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## Security techniques — Extension to ISO/IEC 27001 and ISO/IEC 27002 for privacy information management — Requirements and guidelines

*Techniques de sécurité — Extension d'ISO/IEC 27001 et ISO/IEC 27002 au management de la protection de la vie privée — Exigences et lignes directrices*

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## Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

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The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

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ISO/IEC 27552 was prepared by Technical Committee ISO/TC JTC1, *Information technology*, Subcommittee SC 27, *Security techniques*.

This second/third/... edition cancels and replaces the first/second/... edition (), [clause(s) / subclause(s) / table(s) / figure(s) / annex(es)] of which [has / have] been technically revised.

## 0 Introduction

### 0.1 General

Almost every organization processes Personally Identifiable Information (PII). Further, the quantity and types of PII processed is increasing, as is the number of situations where an organization needs to cooperate with other organizations regarding the processing of PII. Protection of privacy in the context of the processing of PII is a societal need, as well as the topic of dedicated laws and regulations all over the world.

The Information Security Management System (ISMS) defined in ISO IEC 27001 was designed to permit the addition of sector specific requirements, without the need to develop a new Management System. ISO Management System standards, including those that are sector specific, are designed to be able to be implemented either separately or as a combined Management System.

This document defines additional requirements and provides guidance for the protection of privacy as potentially affected by the processing of PII, enabling the organizations' overall Management System to be extended to cover both the general requirements for information security (an Information Security Management System (ISMS)) and the more specific requirements for PII protection, both together constituting a Privacy Information Management System (PIMS). These additional requirements and guidance are written in such a way that they are practically usable for PII protection by organizations of all sizes and cultural environments.

Requirements and guidance for PII protection vary depending upon the context of the organization, in particular where national laws and regulations are applicable. ISO/IEC 27001 requires that this context be understood and taken into account. This document includes mapping to the privacy framework and principles defined in ISO/IEC 29100; also to ISO/IEC 27018, ISO/IEC 29151 and the EU General Data Protection Regulation. However these might need to be interpreted to take into account local laws and regulations.

This document can be used by PII controllers (including those that are joint PII controllers) and PII processors (including those using subcontracted PII processors and those processing PII as sub-contractors to PII processors).

An organization complying with the requirements in this document will generate documentary evidence of how it handles the processing of PII. Such evidence can be used to facilitate agreements with business partners where the processing of PII is mutually relevant. This might also assist in relationships with other stakeholders. The use of this document in conjunction with ISO/IEC 27001 can, if desired, provide independent verification of this evidence, although compliance with this document cannot be taken as compliance with laws and regulations.

### 0.2 Compatibility with other management system standards

This document applies the framework developed by ISO to improve alignment amongst its International Standards for Management Systems.

This document enables an organization to align or integrate its PIMS with the requirements of other Management System standards.



# Security techniques — Extension to ISO/IEC 27001 and ISO/IEC 27002 for privacy information management — Requirements and guidelines

## 1 Scope

This document specifies requirements and provides guidance for establishing, implementing, maintaining and continually improving a Privacy Information Management System (PIMS) in the form of an extension to ISO/IEC 27001 and ISO/IEC 27002 for privacy management within the context of the organization.

In particular, this document specifies PIMS-related requirements and provides guidance for PII controllers and PII processors holding responsibility and accountability for PII processing.

This document is applicable to all types and sizes of organizations, including public and private companies, government entities and not-for-profit organizations, which are PII controllers and/or PII processors processing PII within an ISMS.

Excluding any of the requirements specified in Clause 5 of this document is not acceptable when an organization claims conformity to this document.

## 2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/IEC 27000:2018, *Information technology — Security techniques — Information security management systems — Overview and vocabulary*

ISO/IEC 27001:2013, *Information technology — Security techniques — Information security management systems — Requirements*

ISO/IEC 27002:2013, *Information technology — Security techniques — Code of practice for information security controls*

ISO/IEC 29100:2011, *Information technology — Security techniques — Privacy framework*

## 3 Terms, definitions and abbreviations

### 3.1 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO/IEC 27000 and ISO/IEC 29100 and the following apply.

#### 3.1.1

##### **joint PII controller**

two or more PII controllers that jointly determine the purposes and means of the processing of PII

**3.1.2**

**privacy information management system**

**PIMS**

information security management system which addresses the protection of privacy as potentially affected by the processing of PII

**3.2 Abbreviations**

For the purposes of this document, the following abbreviations apply:

ISMS Information Security Management System

PII Personally Identifiable Information

PIMS Privacy Information Management System

**3.3 Alternative terms**

The protection of PII is subject to laws and regulations in many jurisdictions. In some cases, those laws and regulations use terminology which has both similarities and differences to the terminology used in this document.

