

**MODULE 1**  
**LEARNING BLOCK:**  
**SECURITY POLICY**



**SUBJECT:**

**SECURITY POLICY**  
**TEMPLATE**



Compilers: G Mulder & M vd Merwe



**intelligence**

SOUTH AFRICAN NATIONAL ACADEMY OF INTELLIGENCE  
REPUBLIC OF SOUTH AFRICA



SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## PREFACE

This Security Policy Template has been compiled in order to assist organs of state to compile their own internal security policies. This document is complimentary to the guidance document: Guideline: Compiling of a Security Policy.

When utilizing this template, security managers at organs of state must replace the sections in red text with the information of their own institutions. Additional information must also be provided (or removed) as required and indicated in the template.

The template is intended as guidance material and must be adapted for use by each organ of state respectively. The content of the template must be analyzed by those responsible for drafting Security Policies and changed/adapted as dictated by the particular circumstances of that particular organ of state. Merely using the template as-is will not be acceptable.

Particular attention must be given to the content of Annex A when adapting the template for use at a particular organ of state (identification of relevant legislation and other regulatory framework documents). All legislation and regulatory documents applicable to that particular organ of state must be identified and listed. The said documents must also be utilized when drafting the content of the Security Policy.

It is further important to remember that a Security Policy on its own is not sufficient to regulate the implementation of the security program at an institution. The Security Policy must be supported by a Security Plan containing all the detailed Security Directives applicable at that institution. All existing supporting documents must be listed at Annex C of this template.

Security managers must request the assistance of their allocated NIA Security Advisors when drafting their Security Policies. The completed draft Security Policy must be submitted to the said NIA Security Advisor for review and comments before it is submitted to the HOD/CEO of the institution for formal approval. After approval thereof, a copy of the approved Security Policy must be forwarded to the relevant NIA Security Advisor for record keeping purposes.

Security managers making use of this template to compile their Security Policies while attending the SANAI Security Management Course may also request assistance from the course facilitators.

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

<b>TABLE OF CONTENTS</b>		<b>Page</b>
1.	PREFACE	2
2.	STATEMENT OF PURPOSE	4
3.	SCOPE	4
4.	LEGISLATIVE AND REGULATORY REQUIREMENTS	5
5.	POLICY STATEMENT	5 - 13
6.	RESPONSIBILITIES	13
7.	AUDIENCE	14
8.	ENFORCEMENT	14
9.	EXCEPTIONS	15
10.	OTHER CONSIDERATIONS	15
11.	COMMUNICATING THE POLICY	15
12.	REVIEW AND UPDATE PROCESS	16
13.	IMPLEMENTATION	16
14.	MONITORING OF COMPLIANCE	16
15.	DISCIPLINARY ACTION	16
16.	ANNEX A: APPLICABLE LEGISLATION AND OTHER REGULATORY FRAMEWORK DOCUMENTS	17
17.	ANNEX B: GLOSSARY AND DEFINITIONS	18
18.	ANNEX C: SUPPORTING DOCUMENTS	20

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

POLICY	CROSS REFERENCE
<p>1.        <b>STATEMENT OF PURPOSE</b></p> <p>1.1        The [name of institution] depends on its personnel, information and assets to deliver services that ensure the health, safety, security and economic well-being of South African citizens. It must therefore manage these resources with due diligence and take appropriate measures to protect them.</p> <p>1.2        Threats that can cause harm to [name of institution], in South Africa and abroad, include acts of terror and sabotage, espionage, unauthorized access to buildings and premises, theft, armed robbery, fraud and corruption, vandalism, fire, natural disasters, technical failures and accidental damage. The threat of cyber attack and malicious activity through the Internet is prevalent and can cause severe harm to electronic services and critical infrastructure. Threats to the national interest, such as transnational criminal activity, foreign intelligence activities and terrorism, continue to evolve as the result of changes in the international environment.</p> <p>1.3        The Security Policy of [name of institution] prescribes the application of security measures to reduce the risk of harm that can be caused to the institution if the above threats should materialize. It has been designed to protect employees, preserve the confidentiality, integrity, availability and value of information and assets, and assure the continued delivery of services. Since the [name of institution] relies extensively on information and communication technology (ICT) to provide its services, this policy emphasizes the need for acceptable use of ICT equipment as well as ICT protection measures to be complied with by employees.</p> <p>1.4        The main objective of this policy therefore is to support the national interest and the [name of institution] business objectives by protecting employees, information and assets and assuring the continued delivery of services to South African citizens.</p> <p>1.5        This policy complements other [name of institution] policies (e.g. sexual harassment, occupational health and safety, official languages, information management, asset control, real property and financial resources).</p> <p>2.        <b>SCOPE</b></p> <p>2.1        This policy applies to the following individuals and entities:</p> <ul style="list-style-type: none"><li>• all employees of [name of institution];</li><li>• all contractors and consultants delivering a service to [name of institution], including their employees who may interact with [name of institution];</li><li>• temporary employees of [name of institution];</li><li>• all information assets of [name of institution];</li><li>• all intellectual property of [name of institution];</li><li>• all fixed property that is owned or leased by [name of institution];</li><li>• all moveable property that is owned or leased by [name of institution].</li></ul> <p>2.2        The policy further covers the following seven elements of the security program</p>	

