. Coordinate and provide IT security information to the CISO as required.
- e. Implement and maintain the appropriate balance of protective, detective and corrective controls for agency IT systems commensurate with data sensitivity, risk and systems criticality.
- f. Mitigate and report all IT security incidents in accordance with §2.2-603 of the *Code of Virginia* and VITA requirements and take appropriate actions to prevent recurrence.
- g. Maintain liaison with the CISO.

## 2.5 Privacy Officer

An agency must have a Privacy Officer if required by law or regulation, such as the Health Insurance Portability and Accountability Act (HIPAA), and may choose to have one where not required. Otherwise these responsibilities are carried out by the ISO. The Privacy Officer provides guidance on:

- a. The requirements of state and federal Privacy laws.
- b. Disclosure of and access to sensitive data.
- c. Security and protection requirements in conjunction with IT systems when there is some overlap among sensitivity, disclosure, privacy, and security issues.

## 2.6 System Owner

The System Owner is the agency manager responsible for operation and maintenance of an agency IT system. With respect to IT security, the System Owner's responsibilities include the following:

- a. Require that all IT system users complete required IT security awareness and training activities prior to, or as soon as practicable after, receiving access to the system, and no less than annually, thereafter.
- b. Manage system risk and developing any additional IT security policies and procedures required to protect the system in a manner commensurate with risk.
- c. Maintain compliance with COV IT security policies and standards in all IT system activities.

- d. Maintain compliance with requirements specified by Data Owners for the handling of data processed by the system.
- e. Designate a System Administrator for the system.

**Note:** Where more than one agency may own the IT system, and the agency or agencies cannot reach consensus on which should serve as System Owner, upon request, the CIO of the Commonwealth will determine the System Owner.

## **2.7 Data Owner**

The Data Owner is the agency manager responsible for the policy and practice decisions regarding data, and is responsible for the following:

- a. Evaluate and classify sensitivity of the data.
- b. Define protection requirements for the data based on the sensitivity of the data, any legal or regulatory requirements, and business needs.
- c. Communicate data protection requirements to the System Owner.
- d. Define requirements for access to the data.

## **2.8 System Administrator**

The System Administrator is an analyst, engineer, or consultant who implements, manages, and/or operates a system or systems at the direction of the System Owner, Data Owner, and/or Data Custodian. The System Administrator assists agency management in the day-to-day administration of agency IT systems, and implements security controls and other requirements of the agency IT security program on IT systems for which the System Administrator have been assigned responsibility.

## **2.9 Data Custodian**

Data Custodians are individuals or organizations in physical or logical possession of data for Data Owners. Data Custodians are responsible for the following:

- a. Protect the data in their possession from unauthorized access, alteration, destruction, or usage.
- b. Establish, monitoring, and operating IT systems in a manner consistent with COV IT security policies and standards.
- c. Provide Data Owners with reports, when necessary and applicable.

## **2.10 IT System Users**

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All users of COV IT systems including employees and contractors are responsible for the following:

- a. Read and comply with agency IT security program requirements.
- b. Report breaches of IT security, actual or suspected, to their agency management and/or the CISO.
- c. Take reasonable and prudent steps to protect the security of IT systems and data to which they have access.

### 3. IT SECURITY PROGRAM

This section defines the components of the Commonwealth's IT Security Program framework. The CISO is charged with developing and administering the COV IT Security Program. The agency ISO is charged with developing and administering the agency IT security program in a manner that meets agency business needs, protects IT systems and data in a manner commensurate with data sensitivity and risk, and, at a minimum, meets the requirements of COV policies and standards. Specific requirements related to implementing the various components of the Commonwealth's IT Security Program are defined in the current version of the *IT Security Standard (COV ITRM Standard SEC501)*.

#### 3.1 IT Security Program Components

The policy of the COV is to secure its IT systems using methods based on the sensitivity of the data processed and the risks to which the systems and data are subject, including the dependence of critical agency business processes on the data and systems.

Figure 1 illustrates the process by which the COV IT Security Program components interact to enable COV agencies to accomplish their missions in a safe and secure technology environment.