The mapping between the terminology used in this document and that used in some laws and regulations is shown in Annex F.

**4 General**

**4.1 Structure of this document**

This is a sector-specific document related to ISO/IEC 27001:2013 and to ISO/IEC 27002:2013.

This document focuses on PIMS-specific requirements. Compliance with this document is based on adherence to these requirements and with the requirements in ISO/IEC 27001:2013. This document extends the requirements of ISO/IEC 27001:2013 to take into account, in addition to information security, the protection of privacy of PII principals as potentially affected by the processing of PII. For a better understanding, implementation guidance and other information regarding the requirements is included.

PIMS-specific requirements and other information regarding the information security requirements in ISO/IEC 27001 appropriate to an organization acting as either a PII controller or a PII processor are given in Clause 5.

NOTE 1 For completeness, clause 5 of this document contains a sub-clause for each of the clauses containing requirements in ISO/IEC 27001:2013, even in cases where there are no PIMS-specific requirements or other information.

PIMS-specific guidance and other information regarding the information security controls in ISO/IEC 27002 and PIMS-specific guidance for an organization acting as either a PII controller or a PII processor are given in Clause 6.

NOTE 2 For completeness, clause 6 of this document contains a sub-clause for each of the clauses containing objectives or controls in ISO/IEC 27002:2013, even in cases where there is no PIMS-specific guidance or other information.

Additional ISO/IEC 27002 guidance for PII controllers is given in Clause 7, and additional ISO/IEC 27002 guidance for PII processors is given in Clause 8.

The PIMS specific control objectives and controls for an organization acting as a PII controller are listed in Annex A (whether it employs a PII processor or not, and whether acting jointly with another PII controller or not).

The PIMS specific control objectives and controls for an organization acting as a PII processor are listed in Annex B (whether it subcontracts the processing of PII to a separate PII processor or not).

Annex C contains a mapping of the controls in this document to the European Union General Data Protection Regulation.

Annex D of this document contains a mapping to ISO/IEC 29100, and Annex E contains a mapping to ISO/IEC 27018 and ISO/IEC 29151.

Annex F contains a list of some of the terms used in this document and alternative terms used in specific jurisdictions.

Annex G contains explanatory text on how ISO IEC 27001 and ISO/IEC 27002 are extended to the protection of privacy when processing PII.”

## 4.2 Application of ISO/IEC 27001:2013 requirements

Table 1 gives the location of PIMS-specific requirements in this document in relation to ISO/IEC 27001.

**Table 1 — Location of PIMS-specific requirements and other information for implementing controls in ISO/IEC 27001:2013**

Clause number in ISO/IEC 27001:2013	Title	Sub-clause number in this document	Remarks
4	Context of the organization	5.2	Additional requirements
5	Leadership	5.3	No PIMS-specific requirements
6	Planning	5.4	Additional requirements
7	Support	5.5	No PIMS-specific requirements
8	Operation	5.6	No PIMS-specific requirements
9	Performance evaluation	5.7	No PIMS-specific requirements
10	Improvement	5.8	No PIMS-specific requirements

NOTE No PIMS-specific requirements, but extended interpretation of “information security” according to 5.1.

## 4.3 Application of ISO/IEC 27002:2013 guidelines

Table 2 gives the location of PIMS-specific guidance in this document in relation to ISO/IEC 27002.