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

POLICY	CROSS REFERENCE
<p>of <i>[name of institution]</i>:</p> <ul style="list-style-type: none"><li>• Security organization</li><li>• Security administration</li><li>• Information security</li><li>• Physical security</li><li>• Personnel security</li><li>• Information and Communication Technology (ICT) security</li><li>• Business Continuity Planning (BCP).</li></ul> <p>3.    <b>LEGISLATIVE AND REGULATORY REQUIREMENTS</b></p> <p>3.1    This policy is informed by and complies with applicable national legislation, national security policies and national security standards. A list of applicable regulatory documents in this regard has been attached at Annex A.</p> <p>4.    <b>POLICY STATEMENT</b></p> <p>4.1    <b>General</b></p> <ul style="list-style-type: none"><li>• Employees of <i>[name of institution]</i> must be protected against identified threats according to baseline security requirements and continuous security risk management.</li><li>• Information and assets of <i>[name of institution]</i> must be protected according to baseline security requirements and continuous security risk management.</li><li>• Continued delivery of services of <i>[name of institution]</i> must be assured through baseline security requirements, including business continuity planning, and continuous security risk management.</li></ul> <p>4.2    <b>Compliance requirements</b></p> <p>4.2.1    All individuals mentioned in par. 2 above must comply with the baseline requirements of this policy and its associated Security Directives as contained in the Security Plan of <i>[name of institution]</i>. These requirements are/shall be based on integrated security Threat and Risk Assessments (TRA's) to the national interest as well as employees, information and assets of <i>[name of institution]</i>. The necessity of security measures above baseline levels will also be determined by the continual updating of the security TRA's.</p> <p>4.2.2    Security threat and risk assessments involve:</p> <ul style="list-style-type: none"><li>• establishing the scope of the assessment and identifying the information, employees and assets to be protected;</li><li>• determining the threats to information, employees and assets of <i>[name of institution]</i> and assessing the probability and impact of threat occurrence;</li><li>• assessing the risk based on the adequacy of existing security measures and vulnerabilities;</li><li>• implementing any supplementary security measures that will reduce the risk to an acceptable level.</li></ul>	

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<p>4.2.3 <b>Staff accountability and acceptable use of assets</b></p> <p>4.2.3.1 The HOD/CEO of [name of institution] shall ensure that information and assets of [name of institution] are used in accordance with procedures as stipulated in the Security Directives as contained in the Security Plan of [name of institution].</p> <p>4.2.3.2 All employees of [name of institution] shall be accountable for the proper utilization and protection of such information and assets. Employees that misuse or abuse assets of [name of institution] shall be held accountable therefore and disciplinary action shall be taken against any such employee.</p> <p>4.3 <b>Specific baseline requirements</b></p> <p>4.3.1 <b>Security organization</b></p> <p>4.3.1.1 The HOD/CEO of [name of institution] will appoint/ has appointed a Security Manager (SM) to establish and direct a security program that ensures co-ordination of all policy functions and implementation of policy requirements.</p> <p>4.3.1.2 Given the importance of this role, a SM with sufficient security experience and training who is strategically positioned within the [name of institution] so as to provide institution-wide strategic advice and guidance to senior management, has been/will be appointed.</p> <p>4.3.1.3 The HOD/CEO of [name of institution] will ensure that the SM has an effective support structure (security component) to fulfill the functions referred to in par. 4.3.2 below.</p> <p>4.3.1.4 Individuals that will be appointed in the support structure of the SM will all be security professionals with sufficient security experience and training to effectively cope with their respective job functions.</p> <p>4.3.2 <b>Security administration</b></p> <p>4.3.2.1 The functions referred to in par. 4.3.1 above include:</p> <ul style="list-style-type: none"> <li>• general security administration (departmental directives and procedures, training and awareness, security risk management, security audits, sharing of information and assets);</li> <li>• setting of access limitations;</li> <li>• administration of security screening;</li> <li>• implementing physical security;</li> <li>• ensuring the protection of employees;</li> <li>• ensuring the protection of information;</li> <li>• ensuring ICT security;</li> <li>• ensuring security in emergency and increased threat situations;</li> <li>• facilitating business continuity planning;</li> <li>• ensuring security in contracting; and</li> <li>• facilitating security breach reporting and investigations.</li> </ul>	<p>See Disciplinary Code</p> <p>See organizational diagram of security component (in Security Plan)</p> <p>See detail functions in Security Component SOP's in Security Plan</p>