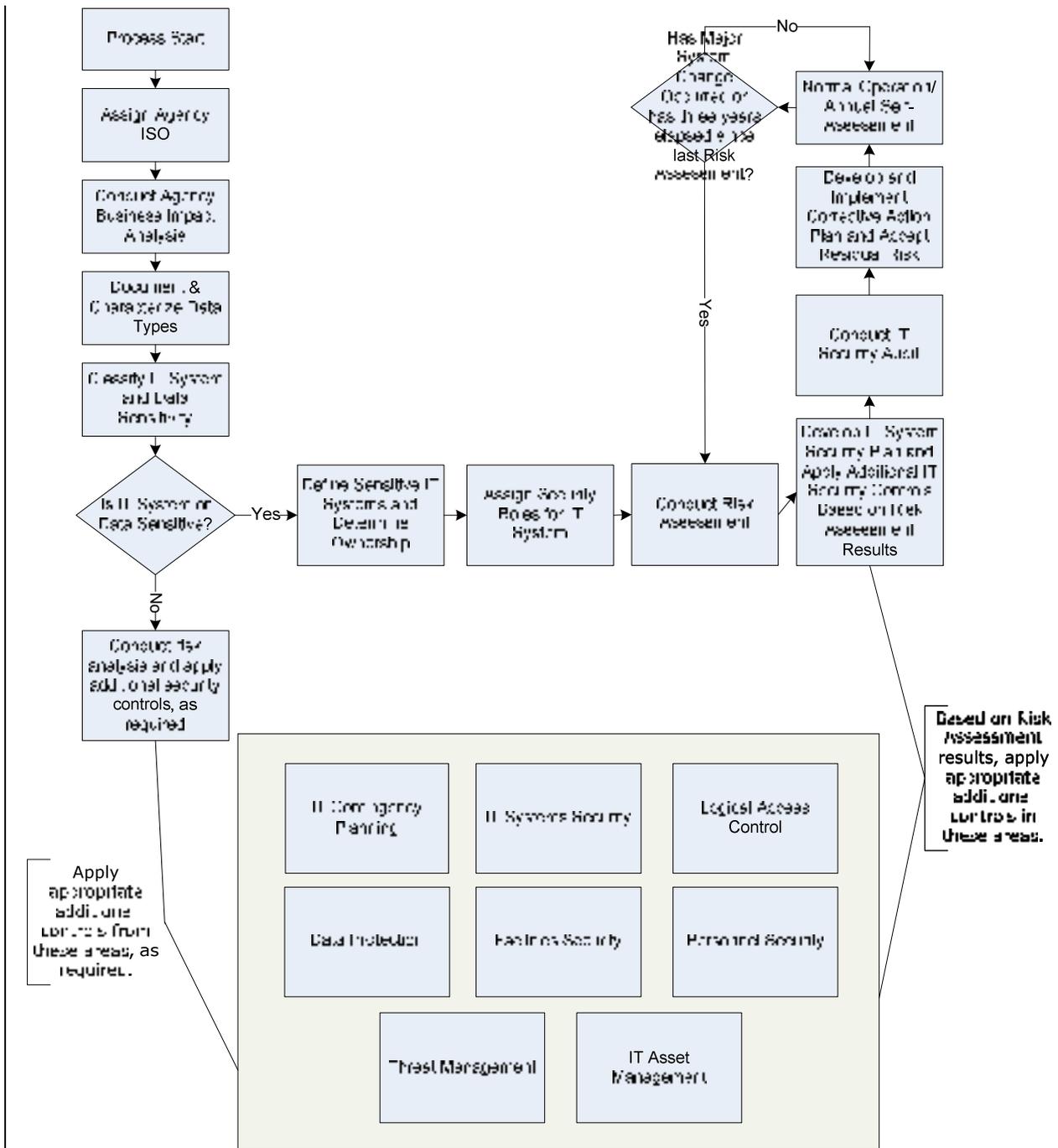


Figure 1 - Commonwealth of Virginia IT Security Framework

The components of this framework provide the basis for designing the agency’s IT security program and safeguards. They do not represent organizational functions within the IT security program, but rather the functional components of the IT security program.

### 3.1.1 Risk Management

The COV IT Security Program is based on protecting COV IT systems and data based on sensitivity and risk, including system availability needs. Accordingly, Risk Management is a central component of an agency IT security program and allows each agency to determine how these factors apply to its IT systems.

The first step in Risk Management is a [business impact analysis \(BIA\)](#). BIA is a process of analyzing agency business functions, to identify those that are essential or those that contain sensitive data, and assessing the resources that support them. For the purposes of IT security, the BIA identifies those business functions that is essential or involves sensitive data and that are dependent on IT. This analysis is necessary in order to determine the appropriate level of protection for IT systems and the data they process.

After completing the BIA, Agencies document and characterize the types of data they handle, and classify the sensitivity of agency IT systems and data for use in the [risk assessment \(RA\)](#) process. Sensitivity must consider the elements of availability, confidentiality and integrity. [Please note when assessing the types of data handled by the agency, it is prohibited to post data classified as sensitive with respect to confidentiality on a public web site, ftp server, drive share, bulletin board or any other publicly accessible medium without Agency Head approval. Specific requirements are addressed further in the current version of the \*IT Security Standard \(COV ITRM Standard SEC501\)\*.](#)

Agencies then define and determine ownership of all agency IT systems classified as sensitive so that IT security roles can be appropriately assigned.

A periodic, formal RA is required for all agency IT systems classified as sensitive. While a formal RA is not required for IT systems that are not sensitive, Agencies are advised to conduct an informal risk analysis on those IT systems and the data they handle, and to apply appropriate additional IT security controls as required. The RA process assesses the threats to agency IT systems and data, probabilities of occurrence and the appropriate IT security controls necessary to reduce these risks to an acceptable level.

After appropriate mitigating IT security controls have been applied relative to sensitivity and risk, based on RA results, sensitive agency IT systems require periodic, independent IT Security Audits. [See the current version of the \*IT Security Audit Standard \(COV ITRM Standard SEC502\)\* for requirements.](#)

IT Security Audits may identify additional required mitigating controls for sensitive agency IT systems in order to provide adequate and effective protection of the systems and the data they handle. After applying these controls, the final step in the Risk Management process is formal acceptance by the Agency Head or designee of any residual risk to agency operations from sensitive agency IT systems.

### 3.1.2 IT Contingency Planning

IT Contingency Planning defines processes and procedures that plan for and execute recovery and restoration of IT systems and data that support essential business functions if an event occurs that renders the IT systems and data unavailable. IT Contingency Planning includes

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Continuity of Operations Planning, Disaster Recovery Planning, and IT System Backup and Restoration.