**Table 2 — Location of PIMS-specific guidance and other information for implementing controls in ISO/IEC 27002:2013**

Clause number in ISO/IEC 27002:2013	Title	Clause number in this document	Remarks
5	Information security policies	6.2	Additional guidance
6	Organization of information security	6.3	Additional guidance

7	Human resource security	6.4	Additional guidance
8	Asset management	6.5	Additional guidance
9	Access control	6.6	Additional guidance
10	Cryptography	6.7	Additional guidance
11	Physical and environmental security	6.8	Additional guidance
12	Operations security	6.9	Additional guidance
13	Communications security	6.10	Additional guidance
14	System acquisition, development and maintenance	6.11	Additional guidance
15	Supplier relationships	6.12	Additional guidance
16	Information security incident management	6.13	Additional guidance
17	Information security aspects of business continuity management	6.14	No PIMS-specific guidance
18	Compliance	6.15	Additional guidance

NOTE No PIMS-specific guidance, but extended interpretation of “information security” according to 6.1.

#### 4.4 Customer

Depending on the role of the organization (see 5.2.1 Understanding the organization and its context), "customer" can be understood as either:

a) an organization who has a contract with a PII controller (e.g., the customer of the PII controller);

NOTE 1 This can be the case of an organization which is a joint controller.

NOTE 2 An individual person in a business to consumer relationship with an organization is referred to as a 'PII principal' in this document.

b) a PII controller who has a contract with a PII processor (e.g., the customer of the PII processor); or

c) a PII processor who has a contract with a PII sub-processor (e.g., the customer of the PII sub-processor).

NOTE 3 Where “customer” is referred to in clause 6, the related provisions can be applicable in contexts a), b), or c).

NOTE 4 Where “customer” is referred to in clause 7 and Annex A, the relation provisions is applicable in context a).

NOTE 5 Where “customer” is referred to in clause 8 and Annex B, the relation provisions can be applicable in contexts b) and/or c).

## **5 PIMS-specific requirements related to ISO/IEC 27001**

### **5.1 General**

The requirements of ISO/IEC 27001:2013 mentioning "information security" shall be extended to the protection of privacy as potentially affected by the processing of PII.

NOTE In practice, where "information security" is used in ISO/IEC 27001:2013, "information security and privacy" applies instead (see Annex G).

### **5.2 Context of the organization**

#### **5.2.1 Understanding the organization and its context**

**A requirement additional to ISO/IEC 27001:2013, 4.1 is:**

The organization shall determine its role as a PII controller (including as a joint PII controller) and/or a PII processor.

The organization shall determine external and internal factors that are relevant to its context and that affect its ability to achieve the intended outcome(s) of its PIMS. For example, these can include:

- Applicable privacy legislation;
- Applicable regulations;
- Applicable judicial decisions;
- Applicable organizational context, governance, policies and procedures;
- Applicable administrative decisions;
- Applicable contractual requirements.

Where the organization acts in both roles (e.g. a PII controller and a PII processor), separate roles shall be determined, each of which is the subject of a separate set of controls.

NOTE The role of the organization can be different for each instance of the processing of PII, since it depends upon who determines the purposes and means of the processing.

#### **5.2.2 Understanding the needs and expectations of interested parties**

**A requirement additional to ISO/IEC 27001:2013, 4.2 is:**

The organization shall include amongst its interested parties (see ISO/IEC 27001:2013 4.2), those parties having interests or responsibilities associated with the processing of PII, including the PII principals.

NOTE 1 Other interested parties can include customers, supervisory authorities, other PII controllers, PII processors and their sub-contractors.

NOTE 2 Requirements relevant to the processing of PII could be determined by legal and regulatory requirements, by contractual obligations and by self-imposed organizational objectives. The privacy principles set out in ISO/IEC 29100 provide guidance concerning the processing of PII.

NOTE 3 As an element to demonstrate compliance to the organization's obligations, some interested parties can expect that the organization be in conformity with specific standards, such as the Management System specified in this document, and/or any relevant set of specifications. These parties can call for independently audited compliance to these standards.

#### **5.2.3 Determining the scope of the information security management system**

**A requirement additional to ISO/IEC 27001:2013, 4.3 is:**

402 When determining the scope of the PIMS, the organization shall include the processing of PII.

403 NOTE The determination of the scope of the PIMS can require revising the scope of the information security  
404 management system, because of the extended interpretation of “information security” according to 5.1.

