

# Comprehensive Information Security Plan

This Information Security Plan will be reviewed annually and updated as needed to address operational, technological, and regulatory changes.

## 1. Purpose

The Angeles College (AC) is committed to protecting the confidentiality, integrity, and availability of sensitive and nonpublic information. This **Information Security Plan (ISP)** establishes the safeguards necessary to prevent unauthorized access, disclosure, misuse, or destruction of institutional data.

This plan applies to all AC employees, contractors, vendors, systems, and third-party service providers that access, process, store, or transmit sensitive information.

The **ISP** supports:

- Risk identification and management
  - Security controls and monitoring
  - Incident response procedures
  - Security awareness and training
  - Third-party risk management
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## 2. Scope

This ISP applies to all sensitive and nonpublic information handled by AC, including:

- Financial and student aid records
  - Personally Identifiable Information (PII)
  - Protected health information covered under HIPAA
  - Academic and employee records
  - Proprietary or institutional data
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## 3. Roles and Responsibilities

### 3.1 Information Security Officer (ISO)

The ISO oversees the implementation and enforcement of this ISP, including risk assessments, compliance monitoring, and incident response coordination.

### **3.2 GLBA Compliance Coordinator**

The GLBA Compliance Coordinator ensures compliance with the Gramm-Leach-Bliley Act and works with the ISO to safeguard financial information.

### **3.3 Information Technology Department**

The IT Department manages technical safeguards such as network security, system monitoring, access control, and software updates.

### **3.4 Data Stewards**

Departments handling sensitive information must designate Data Stewards responsible for ensuring data is managed in accordance with AC policies.

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## **4. Risk Assessment and Management**

AC will conduct periodic risk assessments to identify and address threats to sensitive information.

### **4.1 Risk Identification**

Risks may include:

- Unauthorized access to systems or data
- Cyberattacks, malware, or phishing
- Insider misuse or human error
- Equipment failure or theft
- Natural disasters or environmental events

### **4.2 Risk Mitigation**

AC will implement appropriate administrative, technical, and physical safeguards to reduce identified risks.

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## **5. Administrative Safeguards**

### **5.1 Policies and Procedures**

AC will maintain and regularly review information security policies governing the use, storage, transmission, and disposal of sensitive information.

## **5.2 Security Awareness Training**

Employees, contractors, and authorized third parties must complete security awareness training appropriate to their job responsibilities. Training must include, at a minimum, the following topics:

- Phishing and social engineering
- Secure data handling and disposal
- Password management and MFA
- Incident reporting procedures

## **5.3 Access Control**

Access to sensitive information will be limited to authorized individuals based on business need and the principle of least privilege.

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# **6. Technical Safeguards**

## **6.1 Encryption**

Sensitive data transmitted electronically must be encrypted using industry-standard methods. Encryption at rest will be implemented where feasible.

## **6.2 Network Security**

AC will maintain network protections including:

- Firewalls
- Intrusion detection and prevention systems (IDS/IPS)
- VPN and MFA for remote access

## **6.3 Endpoint Protection**

Institution-owned devices must use approved antivirus and endpoint protection software with current updates applied.

## **6.4 Backup and Recovery**

Critical systems and data will be backed up regularly and tested periodically to ensure recovery capabilities.

## **6.5 Patch Management**

Systems and software will be updated regularly to address security vulnerabilities.

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# **7. Physical Safeguards**

## **7.1 Facility Security**

Access to sensitive areas such as server rooms and records storage locations will be restricted using locks, access badges, or surveillance systems.

## **7.2 Paper Records**

Sensitive paper documents must be securely stored and shredded before disposal.

## **7.3 Device Security**

Institutional devices must be protected against theft and unauthorized access through password protection and physical security measures.

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# **8. Incident Response**

AC maintains an Incident Response Plan (IRP) to address and contain security incidents.

## **8.1 Incident Reporting**

Employees and contractors must promptly report suspected security incidents or data breaches to the Information Security Officer.

## **8.2 Response and Containment**

The ISO and IT Department will investigate incidents and take appropriate containment actions.

## **8.3 Notification Requirements**

AC will provide required notifications following a confirmed data breach in accordance with applicable laws.

## **8.4 Post-Incident Review**

After an incident, AC will review the cause and implement corrective actions to prevent recurrence.

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## **9. Monitoring and Improvement**

### **9.1 Security Monitoring**

AC will monitor systems and networks for suspicious activity and vulnerabilities.

### **9.2 Testing and Assessments**

Periodic vulnerability assessments and penetration testing will be conducted to evaluate security controls.

### **9.3 Plan Review**

This ISP will be reviewed annually and updated as necessary to address evolving threats and regulatory changes.

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## **10. Third-Party Risk Management**

### **10.1 Vendor Due Diligence**

AC will assess the security practices of vendors that access or process sensitive information.

### **10.2 Contract Requirements**

Vendor agreements will include information security and confidentiality requirements consistent with AC standards and applicable laws.

### **10.3 Ongoing Oversight**

AC may periodically review vendor security practices and require remediation of identified issues.

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## **11. Compliance**

AC will comply with all applicable federal, state, and local laws and regulations, including:

- Gramm-Leach-Bliley Act (GLBA)
  - Health Insurance Portability and Accountability Act (HIPAA)
  - Family Educational Rights and Privacy Act (FERPA)
  - Applicable state data breach notification laws
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