A key element of IT contingency planning is Continuity of Operations Planning, which provides a business continuation strategy for essential agency business functions as identified in the BIA. These processes may or may not be dependent on IT resources. The Virginia Department of Emergency Management (VDEM) provides the COV guidance on agency Continuity of Operations Plans.

Disaster Recovery Planning supports Continuity of Operations Planning by defining specific policies, processes, standards, and procedures for restoring IT systems and data that support essential business functions, on a schedule that supports agency mission requirements.

Based on related elements in the IT contingency planning process, IT System Backup and Restoration defines plans and restoration schedules that meet agency mission requirements for the backup and restoration of data.

### *3.1.3 IT Systems Security*

The purpose of IT systems security is to define the steps necessary to provide adequate and effective protection for agency IT systems in the areas of IT [Systems Security Plans](#), IT System Hardening, IT Systems Interoperability Security, Malicious Code Protection, and IT Systems Development Life Cycle Security. Agency IT systems may require further security controls for adequate protection based on the identification of sensitivity and risk to these systems, including system availability needs, identified through Risk Management policies, processes, and procedures. In addition, some security controls are necessary independent of sensitivity and risk. [Requirements related to sensitive agency systems are defined in the current version of the IT Security Standard](#) (COV ITRM Standard SEC501)

### *3.1.4 Logical Access Control*

Logical Access Control requirements define the steps necessary to protect the confidentiality, integrity, and availability of COV IT systems and data against compromise. Logical Access Control requirements identify the measures needed to verify that all IT system users are who they say they are and that they are permitted to use the systems and data they are attempting to access. Logical Access Control defines requirements in the areas of Account Management, Password Management, and Remote Access.

### *3.1.5 Data Protection*

Data Protection provides security safeguards for the processing and storing of data. This component of the COV IT Security Program outlines the methods that Agencies can use to safeguard the data in a manner commensurate with the sensitivity and risk of the data stored. Data Protection includes requirements in the areas of Media Protection and Encryption.

Storing any data classified as sensitive on any mobile device including laptops and any non-network drive, but excluding backup media, is prohibited unless the data is encrypted and there

is a written exception approved by the Agency Head identifying the business case, risks, mitigating logical and physical controls, and any residual risk.

Prohibit the auto forwarding of emails to external accounts to prevent data leakage unless there is a documented business case disclosing unmitigated risk approved in writing by the Agency Head.

### *3.1.6 Facilities Security*

Facilities Security safeguards require planning and application of facilities security practices to provide a first line of defense for IT systems against damage, theft, unauthorized disclosure of data, loss of control over system integrity, and interruption to computer services.

### *3.1.7 Personnel Security*

Personnel Security controls reduce risk to COV IT systems and data by specifying Access Determination and Control requirements that restrict access to these systems and data to those individuals who require such access as part of their job duties. Personnel Security also includes Security Awareness and Training requirements to provide all IT system users with appropriate understanding regarding COV IT security policies and Acceptable Use requirements for COV IT systems and data.

### *3.1.8 Threat Management*

Threat Management addresses protection of COV IT systems and data by preparing for and responding to IT security incidents. This component of the COV IT Security Program includes Threat Detection, Incident Handling, and IT Security Monitoring and Logging. [Specific requirements related to threat management, data breach notification and reporting are defined in the current version of the \*IT Security Standard\* \(COV ITRM Standard SEC501\).](#)

### *3.1.9 IT Asset Management*

IT Asset Management concerns protection of the components that comprise COV IT systems by managing them in a planned, organized, and secure fashion. Asset Management includes IT Asset Control, Software License Management, and Configuration Management and Change Control.

## 4. COMPLIANCE

The COV measures compliance with IT security policies and standards through processes that include, but are not limited to:

- [Monitoring; and](#)
- [Audits.](#)

### **4.1 Monitoring**

#### *4.1.1 General Monitoring Activities*

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Monitoring is used to improve IT security, to assess appropriate use of COV IT resources, and to protect those resources from attack. Use of COV IT resources constitutes permission to monitor that use. There is no expectation of privacy when utilizing COV IT resources. The COV reserves the right to:

- a. Review the data contained in or traversing COV IT resources.
- b. Review the activities on COV IT resources.
- c. Act on information discovered as a result of monitoring and disclose such information to law enforcement and other organizations as deemed appropriate by the CIO.

#### *4.1.2 User Agreement to Monitoring*

Any use of COV IT resources constitutes consent to monitoring activities that may be conducted whether or not a warning banner is displayed. Users of COV IT resources:

- a. Agree to comply with COV policy concerning the use of IT resources;
- b. Acknowledge that their activities may be subject to monitoring;
- c. Acknowledge that any detected misuse of COV IT resources may be subject to disciplinary action and legal prosecution.

#### *4.1.3 Internet Privacy*

The *Code of Virginia* § 2.2-3803 (B) requires every public body in the COV that has an Internet website to develop an Internet privacy policy and an Internet privacy policy statement that explains the policy to the public and is consistent with the requirements of the *Code*.

#### *4.1.4 User Monitoring Notification*

Where possible, all IT system users will be notified by the display of an authorized COV warning banner that COV IT systems may be monitored and viewed by authorized personnel, regardless of privacy concerns. This notice shall, at a minimum, appear whenever the IT system user first logs on to the IT system and shall be included in IT security awareness training.