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<p><b>4.3.2.2 Security incident/breaches reporting process</b></p> <p>4.3.2.2.1 Whenever an employee of [name of institution] becomes aware of an incident that might constitute a security breach or an unauthorized disclosure of information (whether accidentally or intentionally), he/she shall report that to the SM of [name of institution] by utilizing the formal reporting procedure prescribed in the Security Breach Directive of [name of institution].</p> <p>4.3.2.2.2 The HOD/CEO of [name of institution] shall report to the appropriate authority (as indicated in the Security Breach Directive of [name of institution]) all cases or suspected cases of security breaches, for investigation.</p> <p>4.3.2.2.3 The SM of [name of institution] shall ensure that all employees are informed about the procedure for reporting security breaches.</p> <p><b>4.3.2.3 Security incident/breaches response process</b></p> <p>4.3.2.3.1 The SM shall develop and implement security breach response mechanisms for [name of institution] in order to address all security breaches/alleged breaches which are reported.</p> <p>4.3.2.3.2 The SM shall ensure that the HOD/CEO of [name of institution] is advised of such incidents as soon as possible.</p> <p>4.3.2.3.3 It shall be the responsibility of the National Intelligence Structures (e.g. NIA or SAPS) to conduct an investigation on reported security breaches and provide feedback with recommendation to [name of institution].</p> <p>4.3.2.3.4 Access privileges to classified information, assets and/or to premises may be suspended by the HOD/CEO of [name of institution] until administrative, disciplinary and/or criminal processes have been concluded, flowing from investigations into security breaches or alleged security breaches.</p> <p>4.3.2.3.5 The end result of these investigations, disciplinary action or criminal prosecutions may be taken into consideration by the HOD/CEO of [name of institution] in determining whether to restore, or limit, the security access privileges of an individual or whether to revoke or alter the security clearance of the individual.</p> <p><b>4.3.3 Information security</b></p> <p><b>4.3.3.1 Categorization of information and information classification system</b></p> <p>4.3.3.2 The SM must ensure that a comprehensive information classification system is developed for and implemented in [name of institution]. All sensitive information produced or processed by [name of institution] must be identified, categorized and classified according to the origin of its source and contents and according to its sensitivity to loss or disclosure.</p> <p>4.3.3.3 All sensitive Information must be categorized into one of the following</p>	<p>See Security Directive: Reporting of Security Breaches</p> <p>See Security Directive: Security Breaches Response Process</p> <p>See Security Directive: Information Classification Process</p>

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

POLICY	CROSS REFERENCE
<p>categories:</p> <ul style="list-style-type: none"> <li>• State Secret;</li> <li>• Trade Secret; and</li> <li>• Personal Information</li> </ul> <p>and subsequently classified according to its level of sensitivity by using one of the recognised levels of classification:</p> <ul style="list-style-type: none"> <li>• Confidential;</li> <li>• Secret; and</li> <li>• Top Secret.</li> </ul> <p>4.3.3.4 Employees of [name of institution] who generate sensitive information are responsible for determining information classification levels and the classification thereof, subject to management review. This responsibility includes the labelling of classified documents.</p> <p>4.3.3.5 The classification assigned to documents must be strictly adhered to and the prescribed security measures to protect such documents must be applied at all times.</p> <p>4.3.3.6 Access to classified information will be determined by the following principles:</p> <ul style="list-style-type: none"> <li>• intrinsic secrecy approach;</li> <li>• need-to-know;</li> <li>• level of security clearance.</li> </ul> <p>4.3.4 <b>Physical Security</b></p> <p>4.3.4.1 Physical security involves the proper layout and design of facilities of [name of institution] and the use of physical security measures to delay and prevent unauthorized access to assets of [name of institution]. It includes measures to detect attempted or actual unauthorized access and the activation of an appropriate response. Physical security also includes the provision of measures to protect employees from bodily harm.</p> <p>4.3.4.2 Physical security measures must be developed, implemented and maintained in order to ensure that the entire [name of institution], its personnel, property and information are secured. These security measures shall be based on the findings of the Threat and Risk Assessment (TRA) to be conducted by the SM.</p> <p>4.3.4.3 The [name of institution] shall ensure that physical security is fully integrated early in the process of planning, selecting, designing and modifying of its facilities. The [name of institution] shall:</p> <ul style="list-style-type: none"> <li>• select, design and modify facilities in order to facilitate the effective control of access thereto;</li> <li>• demarcate restricted access areas and have the necessary entry barriers, security systems and equipment to effectively control access thereto;</li> <li>• include the necessary security specifications in planning, request for proposals and tender documentation;</li> </ul>	<p>See Security Directive: Protection of Information: General requirements</p> <p>See Security Directive: Physical Security</p>



SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<ul style="list-style-type: none"> <li>incorporate related costs in funding requirements for the implementation of the above.</li> </ul>	See Security Directive: Protection of Information: General requirements
4.3.4.4 [name of institution] will also ensure the implementation of appropriate physical security measures for the secure storage, transmittal and disposal of classified and protected information in all forms.	
4.3.4.5 All employees are required to comply with access control procedures of [name of institution] at all times. This includes the producing of ID Cards upon entering any sites of [name of institution], the display thereof whilst on the premises and the escorting of official visitors.	See Security Directive: Access Control
<b>4.3.5 Personnel Security</b>	
<b>4.3.5.1 Security Screening</b>	See Security Directive: Security Screening
4.3.5.1.1 All employees, contractors and consultants of [name of institution], who requires access to classified information and critical assets in order to perform his/her duties or functions, must be subjected to a security screening investigation conducted by the National Intelligence Agency (NIA) in order to be granted a security clearance at the appropriate level.	
4.3.5.1.2 The level of security clearance given to a person will be determined by the content of or access to classified information entailed by the post already occupied or to be occupied in accordance with their respective responsibilities and accountability.	
4.3.5.1.3 A security clearance provides access to classified information subject to the need-to-know principle.	
4.3.5.1.4 A declaration of secrecy shall be signed by every individual issued with a security clearance to complement the entire security screening process. This will remain valid even after the individual has terminated his/her services with [name of institution].	
4.3.5.1.5 A security clearance will be valid for a period of ten years in respect of the Confidential level and five years for Secret and Top Secret. This does not preclude re-screening on a more frequent basis as determined by the HOD/CEO of [name of institution], based on information which impact negatively on an individual's security competence.	
4.3.5.1.6 Security clearances in respect of all individuals who have terminated their services with [name of institution], shall be immediately withdrawn.	
<b>4.3.5.2 Polygraph examination</b>	
4.3.5.2.1 A polygraph examination shall be utilized to provide support to the security screening process. All employees subjected to a Top Secret security clearance will also be subjected to a polygraph examination. The polygraph shall only be used to determine the reliability of the information gathered during the security screening investigation and does not imply any suspicion or risk on the part of the applicant.	

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## POLICY

## CROSS REFERENCE

4.3.5.2.2 In the event of any negative information being obtained with regard to the applicant during the security screening investigation (all levels), the applicant shall be given an opportunity to prove his/her honesty and/or innocence by making use of the polygraph examination. Refusal by the applicant to undergo the examination does not necessarily signify that a security clearance will not be granted.

### 4.3.5.3 Transferability of security clearances

4.3.5.3.1 A security clearance issued in respect of an official from other government institutions shall not be automatically transferable to the [name of institution]. The responsibility for deciding whether the official should be re-screened rests with the HOD/CEO of [name of institution].

### 4.3.5.4 Security Awareness and Training

4.3.5.4.1 A security training and awareness program must be/has been developed by the SM and implemented to effectively ensure that all personnel and service providers of [name of institution] remain security conscious.

4.3.5.4.2 All employees shall be subjected to the security awareness and training programs and must certify that the contents of the programs(s) has been understood and will be complied with. The program must cover/covers training with regard to specific security responsibilities and sensitize employees and relevant contractors and consultants about the security policy and security measures of [name of institution] and the need to protect sensitive information against disclosure, loss or destruction.

4.3.5.4.3 Periodic security awareness presentations, briefings and workshops will be conducted as well as posters and pamphlets frequently distributed in order to enhance the training and awareness program. Attendance of the above programs is compulsory for all employees identified and notified to attend the events.

4.3.5.4.4 Regular surveys and walkthrough inspections shall be conducted by the SM and members of the security component to monitor the effectiveness of the security training and awareness program.

### 4.3.6 Information and Communication Technology (ICT) Security

#### 4.3.6.1 IT Security

4.3.6.1.1 A secure network shall be established for [name of institution] in order to ensure that information systems are secured against rapidly evolving threats that have the potential to impact on their confidentiality, integrity, availability, intended use and value.

4.3.6.1.2 To prevent the compromise of IT systems, [name of institution] shall implement baseline security controls and any additional control identified through the security TRA. These controls, and the security roles and responsibilities of all personnel, shall be clearly defined, documented and communicated to all employees.

See Security Directive: Security Training and Awareness

See ICT Security Policy and Security Directive: ICT Security

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

POLICY	CROSS REFERENCE
<p>4.3.6.1.3 To ensure policy compliance, the IT Manager of <i>[name of institution]</i> shall:</p> <ul style="list-style-type: none"><li>certify that all it systems are secure after procurement, accredit IT systems prior to operation and comply with minimum security standards and directives;</li><li>conduct periodic security evaluations of systems, including assessments of configuration changes conducted on a routine basis;</li><li>periodically request assistance, review and audits from the National Intelligence Agency (NIA) in order to get an independent assessment.</li></ul> <p>4.3.6.1.4 Server rooms and other related security zones where IT equipment are kept shall be secured with adequate physical security measures and strict access control shall be enforced and monitored.</p> <p>4.3.6.1.5 Access to the resources on the network of <i>[name of institution]</i> shall be strictly controlled to prevent unauthorized access. Access to all computing and information systems and peripherals of <i>[name of institution]</i> shall be restricted unless explicitly authorized.</p> <p>4.3.6.1.6 System hardware, operating and application software, the network and communication systems of <i>[name of institution]</i> shall all be adequately configured and safeguarded against both physical attack and unauthorized network intrusion.</p> <p>4.3.6.1.7 All employees shall make use of IT systems of <i>[name of institution]</i> in an acceptable manner and for business purposes only. All employees shall comply with the IT Security Directives in this regard at all times.</p> <p>4.3.6.1.8 The selection of passwords, their use and management as a primary means to control access to systems is to strictly adhere to best practice guidelines as reflected in the IT Security Directives. In particular, passwords shall not be shared with any other person for any reason.</p> <p>4.3.6.1.9 To ensure the ongoing availability of critical services, <i>[name of institution]</i> shall develop IT continuity plans as part of its overall Business Continuity Planning (BCP) and recovery activities.</p> <p>4.3.6.2 <b>Internet access</b></p> <p>4.3.6.2.1 The IT manager of <i>[name of institution]</i>, having the overall responsibility for setting up Internet access for <i>[name of institution]</i>, shall ensure that the network of <i>[name of institution]</i> is safeguarded from malicious external intrusion by deploying, as a minimum, a configured firewall. Human Resources management shall ensure that all personnel with Internet access (including e-mail) are aware of, and will comply with, an acceptable code of conduct in their usage of the Internet.</p> <p>4.3.6.2.2 The IT Manager of <i>[name of institution]</i> shall be responsible for controlling user access to the Internet, as well as for ensuring that users are aware of the threats, and trained in the safeguards, to reduce the risk of Information Security breaches and incidents.</p>	<p>See BCP</p> <p>See Security Directive: ICT Security</p>

