1. General

Security Monitoring is a method used to confirm that the security practices and controls in place are being adhered to and are effective. Monitoring consists of activities such as the review of: user account logs, application logs, data backup and recovery logs, automated intrusion detection system logs, etc.

The purpose of security monitoring is to ensure that information resource security controls are in place, are effective, and are not being bypassed. One of the benefits of security monitoring is the early identification of wrongdoing or new security vulnerabilities.

2. Applicability

This information security standard applies to all University information resources.

The purpose of this information security standard is to provide a set of measures that will mitigate information security risks associated with Security Monitoring. There may also be other or additional measures that department heads or deans will provide to further mitigate risks. The assessment of potential risks and the application of appropriate mitigation measures are to be determined by the department heads and their identified information security administrators. In accordance with Texas Administrative Code 202 - Information Security Standards, each department and/or resource owner may elect not to implement some or all of the risk mitigation measures provided is based on documented information security risk management decisions and business functions. Such risk management decisions must be documented and approved by the designated Information Security Officer (ISO).

The intended audience includes, but is not limited to, all information resources data/owners, management personnel, and system administrators.
3. Definitions

3.1 Confidential Information: information that is excepted from disclosure requirements under the provisions of applicable state or federal law, e.g., the Texas Public Information Act.

3.2 Information Resources: Any and all computer printouts, online display devices, magnetic storage media, and all computer-related activities involving any device capable of receiving email, browsing Web sites, or otherwise capable of receiving, storing, managing, or transmitting electronic data including, but not limited to, mainframes, servers, personal computers, notebook computers, hand-held computers, personal digital assistant (PDA), pagers, distributed processing systems, network attached and computer controlled medical and laboratory equipment (i.e. embedded technology), telecommunication resources, network environments, telephones, fax machines, printers and service bureaus. Additionally, it is the procedures, equipment, facilities, software, and data that are designed, built, operated, and maintained to create, collect, record, process, store, retrieve, display, and transmit information.

3.3 Information Resources Manager (IRM): Responsible to the State of Texas for management of the agency/university’s information resources. The designation of an agency/university information resources manager is intended to establish clear accountability for setting policy for information resources management activities, provide for greater coordination of the state agency's information activities, and ensure greater visibility of such activities within and between state agencies. The IRM has been given the authority and the accountability by the State of Texas to implement Security Policies, Procedures, Practice Standards, and Guidelines to protect the Information Resources of the agency. If an agency does not designate an IRM, the title defaults to the agency’s Executive Director, and the Executive Director is responsible for adhering to the duties and requirements of an IRM.

3.4 Information Security Officer (ISO): Responsible to the executive management for administering the information security function within the agency. The ISO is the university’s internal and external point of contact for all information security matters.

3.6 Mission Critical Information: information that is defined by the university or information resource owner to be essential to the continued performance of the mission of the university or department. Unavailability of such information would result in more than an inconvenience. An event causing the unavailability of mission critical information would result in consequences such as significant financial
loss, institutional embarrassment, failure to comply with regulations or legal obligations, or closure of the university or department.

3.7 **Owner of Information Resources**: an entity responsible:

(1) for a business function (Department Head); and,
(2) for determining controls and access to information resources

4. Procedures

4.1 Automated tools will provide real-time notification and appropriate response as necessary of detected wrongdoing and vulnerability exploitation. Where possible a security baseline will be developed and the tools will report exceptions. These tools will be deployed to monitor:

- Internet traffic
- Electronic mail traffic
- LAN traffic, protocols, and device inventory
- Operating system security parameters

4.2 The following files shall be checked, as appropriate, for signs of wrongdoing and vulnerability exploitation at a frequency determined by risk:

- Automated intrusion detection logs
- Firewall logs
- User account logs
- Network scanning logs
- System error logs
- Application logs
- Data backup and recovery logs
- Help desk trouble tickets
- Telephone activity – Call Detail Reports
- Network printer and fax logs

4.3 The following checks will be performed at least annually by assigned individuals:

- Password strength
- Unauthorized network devices
- Unauthorized personal web servers
- Unsecured sharing of devices
- Unauthorized modem use

4.4 Any security issues discovered will be reported to the ISO for follow-up investigation.
OFFICE OF RESPONSIBILITY: Information Technology

CONTACT: Chief Information Officer