#### *4.1.5 What is Monitored?*

Monitoring of COV IT systems and data may include, but is not limited to, network traffic; application and data access; keystrokes and user commands; [email](#) and Internet usage; and message and data content.

#### *4.1.6 Requesting and Authorizing Monitoring*

[For investigative purposes](#), the CISO or ISO has the responsibility to authorize monitoring or scanning activities for network traffic; application and data access; user commands; [email](#) and Internet usage; and message and data content for COV IT systems and data. [The use of key-](#)

stroke logging is prohibited, except when required for security investigations and approved in writing by the Agency Head. The CISO and the ISO shall notify each other when appropriate.

#### 4.1.7 Infrastructure Monitoring

Agency IT personnel are responsible for maintaining security in their environment through the following processes:

- a. Monitoring all systems for security baselines and policy compliance.
- b. Notifying the CISO and agency ISO of any detected or suspected incidents.
- c. Monitoring their environment infrastructure.
- d. Installing or using unauthorized monitoring devices is strictly prohibited.

## 5. IT SECURITY AUDITS

### 5.1 Description

*The Code of Virginia § 2.2-2009 gives the CIO the responsibility to “direct the development of policies, procedures and standards for performing security audits of state electronic information.”* Specific requirements related to performing IT security audits are contained in the current version of the *IT Security Audit Standard* (COV ITRM SEC502).

### 5.2 Performance of IT Security Audits

CISO personnel, agency Internal Auditors, the Auditor of Public Accounts, or staff of a private firm that, in the judgment of the agency, has the experience and expertise can perform agency IT security audits.

Each agency annually reviews, and as needed revises the agency IT audit plan for agency state government electronic information. State government electronic information is any COV information stored in a format that enables it to be read, processed, manipulated, or transmitted by an IT system. Agencies must provide a copy of the current agency IT audit plan to the CISO.

The audits conducted under the annual agency audit plan measure compliance with this policy and all current COV ITRM Security standards. These audits also measure for compliance with any other applicable federal and/or COV regulations.

### 5.3 Documentation and Reporting of IT Security Audits

After conducting the audit examination, audit results are documented and reported to the Agency Head. The Agency Head shall direct the development of a Corrective Action Plan that includes concurrence or non-concurrence with each finding in the audit report as well as the mitigation strategies. Appropriate IT security audit results are reported to the CISO on a quarterly basis as specified in the current version of the *IT Security Audit Standard* (COV ITRM SEC502).

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## 6. PROTECTION OF IT RESOURCES

### 6.1 Confiscation and Removal of IT Resources

The CISO, in conjunction with the Agency Head through the agency ISO or other Administration authorities as necessitated by circumstances, may authorize the confiscation and removal of any IT resource suspected to be the object of inappropriate use or violation of COV IT security laws or policies to preserve evidence that might be utilized in forensic analysis of a security incident.

## 7. PROCESS FOR REQUESTING EXCEPTION TO IT SECURITY POLICY

If an Agency Head determines that compliance with the provisions of this *policy* or *any related IT security* standards would adversely impact *a business process* of the agency, the Agency Head may request approval to deviate from *a specific* requirement by submitting an exception request to the CISO (see the form attached as the Appendix to this document).

Each request shall be in writing to the CISO *and approved by* the Agency Head. Included in each request shall be a statement detailing the reasons for the exception *as well as mitigating* controls *and unmitigated risks*. Requests for exception shall be evaluated and decided upon by the CISO, and the requesting party informed of the action taken. Denied exception requests may be appealed to the CIO of the Commonwealth through the CISO.

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## 8. GLOSSARY OF IT SECURITY DEFINITIONS

*Academic Instruction and Research Systems:* Those systems used by institutions of higher education for the purpose of providing instruction to students and/or by students and/or faculty for the purpose of conducting research.

*Access:* The ability to use, modify or affect an IT system or to gain entry to a physical area or location.

*Access Controls:* A set of security procedures that monitor access and either allow or prohibit users from accessing IT systems and data. The purpose of access controls is to prevent unauthorized access to IT systems.

*Accountability:* The association of each log-on ID with one and only one user, so that the user can always be tracked while using an IT system, providing the ability to know which user performed what system activities.

*Agency Head:* The chief executive officer of a department established in the government of the Commonwealth of Virginia.

*Alert:* Notification that an event has occurred or may occur.

*Alternate Site:* A location used to conduct essential business functions in the event that access to the primary facility is denied or the primary facility has been so damaged as to be unusable.

*Application:* A computer program or set of programs that meet a defined set of business needs. See also *Application System*.

*Application System:* An interconnected set of IT resources under the same direct management control that meets a defined set of business needs. See also *Application*, *Support System*, and *Information Technology (IT) System*.

*Asset:* Any software, data, hardware, administrative, physical, communications, or personnel resource.

*Assurance:* Measurement of confidence in a control or activity.

*Attack:* An attempt to bypass security controls on an IT system in order to compromise the data.

*Audit:* An independent review and examination of records and activities to test for adequacy of controls, measure compliance with established policies and operational procedures, and recommend changes to controls, policies, or procedures.

*Authentication:* The process of verifying an identity of a user to determine the right to access specific types of data or IT system.

*Authorization:* The process of granting access to data or IT system by designated authority after proper identification and authentication.