#### 405 **5.2.4 Information security management system**

406 **A requirement additional to ISO/IEC 27001:2013, 4.4 is:**

407 The organization shall establish, implement, maintain and continually improve a PIMS in accordance with the  
408 requirements of ISO/IEC 27001 Clauses 4 to 10, extended by the requirements in Clause 5 of this document.

### 409 **5.3 Leadership**

#### 410 **5.3.1 Leadership and commitment**

411 The requirements stated in ISO/IEC 27001:2013, 5.1 along with the interpretation specified in 5.1 of this  
412 document, apply.

#### 413 **5.3.2 Policy**

414 The requirements stated in ISO/IEC 27001:2013, 5.2 along with the interpretation specified in 5.1 of this  
415 document, apply.

#### 416 **5.3.3 Organizational roles, responsibilities and authorities**

417 The requirements stated in ISO/IEC 27001:2013, 5.3 along with the interpretation specified in 5.1 of this  
418 document, apply.

### 419 **5.4 Planning**

#### 420 **5.4.1 Actions to address risks and opportunities**

##### 421 **5.4.1.1 General**

422 The requirements stated in ISO/IEC 27001:2013, 6.1.1 along with the interpretation specified in 5.1 of this  
423 document, apply.

##### 424 **5.4.1.2 Information security risk assessment**

425 The requirements stated in ISO/IEC 27001:2013, 6.1.2 apply with the following refinements:

426 **ISO/IEC 27001:2013, 6.1.2 c) 1) is refined as follows:**

427 The organization shall apply the information security risk assessment process(s) to identify risks associated  
428 with the loss of confidentiality, integrity and availability, within the scope of the PIMS.

429 The organization shall apply the privacy risk assessment process(s) to identify risks related to the processing  
430 of PII, within the scope of the PIMS.

431 The organization shall ensure throughout the risk assessment processes that the relationship between  
432 information security and PII protection is appropriately managed.

433 NOTE The organization can either apply an integrated information security and privacy risk assessment process or  
434 two separate ones for information security and the risks related to the processing of PII.

**ISO/IEC 27001:2013, 6.1.2 d) is refined as follows:**

The organization shall assess the potential consequences for both the organization and PII principals, that would result if the risks identified in 6.1.2.c) of ISO/IEC 27001:2013, as refined above, were to materialize.

#### **5.4.1.3 Information security risk treatment**

The requirements stated in ISO/IEC 27001:2013, 6.1.3 apply with the following additions:

**ISO/IEC 27001:2013, 6.1.3.c) is refined as follows:**

The controls determined in 6.1.3 b) of ISO/IEC 27001:2013 shall be compared with those in ISO/IEC 27001:2013, Annex A and/or Annex B of this document to verify that no necessary controls have been omitted.

When assessing the applicability of control objectives and controls from ISO/IEC 27001:2013 Annex A for the treatment of risks, the control objectives and controls shall be considered in the context of both risks to information security as well as risks related to the processing of PII, including risks to PII principals.

**ISO/IEC 27001:2013, 6.1.3.d) is refined as follows:**

Produce a Statement of Applicability that contains:

- the necessary controls (see ISO/IEC 27001:2013, 6.1.3 b) and c));
- justification for their inclusion;
- whether the necessary controls are implemented or not; and
- the justification for excluding any of the controls in ISO/IEC 27001:2013, Annex A and/or in B of this document according to the organization's determination of its role (see 5.2.1).

Not all the control objectives and controls listed in the Annexes need to be included in a PIMS implementation. Justification for exclusion may include where the controls are not deemed necessary by the risk assessment, or where they are not required by (or are subject to exceptions under) the laws and/or regulations applicable to the PII principal.

#### **5.4.2 Information security objectives and planning to achieve them**

The requirements stated in ISO/IEC 27001:2013, 6.2 along with the interpretation specified in 5.1 of this document, apply.

### **5.5 Support**

#### **5.5.1 Resources**

The requirements stated in ISO/IEC 27001:2013, 7.1 along with the interpretation specified in 5.1 of this document, apply.

#### **5.5.2 Competence**

The requirements stated in ISO/IEC 27001:2013, 7.2 along with the interpretation specified in 5.1 of this document, apply.

