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| **Case Title** |
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| **I) Please provide details of the incident:** |
| * Date of incident occurrence: * Date of self-discovery / notification to organisation: * How was the incident discovered and/or how were we notified of the incident?  |  | | --- | |  |  * Date of data breach confirmed: (to be completed by Data Risk / Privacy Compliance) * The table below provides the chronology of the event:  |  |  | | --- | --- | |  |  | |  |  | |  |  | |  |  | |  |  | |
| **II) What was the cause/suspected cause of the incident (including any key control deficiencies)? (Human / System / Other)** |
| * Root cause category: Human / System / Cyber / Theft / Others * Root cause analysis: * Key control deficiencies: |
| **III) Expected impact of the incident** (Please complete the appropriate sub-sections where appropriate) |
| **(A) Personal Data** (Please tick where applicable) |
| * What is the number of individuals impacted? * What personal data was impacted (state number of occurrence for each data field)? * What other organization was impacted? |
| **(B) Critical (non-personal) Data** (Please tick where applicable) |
| * What critical data was impacted? * What other organization was impacted? |
| **IV) What immediate action was taken to minimize the impact for this incident (action taken for recovery)?** |
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| **V) What were the actions taken to ensure no repeat of this incident (Controls implemented to prevent future occurrences)?** |
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| **VI) MetricStream Loss Event ID (mandatory)** |
| * ILS |
| **VII) MetricStream Issue ID (where applicable)** |
| * ISS |