*Availability:* Protection of IT systems and data so that they are accessible to authorized users when needed without interference or obstruction.

*Backup:* The process of producing a reserve copy of software or electronic files as a precaution in case the primary copy is damaged or lost.

*Business Continuity Plan:* A set of processes and procedures to recover an organization's essential business functions in a manner and on a schedule to provide for the ongoing viability of the organization if a disruption to normal operations occurs.

*Baseline Security Configuration:* The minimum set of security controls that must be implemented on all IT systems of a particular type.

*Business Function:* A collection of related structural activities that produce something of value to the organization, its stakeholders or its customers. See also *Essential Business Function*.

*Business Impact Analysis (BIA):* The process of determining the potential consequences of a disruption or degradation of business functions.

*Change Control:* A management process to provide control and traceability for all changes made to an application system or IT system.

*Chief Information Officer of the Commonwealth (CIO):* The CIO oversees the operation of the Virginia Information Technologies Agency (VITA) and, under the direction and control of the Virginia Information Technology Investment Board (the Board), exercises the powers and performs the duties conferred or imposed upon him by law and performs such other duties as may be required by the Board.

*Chief Information Security Officer of the Commonwealth (CISO):* The CISO is the senior management official designated by the CIO of the Commonwealth to develop Information Security policies, procedures, and standards to protect the confidentiality, integrity, and availability of IT systems and data.

*Commonwealth of Virginia (COV):* The government of the Commonwealth of Virginia, and its agencies and departments.

*Commonwealth of Virginia Computer Incident Response Team (COV CIRT):* A function of the Incident Management division of the COV Security and Risk Management directorate. The COV CIRT operates under the direction of the Incident Management Director, and is primarily comprised of the Incident Management engineers, with additional resources available as needed on a per incident basis from IT Partnership technical, legal and human resources staff.

*Computer Emergency Response Team Coordination Center (CERT/CC):* a center of Internet security expertise, located at the Software Engineering Institute at Carnegie Mellon University that studies Internet security vulnerabilities, researches long-term changes in networked systems, and develops information and training to assist the CERTs of other organizations. See also *Incident Response Team* and *United States Computer Emergency Response Team (US-CERT)*.

*Confidentiality:* The protection of data from unauthorized disclosure to individuals or IT systems.

*Configuration Management:* A formal process for authorizing and tracking all changes to an IT system during its life cycle.

*Continuity of Operations Planning:* The process of developing plans and procedures to continue the performance of essential business functions in the event of a business interruption or threat of interruption.

*Continuity of Operations Plan (COOP):* A set of documented procedures developed to provide for the continuance of essential business functions during an emergency.

*Control Objectives for Information and related Technology (COBIT):* A framework of best practices for IT management that provides managers, auditors, and IT users with a set of generally accepted measures, indicators, processes and best practices to assist them in maximizing the benefits derived through the use of information technology and developing appropriate IT governance and control.

*Countermeasure:* An action, device, procedure, technique, or other measure that reduces vulnerability or the impact of a threat to an IT system.

*Credential:* Information, such as a user ID and password passed from an IT system or IT system user to an IT system to establish access rights.

*Cryptography:* The process of transforming plain text into cipher text, and cipher text into plain text.

*Customer-Facing IT System:* An IT system designed and intended for by external agency customers and/or by the public. COV employees, contractors, and business partners may also use such systems. See also *IT System* and *Internal IT System*.

*Data:* An arrangement of numbers, characters, and/or images that represent concepts symbolically.

*Database:* A collection of logically related data (and a description of this data), designed to meet the information needs of an organization.

*Data Classification:* A process of categorizing data according to its sensitivity.

*Data Custodian:* An individual or organization in physical or logical possession of data for Data Owners. Data Custodians are responsible for protecting the data in their possession from unauthorized access, alteration, destruction, or usage and for providing and administering general controls, such as back-up and recovery systems.

*Data Owner:* An agency Manager, designated by the Agency Head or Information Security Officer, who is responsible for the policy and practice decisions regarding data. For business data, the individual may be called a business owner of the data.

*Data Security:* Data Security refers to those practices, technologies, and/or services used to apply security appropriately to data.

*Data Sensitivity:* See *Sensitivity*.

*Digital Certificate:* An electronic document attached to a file that certifies the file is from the organization it claims to be from and has not been modified from the original format.

*Digital Signature:* A number that uniquely identifies the sender of a message and proves the message is unchanged since transmission.

*Disaster Recovery Plan (DRP):* A set of documented procedures that identify the steps to restore essential business functions on a schedule that supports agency mission requirements.

*Data Storage Media:* A device used to store IT data. Examples of data storage media include floppy disks, fixed disks, CD-ROMs, and USB flash drives.

*Electronic Information:* Any information stored in a format that enables it to be read, processed, manipulated, or transmitted by an IT system.

*Encryption:* The process or the means of converting original data to an unintelligible form so it cannot be read by unauthorized users.

*Essential Business Function:* A business function is essential if disruption or degradation of the function prevents the agency from performing its mission as described in the agency mission statement.

*Evaluation:* Procedures used in the analysis of security mechanisms to determine their effectiveness and to support or refute specific system weaknesses.

*Extranet:* A trusted network; used by COV to connect to a third-party provider.

*Federal Information Security Management Act (FISMA):* Federal legislation whose primary purpose is to provide a comprehensive framework for IT security controls in Federal agencies.

