

Personal Data Security Breach – Incident Reporting Form

This form should be used to provide information to the Data Protection Officer when there has been a *serious* breach and consideration needs to be given to whether the breach should be reported to the ICO.

The aim of the form is to gather detailed information in order to understand the gravity of the breach, including its impact and what must be done to reduce the risk to personal data and the individuals concerned.

It is imperative that as much information as possible is provided.

The information will be used to review policies and procedures and assess whether changes are required.

Breach log no: _____

Breach log reference: _____

1. Details of the breach

a) Date and Time of the Incident

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b) Number and description of individuals whose data is affected (eg 3 year 10 pupils)

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c) Department (if relevant)

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d) Nature of the breach

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e) Description of how breach occurred

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2. Reporting

a) When the breach was reported to you?

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b) How did you become aware of the breach?

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3. Personal Data

a) Full description of personal data involved (without identifying individuals)

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b) Have all of the affected individuals been informed of the breach?

c) If not, why?

d) Has the personal data in this incident been inappropriately processed or further disclosed?

4. Consequence of the Breach?

a) Describe the risk of harm to individuals as a result of this breach?

b) Is there a risk of identity fraud as a result of this breach?

c) Has a formal complaint been received from any of the individuals affected by the breach? If yes, please provide details.

5. Measures taken or to be taken?

a) What immediate action was taken?

b) Has the data been retrieved? – if yes, please specify date and time. Has any further action been taken to minimise the possibility of a repeat of such an incident?

d) Has there been a breach of governance policies and procedures?

e) Have the employees involved with the incident received data protection training? Please provide details.

Completed by:

Name: _____

Job Title: _____

Signature: _____

Date: _____