#### **5.5.3 Awareness**

The requirements stated in ISO/IEC 27001:2013, 7.3 along with the interpretation specified in 5.1 of this document, apply.

470 **5.5.4 Communication**

471 The requirements stated in ISO/IEC 27001:2013, 7.4 along with the interpretation specified in 5.1 of this  
472 document, apply.

473 **5.5.5 Documented information**

474 **5.5.5.1 General**

475 The requirements stated in ISO/IEC 27001:2013, 7.5.1 along with the interpretation specified in 5.1 of this  
476 document, apply.

477 **5.5.5.2 Creating and updating**

478 The requirements stated in ISO/IEC 27001:2013, 7.5.2 along with the interpretation specified in 5.1 of this  
479 document, apply.

480 **5.5.5.3 Control of documented information**

481 The requirements stated in ISO/IEC 27001:2013, 7.5.3 along with the interpretation specified in 5.1 of this  
482 document, apply.

483 **5.6 Operation**

484 **5.6.1 Operational planning and control**

485 The requirements stated in ISO/IEC 27001:2013, 8.1 along with the interpretation specified in 5.1 of this  
486 document, apply.

487 **5.6.2 Information security risk assessment**

488 The requirements stated in ISO/IEC 27001:2013, 8.2 along with the interpretation specified in 5.1 of this  
489 document, apply.

490 **5.6.3 Information security risk treatment**

491 The requirements stated in ISO/IEC 27001:2013, 8.3 along with the interpretation specified in 5.1 of this  
492 document, apply.

493 **5.7 Performance evaluation**

494 **5.7.1 Monitoring, measurement, analysis and evaluation**

495 The requirements stated in ISO/IEC 27001:2013, 9.1 along with the interpretation specified in 5.1 of this  
496 document, apply.

497 **5.7.2 Internal audit**

498 The requirements stated in ISO/IEC 27001:2013, 9.2 along with the interpretation specified in 5.1 of this  
499 document, apply.

500 **5.7.3 Management review**

501 The requirements stated in ISO/IEC 27001:2013, 9.3 along with the interpretation specified in 5.1 of this  
502 document, apply.



## 503 **5.8 Improvement**

### 504 **5.8.1 Nonconformity and corrective action**

505 The requirements stated in ISO/IEC 27001:2013, 10.1 along with the interpretation specified in 5.1 of this  
506 document, apply.

### 507 **5.8.2 Continual improvement**

508 The requirements stated in ISO/IEC 27001:2013, 10.2 along with the interpretation specified in 5.1 of this  
509 document, apply.

## 510 **6 PIMS-specific guidance related to ISO/IEC 27002**

### 511 **6.1 General**

512 The guidelines in ISO/IEC 27002:2013 mentioning "information security" should be extended to the protection  
513 of privacy as potentially affected by the processing of PII.

514 NOTE 1 In practice, where "information security" is used in ISO/IEC 27002:2013, "information security and privacy"  
515 applies instead (see Annex G).

516 All control objectives and controls should be considered in the context of both risks to information security as  
517 well as risks to privacy related to the processing of PII.

518 NOTE 2 Unless otherwise stated by the applicable jurisdiction or by specific provisions in Clause 6, the same guidance  
519 applies for PII controllers and PII processors.

### 520 **6.2 Information security policies**

#### 521 **6.2.1 Management direction for information security**

##### 522 **6.2.1.1 Policies for information security**

523 The control, implementation guidance and other information stated in ISO/IEC 27002:2013 and the following  
524 additional guidance applies:

525 **Additional implementation guidance for 5.1.1, Policies for information security, of ISO/IEC 27002:2013**  
526 **is:**

527 Either by the development of separate privacy policies, or by the augmentation of information security policies,  
528 the organization should produce a statement concerning support for and commitment to achieving compliance  
529 with applicable PII protection legislation and with the contractual terms agreed between the organization and  
530 its partners, its subcontractors and its applicable third parties (customers, suppliers etc.), which should clearly  
531 allocate responsibilities between them.