*Firewall:* Traffic-controlling gateway that controls access, traffic, and services between two networks or network segments, one trusted and the other untrusted.

*Function:* A purpose, process, or role.

*Group:* A named collection of IT system users; created for convenience when stating authorization policy.

*Group-based Access:* Authorization to use an IT system and/or data based on membership in a group.

*Harden:* The process of implementing software, hardware, or physical security controls to mitigate risk associated with COV infrastructure and/or sensitive IT systems and data.

*High Availability:* A requirement that the IT system is continuously available, has a low threshold for down time, or both.

*Identification:* The process of associating a user with a unique user ID or login ID.

*Incident Response Capability (IRC):* The follow-up to an incident including reporting, responding and recovery procedures.

*Information:* Data organized in a manner to enable their interpretation.

*Information Security Officer (ISO):* The individual designated by the Agency Head to be responsible for the development, implementation, oversight, and maintenance of the agency's IT security program.

*Information Technology (IT):* Telecommunications, automated data processing, databases, the Internet, management information systems, and related information, equipment, goods, and services.

*Information Technology (IT) Assurance:* Measures that protect and defend information and IT systems by providing for their availability, integrity, authentication, confidentiality, and non-repudiation.

*Information Technology (IT) Contingency Planning:* The component of Continuity of Operations Planning that prepares for continuity and/or recovery of an organization's IT systems and data that support its essential business

functions in the event of a business interruption or threat of interruption.

*Information Technology (IT) Infrastructure Library (ITIL):* A framework of best practice processes designed to facilitate the delivery of high quality information technology (IT) services.

*Information Technology (IT) Security:* The protection afforded to IT systems and data in order to preserve their availability, integrity, and confidentiality.

*Information Technology (IT) Security Architecture:* The logical and physical security infrastructure made up of products, functions, locations, resources, protocols, formats, operational sequences, administrative and technical security controls, etc., designed to provide the appropriate level of protection for IT systems and data.

*Information Technology (IT) Security Audit:* The examination and assessment of the adequacy of IT system controls and compliance with established IT security policy and procedures.

*Information Technology (IT) Security Auditor:* CISO personnel, agency Internal Auditors, the Auditor of Public Accounts, or a private firm that, in the judgment of the agency, has the experience and expertise required to perform IT security audits.

*Information Technology (IT) Security Breach:* The violation of an explicit or implied security policy that compromises the integrity, availability, or confidentiality of an IT system.

*Information Technology (IT) Security Controls:* The protection mechanisms prescribed to meet the security requirements specified for an IT system.

*IT Security Event:* An occurrence that has yet to be assessed but may affect the performance of an IT system.

*Information Technology (IT) Security Incident:* An adverse event or situation, whether intentional or accidental, that poses a threat to the integrity, availability, or confidentiality of an IT system.

*Information Technology (IT) Security Incident Response Team:* An organization within an agency constituted to monitor IT security threats and prepare for and respond to cyber attacks. See also *Computer Emergency Response Team Coordination Center (CERT/CC)* and *United States Computer Emergency Response Team (US-CERT)*.

*Information Technology (IT) Security Logging:* Chronological recording of system activities sufficient to enable the reconstruction, review, and examination of the sequence of environments and activities surrounding or leading to an operation, a procedure, or an event in a transaction from its inception to its final results.

*Information Technology (IT) Security Policy:* A statement of the IT Security objectives of an organization, and what employees, contractors, vendors, business partners, and third parties of the organization must do to achieve these objectives.

*Information Technology (IT) Security Program:* A collection of security processes, standards, rules, and procedures that represents the implementation of an organization's security policy.

*Information Technology (IT) Security Requirements:* The types and levels of protection necessary to adequately secure an IT system.

*Information Technology (IT) Security Safeguards:* See *Information Technology (IT) Security Controls*.

*Information Technology (IT) Security Standards:* Detailed statements of how employees, contractors, vendors, business partners, and third parties of an organization must comply with its IT Security policy.

*Information Technology (IT) System:* An interconnected set of IT resources under the same direct management control. See also *Application System* and *Support System*.

*Information Technology (IT) System Sensitivity:* See *Sensitivity*.

*Information Technology (IT) System Users:* As used in this document, a term that includes COV employees, contractors, vendors, third-party providers, and any other authorized users of IT systems, applications, telecommunication networks, data, and related resources.

*Integrity:* The protection of data or IT system from intentional or accidental unauthorized modification.

*Internal IT System:* An IT system designed and intended for use only by COV employees, contractors, and business partners. See also *IT System* and *Customer-Facing IT System*.

*Internet:* An external worldwide public data network using Internet protocols to which COV can establish connections.

*Intranet:* A trusted multi-function (data, voice, video, image, facsimile, etc.) private digital network using Internet protocols, which can be developed, operated and maintained for the conduct of COV business.

*Intrusion Detection:* A method of monitoring traffic on the network to detect break-ins or break-in attempts, either manually or via software expert systems.

*Intrusion Detection Systems (IDS):* Software that detects an attack on a network or computer system. A Network IDS (NIDS) is designed to support multiple hosts, whereas a Host IDS (HIDS) is set up to detect illegal actions within the host. Most IDS programs typically use signatures of

known cracker attempts to signal an alert. Others look for deviations of the normal routine as indications of an attack.