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

POLICY

CROSS REFERENCE

4.3.6.2.3 Incoming e-mail must be treated with the utmost care due to its inherent Information Security risks. The opening of e-mail with file attachments is not permitted unless such attachments have already been scanned for possible computer viruses or other malicious code.

4.3.6.3 Use of laptop computers

4.3.6.3.1 Usage of laptop computers by employees of [name of institution] is restricted to business purposes only, and users shall be aware of, and accept the terms and conditions of use, especially the responsibility for the security of information held on such devices.

4.3.6.3.2 The information stored on a laptop computer of [name of institution] shall be suitably protected at all times, in line with the protection measures prescribed in the IT Security Directive.

4.3.6.3.3 Employees shall also be responsible for implementing the appropriate security measures for the physical protection of laptop computers at all times, in line with the protection measures prescribed in the IT Security Directive.

4.3.6.4 Communication security

4.3.6.4.1 The application of appropriate security measures shall be instituted in order to protect all sensitive and confidential communication of [name of institution] in all its forms and at all times.

4.3.6.4.2 All sensitive electronic communications by employees, contractors or employees of [name of institution] must be encrypted in accordance with COMSEC standards and the Communication Security Directive of [name of institution]. Encryption devices shall only be purchased from COMSEC and will not be purchased from commercial suppliers.

4.3.6.4.3 Access to communication security equipment of [name of institution] and the handling of information transmitted and/or received by such equipment, shall be restricted to authorized personnel only (personnel with a Top Secret Clearance who successfully completed the COMSEC Course).

4.3.6.5 Technical surveillance counter measures (TSCM)

4.3.6.5.1 All offices, meeting, conference and boardroom venues of [name of institution] where sensitive and classified matters are discussed on a regular basis shall be identified and shall be subjected to proper and effective physical security and access control measures. Periodic electronic Technical Surveillance Counter Measures (sweeping) will be conducted by NIA to ensure that these areas are kept sterile and secure.

4.3.6.5.2 The SM of [name of institution] shall ensure that areas that are utilized for discussions of a sensitive nature as well as offices or rooms that house electronic communications equipment, are physically secured in accordance with the standards laid down by NIA in order to support the sterility of the environment after a TSCM examination, before any request for a TSCM examination is submitted.

See Security Directive: ICT Security

See Security Directive: ICT Security

See Security Directive: Secure Discussion Areas

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
4.3.6.5.3 No unauthorized electronic devices shall be allowed in any boardrooms and conference facilities where sensitive information of [name of institution] is discussed. Authorization must be obtained from the SM.	
4.3.7 <b>Business Continuity Planning (BCP)</b>	
4.3.7.1 The SM of [name of institution] must establish a Business Continuity Plan (BCP) to provide for the continued availability of critical services, information and assets if a threat materializes and to provide for appropriate steps and procedures to respond to an emergency situation to ensure the safety of employees, contractors, consultants and visitors.	See BCP
4.3.7.2 The BCP shall be periodically tested to ensure that the management and employees of [name of institution] understand how it is to be executed.	
4.3.7.3 All employees of [name of institution] shall be made aware and trained on the content of the BCP to ensure understanding of their own respective roles in terms thereof.	
4.3.7.4 The Business Continuity Plan shall be kept up to date and re-tested periodically by the SM.	
5. <b>SPECIFIC RESPONSIBILITIES</b>	
5.1 <b>Head of Institution</b>	
5.1.1 The HOD/CEO of [name of institution] bears the overall responsibility for implementing and enforcing the security program of [name of institution]. Towards the execution of this responsibility, the HOD/CEO shall: <ul style="list-style-type: none"> <li>• establish the post of the SM and appoint a well trained and competent security official in the post;</li> <li>• establish a security committee for the institution and ensure the participation of all senior management members of all the core business functions of [name of institution] in the activities of the committee;</li> <li>• approve and ensure compliance with this policy and its associated Security Directives by all it is applicable to.</li> </ul>	See Security Plan for more detail
5.2 <b>Security Manager</b>	
5.2.1 The delegated security responsibility lies with the SM of [name of institution] who will be responsible for the execution of the entire security function and program within [name of institution] (coordination, planning, implementing, controlling, etc). Towards execution of his/her responsibilities, the SM shall, amongst others,; <ul style="list-style-type: none"> <li>• chair the security committee of [name of institution];</li> <li>• draft the internal Security Policy and Security Plan (containing the specific and detailed Security Directives) of [name of institution] in conjunction with the security committee;</li> <li>• review the Security Policy and Security Plan at regular intervals;</li> </ul>	See Security Plan for more detail