*Intrusion Prevention Systems (IPS):* Software that prevents an attack on a network or computer system. An IPS is a significant step beyond an IDS (intrusion detection system), because it stops the attack from damaging or retrieving data. Whereas an IDS passively monitors traffic by sniffing packets off of a switch port, an IPS resides inline like a firewall, intercepting and forwarding packets. It can thus block attacks in real time.

*ISO/IEC 17799:* An IT security standard published in 2005 by the International Organization for Standardization (ISO) and the International Electro-technical Commission (IEC). It provides best practice recommendations on IT security management for use by those who are responsible for initiating, implementing or maintaining information security management systems.

*Key:* A sequence of data used in cryptography to encrypt or decrypt information.

*Key Escrow:* The process of storing the encryption key with a third-party trustee to allow the recovery of encrypted text.

*Least Privilege:* The minimum level of data, functions, and capabilities necessary to perform a user's duties.

*Logon ID:* An identification code (normally a group of numbers, letters, and special characters) assigned to a particular user that identifies the user to the IT system.

*Malicious Code:* Harmful code (such as viruses and worms) introduced into a program or file for the purpose of contaminating, damaging, or destroying IT systems and/or data. Malicious code includes viruses, Trojan horses, trap doors, worms, spy-ware, and counterfeit computer instructions (executables).

*Malicious Software:* See *Malicious Code*.

*Management Control:* A set of mechanisms designed to manage organizations to achieve desired objectives.

*Mission Critical Facilities:* The data center's physical surroundings as well as data processing equipment inside and the systems supporting them that need to be secured to achieve the availability goals of the system function.

*Monitoring:* Listening, viewing, or recording digital transmissions, electromagnetic radiation, sound, and visual signals.

*Non-repudiation:* A characteristic of a message that validates that the message was sent by a particular organization or individual, and cannot be refuted.

*Off-site Storage:* The process of storing vital records in a facility that is physically remote from the primary site. To

qualify as off-site, the facility should be [geographically, separately and distinct](#) from the primary site and offer environmental and physical access protection.

*Operational Controls:* IT security measures implemented through processes and procedures.

*Operational Risk:* The possibility of loss from events related to technology and infrastructure failure, from business interruptions, from staff related problems and from external events such as regulatory changes.

*Out-of-Band Communications:* A secondary communications channel for emergencies and/or redundancy.

*Password:* A unique string of characters that, in conjunction with a logon ID, authenticates a user's identity.

*Personal Digital Assistant (PDA):* A digital device, which can include the functionality of a computer, a cellular telephone, a music player and a camera.

*Personal Identification Number (PIN):* A short sequence of digits used as a password.

*Personally Identifiable Information (PII):* Any piece of information that can potentially be used to uniquely identify, contact, or locate a single person.

*Personnel:* All COV employees, contractors, and subcontractors, both permanent and temporary.

*Phishing:* A form of criminal activity characterized by attempts to acquire sensitive information fraudulently, such as passwords and credit card details, by masquerading as a trustworthy person or business in an apparently official electronic communication.

*Privacy:* The rights and desires of an individual to limit the disclosure of individual information [to others](#).

*Privacy Officer:* The privacy officer, if required by statute (such as HIPPA) provides guidance on the requirements of state and federal Privacy laws; disclosure of and access to sensitive data; and security and protection requirements in conjunction with the IT system when there is some overlap among sensitivity, disclosure, privacy, and security issues.

*Public web site:* A public web site is the most visible and readily accessible to the average Web user. A site on the Web that is accessible by anyone with a Web browser and access to the Internet where authentication is not required.

*Risk:* The potential that an event may cause a material negative impact to an asset.

*Risk Analysis:* A systematic process to identify and quantify risks to IT systems and data and to determine the probability of the occurrence of those risks.

*Risk Management:* Identification and implementation of IT security controls in order to reduce risks to an acceptable level.

*Recovery:* Activities beyond the initial crisis period of an emergency or disaster that are designed to return IT systems and/or data to normal operating status.

*Residual Risk:* The portion of risk that remains after security measures have been applied.

*Restoration:* Activities designed to return damaged facilities and equipment to an operational status.

*Risk:* The possibility of loss or injury based on the likelihood that an event will occur and the amount of harm that could result.

*Risk Assessment (RA):* The process of identifying and evaluating risks so as to assess their potential impact.

*Risk Mitigation:* The continuous process of minimizing risk by applying security measures commensurate with sensitivity and risk.

*Role-based Access Control:* A type of access control in which IT system users receive access to the IT systems and data based on their positions or roles in an organization.

*Roles and Responsibility:* Roles represent a distinct set of operations and responsibilities required to perform some particular function that an individual may be assigned. Roles may differ from the individual's business title. This document contains the roles and responsibilities associated with implementing IT security.

*Recovery Time Objective (RTO):* The amount of time targeted for the recovery of a business function or resource after a disaster occurs.

*Secure:* A state that provides adequate protection of IT systems and data against compromise, commensurate with sensitivity and risk.

*Sensitive:* See Sensitivity.

*Sensitivity:* A measurement of adverse affect on COV interests, the conduct of agency programs, [and/or](#) the privacy to which individuals are entitled that compromise IT systems and data with respect to confidentiality, integrity, and/or availability could cause. IT systems and data are sensitive in direct proportion to the materiality of the adverse effect caused by their compromise.

*Sensitivity Classification:* The process of determining whether and to what degree IT systems and data are sensitive.

*Separation of Duties:* Assignment of responsibilities such that no one individual or function has control of an entire

process. It is a technique for maintaining and monitoring accountability and responsibility for IT systems and data.

*Shared Accounts:* A logon ID or account utilized by more than one entity.

*Spy-ware:* A category of malicious software designed to intercept or take partial control of a computer's operation without the informed consent of that machine's owner or legitimate user. While the term taken literally suggests software that surreptitiously monitors the user, it has come to refer more broadly to software that subverts the computer's operation for the benefit of a third party.

*State:* See *Commonwealth of Virginia (COV)*.

*Support System:* An interconnected set of IT resources under the same direct management control that shares common functionality and provides services to other systems. See also *Application System* and *Information Technology (IT) System*.

*System.* See *Information Technology (IT) System*.

*System Administrator:* An analyst, engineer, or consultant who implements, manages, and/or operates a system at the direction of the System Owner, Data Owner, and/or Data Custodian.

*System Owner:* An agency Manager, designated by the Agency Head or Information Security Officer, who is responsible for the operation and maintenance of an agency IT system.

*Technical Controls:* IT security measures implemented through technical software or hardware.

*Third-Party Provider:* A company or individual that supplies IT equipment, systems, or services to COV Agencies.

*Threat:* Any circumstance or event (human, physical, or environmental) with the potential to cause harm to an IT system in the form of destruction, disclosure, adverse modification of data, and/or denial of service by exploiting vulnerability.

*Token:* A small tangible object that contains a built-in microprocessor utilized to store and process information for authentication.

*Trojan horse:* A malicious program that is disguised as or embedded within legitimate software.

*Trusted System or Network:* An IT system or network that is recognized automatically as reliable, truthful, and accurate, without continual validation or testing.

*United States Computer Emergency Response Team (US-CERT):* A partnership between the Department of Homeland Security and the public and private sectors, intended to coordinate the response to IT security threats from the Internet. As such, it releases information about current IT security issues, vulnerabilities and exploits as Cyber Security Alerts, and works with software vendors to create patches for IT security vulnerabilities. See also *Computer Emergency Response Team Coordination Center (CERT/CC)* and *Incident Response Team*.

*Universal Serial Bus (USB):* A standard for connecting devices.

*Untrusted:* Characterized by absence of trusted status. Assumed to be unreliable, untruthful, and inaccurate unless proven otherwise.

*USB Flash Drive:* A small, lightweight, removable and rewritable data storage device.

*User ID:* A unique symbol or character string that is used by an IT system to identify a specific user. See *Logon ID*.

*Virginia Department of Emergency Management (VDEM):* A COV department that protects the lives and property of Virginia's citizens from emergencies and disasters by coordinating the state's emergency preparedness, mitigation, response, and recovery efforts.

*Version Control:* A management process that provides traceability of updates to operating systems and supporting software.

*Virginia Information Technologies Agency (VITA):* VITA is the consolidated, centralized IT organization for COV.

*Virus:* See *Malicious Code*.

*Vital Record:* A document, regardless of media, which, if damaged or destroyed, would disrupt business operations.

*Vulnerability:* A condition or weakness in security procedures, technical controls, or operational processes that exposes the system to loss or harm.

*Workstation:* A terminal, computer, or other discrete resource that allows personnel to access and use IT resources.

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## 9. IT SECURITY ACRONYMS

AITR: Agency Information Technology Representative	RBD: Risk-Based Decisions
ANSI: American National Standards Institute	RTO: Recovery Time Objective
BIA: Business Impact Analysis	SLA: Service Level Agreement
CAP: Corrective Action Plan	SDLC: Systems Development Life Cycle
CIO: Chief Information Officer	SNMP: Simple Network Management Protocol
CISO: Chief Information Security Officer	SOP: Standard Operating Procedure
COOP: Continuity of Operations Plan	SSID: Service Set Identifier
COPPA: Children's Online Privacy Protection Act	SSP: Security Program Plan
COTS: Council on Technology Services	ST&E: Security Test & Evaluation
DHRM: Department of Human Resource Management	USCERT: Computer Emergency Response Team
DRP: Disaster Recovery Plan	VDEM: Virginia Department of Emergency Management
FIPS: Federal Information Processing Standards	VITA: Virginia Information Technologies Agency
FISMA: Federal Information Security Management Act	
FTP: File Transfer Protocol	
HIPAA: Health Insurance Portability and Accountability Act	
IDS: Intrusion Detection Systems	
IPS: Intrusion Prevention Systems	
IRC: Incident Response Capability	
ISA: Interconnection Security Agreement	
ISO: Information Security Officer	
ITIES: Information Technology Investment and Enterprise Solutions Directorate	
ITRM: Information Technology Resource Management	
MOU: Memorandum of Understanding	
OMB: Office of Management and Budget	
PCI: <a href="#">Payment Card Industry</a>	
PDA: Personal Digital Assistant	
PIA: Privacy Impact Assessment	
PII: Personally Identifiable Information	
PIN: Personal Identification Number	
RA: Risk Assessment	

APPENDIX – IT SECURITY POLICY AND STANDARD EXCEPTION REQUEST FORM

Any agency requesting an exception to any requirement of this policy and the related Standards must submit the form on the following page.