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<ul style="list-style-type: none"> <li>• conduct a security TRA of [name of institution] with the assistance of the security committee;</li> <li>• advise management on the security implications of management decisions;</li> <li>• implement a security awareness program;</li> <li>• conduct internal compliance audits and inspections at [name of institution] at regular intervals;</li> <li>• establish a good working relationship with both NIA and SAPS and liaise with these institutions on a regular basis.</li> </ul>	<p>See Security Plan for more detail</p>
<p><b>5.3 Security Committee</b></p>	
<p>5.3.1 The Security Committee referred to in par. 5.1.1 above shall consist of senior managers of [name of institution] representing all the main business units of [name of institution].</p>	
<p>5.3.2 Participation in the activities of the Security Committee by the appointed representatives of business units of [name of institution] shall be compulsory.</p>	
<p>5.3.3 The Security Committee of the [name of institution] shall be responsible for, amongst others,:</p> <ul style="list-style-type: none"> <li>• assisting the SM in the execution of all security related responsibilities at [name of institution], including completing tasks such as drafting/reviewing of the Security Policy and Plan, conducting of a security TRA, conducting of security audits, drafting of a BCP and assisting with security awareness and training.</li> </ul>	
<p><b>5.4 Line Management</b></p>	
<p>5.4.1 All managers of [name of institution] shall ensure that their subordinates comply with this policy and the Security Directives as contained in the Security Plan of [name of institution] at all times.</p>	
<p>5.4.2 Managers must ensure that appropriate measures are implemented and steps are taken immediately to rectify any non-compliance issues that may come to their attention. This includes the taking of disciplinary action against employees if warranted.</p>	
<p><b>5.5 Employees, Consultants, Contractors and other Service Providers</b></p>	
<p>5.5.1 Every employee, consultant, contractor and other service providers of [name of institution] shall know what their security responsibilities are, accept it as part of their normal job function, and not only cooperate, but contribute to improving and maintaining security at [name of institution] at all times.</p>	
<p><b>6. AUDIENCE</b></p>	<p>See Security Plan for more detail</p>
<p>6.1 This Policy is applicable to all members of the management, employees, consultants, contractors and any other service providers of [name of institution]. It is further applicable to all visitors and members of the public visiting premises of or may officially interact with [name of institution].</p>	

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE	
<p>7.       <b>ENFORCEMENT</b></p> <p>7.1       The HOD/CEO of [name of institution] and the appointed SM are accountable for the enforcement of this policy.</p> <p>7.2       All employees of [name of institution] are required to fully comply with this policy and its associated Security Directives as contained in the Security Plan. Non-compliance with any prescripts shall be addressed in terms of the Disciplinary Code/Regulations of [name of institution].</p> <p>7.3       Prescripts to ensure compliance to this policy and the Security Directives by all consultants, contractors or service providers of [name of institution] shall be included in the contracts signed with such individuals/institutions/companies. The consequences of any transgression/deviation or non-compliance shall be clearly stipulated in said contracts and shall be strictly enforced. Such consequences may include the payment of prescribed penalties or termination of the contract, depending on the nature of any non-compliance.</p>	<p>See Disciplinary Code</p>	
<p>8.       <b>EXCEPTIONS</b></p> <p>8.1       Deviations from this policy and its associated Security Directives will only be permitted in the following circumstances:</p> <ul style="list-style-type: none"><li>• when security must be breached in order to save or protect the lives of people;</li><li>• during unavoidable emergency circumstances e.g. natural disasters;</li><li>• on written permission of the HOD/CEO of [name of institution] (reasons for allowing non-compliance to one or more aspects of the policy and directives shall be clearly stated in such permission; no blanket non-compliance shall be allowed under any circumstances).</li></ul>		<p>See OHS Policy and Directives</p>
<p>9.       <b>OTHER CONSIDERATIONS</b></p> <p>9.1       The following shall be taken into consideration when implementing this policy:</p> <p>9.1.1      Occupational Health and Safety issues in the [name of institution].</p> <p>9.1.2      Disaster management at [name of institution].</p> <p>9.1.3      Disabled persons shall not be inconvenienced by physical security measures and must be catered for in such a manner that they have access without compromising security or the integrity of this policy.</p> <p>9.1.4      Environmental issues as prescribed and regulated in relevant legislation (e.g. when implementing physical security measures that may impact on the environment).</p>		
<p>10.      <b>COMMUNICATING THE POLICY</b></p> <p>10.1      The SM of [name of institution] shall ensure that the content of this policy (or applicable aspects thereof) is communicated to all employees, consultants.</p>		

SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<p>contractors, service providers, clients, visitors, members of the public that may officially interact with <i>[name of institution]</i>. The SM will further ensure that all security policy and directive prescriptions are enforced and complied with.</p>	
<p>10.2 The SM must ensure that a comprehensive security awareness program is developed and implemented within <i>[name of institution]</i> to facilitate the above said communication. Communication of the policy by means of this program shall be conducted as follows:</p> <ul style="list-style-type: none"> <li>• awareness workshops and briefings to be attended by all employees;</li> <li>• distribution of memos and circulars to all employees;</li> <li>• access to the policy and applicable directives on the intranet of <i>[name of institution]</i>.</li> </ul>	<p>See Security Directive: Security Training and Awareness</p>
<p><b>11. REVIEW AND UPDATE PROCESS</b></p>	
<p>11.1 The SM, assisted by the Security Committee of <i>[name of institution]</i>, must ensure that this policy and its associated Security Directives is reviewed and updated on an annual basis. Amendments shall be made to the policy and directives as the need arise.</p>	
<p><b>12. IMPLEMENTATION</b></p>	
<p>12.1 The SM of <i>[name of institution]</i> must manage the implementation process of this policy and its associated Security Directives (contained in the Security Plan) by means of an action plan (also to be included in the Security Plan of <i>[name of institution]</i>).</p>	
<p>12.2 Implementation of the policy and its associated Security Directives is the responsibility of each and every individual this policy is applicable too (see par. 2.1 above).</p>	
<p><b>13. MONITORING OF COMPLIANCE</b></p>	
<p>13.1 The SM, with the assistance of the security component and security committee of <i>[name of institution]</i> must ensure compliance with this policy and it's associated Security Directives by means of conducting internal security audits and inspections on a frequent basis.</p>	
<p>13.2 The findings of said audits and inspections shall be reported to the HOD/CEO of <i>[name of institution]</i> forthwith after completion thereof.</p>	
<p><b>14. DISCIPLINARY ACTION</b></p>	
<p>14.1 Non-compliance with this policy and its associated Security Directives shall result in disciplinary action which may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• re-training;</li> <li>• verbal and written warnings;</li> <li>• termination of contracts in the case of contractors or consultants delivering a service to <i>[name of institution]</i>;</li> <li>• dismissal;</li> <li>• suspension;</li> </ul>	<p>See Disciplinary Code</p>



SECURITY POLICY: [NAME OF INSTITUTION]	Revision No.	Revision Date
--	--------------	---------------

POLICY	CROSS REFERENCE
<ul style="list-style-type: none"><li>loss of <i>[name of institution]</i> information and asset resources access privileges.</li></ul> <p>14.2 Any disciplinary action taken in terms of non compliance with this policy and its associated directives will be in accordance with the disciplinary code/directive of <i>[name of institution]</i>.</p>	

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## ANNEX A    APPLICABLE LEGISLATION AND OTHER REGULATORY FRAMEWORK DOCUMENTS

### Applicable legislation

- Constitution of the Republic of South Africa, 1996 (Act 106 of 1996)
- Protection of Information Act, 1982 (Act no 84 of 1982)
- Promotion of Access to Information Act, 2000 (Act no 2 of 2000)
- Promotion of Administrative Justice Act, 2000 (Act 3 of 2000)
- Copyright Act, 1978 (Act no 98 of 1978)
- National Archives of South Africa Act, 1996 (Act no 43 of 1996) and regulations
- Public Service Act, 1994 (Act no 103 of 1994) and regulations
- Occupational Health and Safety Act, 1993 (Act no 85 of 1993)
- Criminal Procedures Act, 1977, (Act 51 of 1977), as amended.
- Private Security Industry Regulations Act, 2001 (Act 56 of 2001)
- Control of Access to Public Premise and Vehicles Act, 1985 (Act 53 of 1985)
- National Key Points Act, 1980 (Act 102 of 1980)
- Trespass Act, 1959 (Act 6 of 1959)
- Electronic Communication and Transaction Act, 2002 (Act 25 of 2002)
- Electronic Communications Security (Pty) Ltd Act, 2002 (Act 68 of 2002)
- State Information Technology Agency Act, 1998 (Act 88 of 1998)
- Regulation of Interception of Communications and Provision of Communication-Related Information Act, 2002 (Act 70 of 2002)
- General Intelligence Law Amendment Act, 2000 (Act 66 of 2000)
- Intelligence Service Act, 2002 (Act 65 of 2002) and regulations
- National Strategic Intelligence Act, 1994 (Act 39 of 1994)
- Intelligence Services Control Act, 1994 (Act 40 of 1994)
- Labour Relations Act, 1995 (Act 66 of 1995)
- Employment Equity Act, 1998 (Act 55 of 1998)
- Occupational Health and Safety Act, 1993, (Act 83 of 1993).
- Fire-arms Control Act, 2000 (Act 60 of 2000) and regulations
- Non-Proliferation of Weapons of Mass Destruction Act, 1993 (Act 87 of 1993)
- Protection of Constitutional Democracy Against Terrorism and Related Activities Act, 2004 (Act 33 of 2004)
- National Building Regulations and Building Standards Act, 1977 (Act 103 of 1977)
- Protected Disclosures Act, 2000 (Act 26 of 2000)
- Intimidation Act, 1982 (Act 72 of 1982)
- Prevention and Combating of Corrupt Activities Act, 2004 (Act 12 of 2004)
- Public Finance Management Act, 1999 (Act 1 of 1999) and Treasury Regulations

### Other regulatory framework documents

- Minimum Information Security Standards (MISS), Second Edition March 1998
- White paper on Intelligence (1995)
- SACSA/090/1(4) Communication Security in the RSA
- NIA Guidance Documents: ICT Policy and Standards: Part 1 & 2
- ISO 17799
- National Building Regulations

(ADD ADDITIONAL/REMOVE AS REQUIRED)

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## ANNEX B    GLOSSARY AND DEFINITIONS

- “accreditation” means the official authorisation by management for the operation of an Information Technology (IT) system, and acceptance by that management of the associated residual risk. Accreditation is based on the certification process as well as other management considerations;
- “assets” means material and immaterial property of an institution. Assets include but are not limited to information in all forms and stored on any media, networks or systems, or materiel, real property, financial resources, employee trust, public confidence and international reputation;
- “availability” means the condition of being usable on demand to support operations, programmes and services;
- “business continuity planning” includes the development of plans, measures, procedures and arrangements to ensure minimal or no interruption of the availability of critical services and assets;
- “candidate” means an applicant, an employee, a contract employee or a person acting on behalf of a contract appointee or independent contractor;
- “certification” means the issuing of a certificate certifying that a comprehensive evaluation of the technical and non-technical security features of an Information and Communication Technology system (hereinafter referred to as an “ICT” system) and its related safeguards has been undertaken and that it was established that its design and implementation meets a specific set of security requirements;
- “COMSEC” means the organ of state known as Electronic Communications Security (Pty) Ltd, which was established in terms of section 2 of the Electronic Communications Security Act, 2002 (Act No. 68 of 2002) and, until such time as COMSEC becomes operational, the South African Communication Security Agency;
- “critical service” means a service identified by an institution as a critical service through a Threat and Risk Assessment and the compromise of which will endanger the effective functioning of the institution;
- “document” means -
  - any note or writing, whether produced by hand or by printing, typewriting or any other similar process, in either tangible or electronic format;
  - any copy, plan, picture, sketch or photographic or other representation of any place or article;
  - any disc, tape, card, perforated roll or other device in or on which sound or any signal has been recorded for reproduction;
- “information security” includes, but is not limited to, —
  - document security;
  - physical security measures for the protection of information;
  - information and communication technology security;
  - personnel security;
  - business continuity planning;
  - contingency planning;
  - security screening;
  - technical surveillance counter-measures;
  - dealing with information security breaches;
  - security investigations; and
  - administration and organization of the security function at organs of state;
- “National Intelligence Structures” means the National Intelligence Structures as defined in section 1 of the National Strategic Intelligence Act, Act 39 of 1994;
- “reliability check” means an investigation into the criminal record, credit record and past performance of an individual or private organ of state to determine his, her or its reliability;
- “risk” means the likelihood of a threat materialising by exploitation of a vulnerability;
- “screening investigator” means a staff member of a National Intelligence Structure designated by the head of the relevant National Intelligence Structure to conduct security clearance

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## ANNEX B    GLOSSARY AND DEFINITIONS

investigations;

- “security breach” means the negligent or intentional transgression of or failure to comply with security measures;
- “security clearance” means a certificate issued to a candidate after the successful completion of a security screening investigation, specifying the level of classified information to which the candidate may have access subject to the need to know;
- “site access clearance” means clearance required for access to installations critical to the national interest;
- “Technical Surveillance Countermeasures” (TSCM) means the process involved in the detection, localisation, identification and neutralisation of technical surveillance of an individual, an organ of state, facility or vehicle;
- “technical / electronic surveillance” means the interception or monitoring of sensitive or proprietary information or activities (also referred to as “bugging”);
- “threat” means any potential event or act, deliberate or accidental, that could cause injury to persons, compromise the integrity of information or could cause the loss or damage of assets;
- “Threat and Risk Assessment (TRA)” means, within the context of security risk management, the process through which it is determined when to avoid, reduce and accept risk, as well as how to diminish the potential impact of a threatening event;
- “vulnerability” means a deficiency related to security that could permit a threat to materialise.

(ADD ADDITIONAL/REMOVE AS REQUIRED)

SECURITY POLICY: [NAME OF INSTITUTION]

Revision No.

Revision Date

## ANNEX C    SUPPORTING DOCUMENTS

- Security Plan containing the following:
  - Security Component Organizational Structure
  - Security Component SOP's
  - Specific Responsibilities of Key Role Players
  - Security Directive: Reporting of Security Breaches
  - Security Directive: Security Breaches Response Procedures
  - Security Directive: Information Security: General Responsibilities
  - Security Directive: Classification System
  - Security Directive: Security Screening
  - Security Directive: Physical Security
  - Security Directive: Access Control
  - Security Directive: ICT Security
  - Security Directive: Secure Discussion Areas
  - Security Directive: TRA
  - Security Directive: Security Audits and Inspections
- ICT Security Policy
- BCP
- OHS Policy
- Disciplinary Code

(ADD ADDITIONAL AS REQUIRED)

M vd Merwe  
G Mulder  
March 2007  
Updated: September 2009