532 **Additional other information for control 5.1.1, Policies for information security, of ISO/IEC 27002:2013**  
533 **is:**

534 Any organization that processes PII, whether a PII controller or a PII processor, should consider applicable PII  
535 protection legislation and regulation during the development and maintenance of information security policies.

##### 536 **6.2.1.2 Review of the policies for information security**

537 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 5.1.2 applies:

## 6.3 Organization of information security

### 6.3.1 Internal organization

#### 6.3.1.1 Information security roles and responsibilities

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.1.1 and the following additional guidance applies:

#### **Additional implementation guidance for 6.1.1, Information security roles and responsibilities, of ISO/IEC 27002:2013 is:**

The organization should:

- designate a point of contact for use by the customer regarding the processing of PII. When the organization is a PII controller, designate a point of contact for PII principals regarding the processing of their PII (see 7.3.2);
- appoint one or more persons responsible for developing, implementing, maintaining and monitoring an organization-wide governance and privacy program, to ensure compliance with all applicable laws and regulations regarding the processing of PII.

The responsible person should, where appropriate:

- be independent and report directly to the appropriate management level of the organization in order to ensure effective management of privacy risks;
- be involved in the management of all issues which relate to the processing of PII;
- be expert in data protection law, regulation and practices;
- act as a contact point for supervisory authorities;
- inform top-level management and employees of the organization of their obligations with respect to the processing of PII;
- provide advice in respect of privacy impact assessments conducted by the organization.

NOTE Such a person is called a data protection officer in some jurisdictions, which defines when such a position is required, along with their position and role. This position can be fulfilled by a staff member or outsourced.

#### 6.3.1.2 Segregation of duties

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.1.2 applies:

#### 6.3.1.3 Contact with authorities

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.1.3 applies.

#### 6.3.1.4 Contact with special interest groups

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.1.4 applies.

#### 6.3.1.5 Information security in project management

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.1.5 applies.

### 6.3.2 Mobile devices and teleworking

#### 6.3.2.1 Mobile device policy

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.2.1 and the following additional guidance applies.

#### **Additional implementation guidance for 6.2.1, Mobile device policy, of ISO/IEC 27002:2013 is:**

575 The organization should ensure that the use of mobile devices does not compromise PII.

#### 576 **6.3.2.2 Teleworking**

577 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 6.2.2 applies.

### 578 **6.4 Human resource security**

#### 579 **6.4.1 Prior to employment**

##### 580 **6.4.1.1 Screening**

581 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.1.1 applies.

##### 582 **6.4.1.2 Terms and conditions of employment**

583 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.1.2 applies.

#### 584 **6.4.2 During employment**

##### 585 **6.4.2.1 Management responsibilities**

586 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.2.1 applies.

##### 587 **6.4.2.2 Information security awareness, education and training**

588 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.2.2 and the  
589 following additional guidance applies:

#### 590 **Additional implementation guidance for 7.2.2, Information security awareness, education and training, 591 of ISO/IEC 27002:2013 is:**

592 Measures should be put in place, including awareness of incident reporting, to ensure that relevant staff are  
593 aware of the possible consequences to the organization (e.g., legal consequences, loss of business and  
594 brand or reputational damage), to the staff member (e.g., disciplinary consequences) and to the PII principal  
595 (e.g., physical, material and emotional consequences) of breaching privacy or security rules and procedures,  
596 especially those addressing the handling of PII.

597 **NOTE** Such measures could include the use of appropriate periodic training for personnel having access to PII.

##### 598 **6.4.2.3 Disciplinary procedures**

599 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.2.3 applies.

#### 600 **6.4.3 Termination and change of employment**

##### 601 **6.4.3.1 Termination or change of employment responsibilities**

602 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 7.3.1 applies.

603	<b>6.5 Asset management</b>
604	<b>6.5.1 Responsibility for assets</b>
605	<b>6.5.1.1 Inventory of assets</b>
606	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.1.1 applies.
607	<b>6.5.1.2 Ownership of assets</b>
608	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.1.2 applies.
609	<b>6.5.1.3 Acceptable use of assets</b>
610	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.1.3 applies.
611	<b>6.5.1.4 Return use of assets</b>
612	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.1.4 applies.
613	<b>6.5.2 Information classification</b>
614	<b>6.5.2.1 Classification of information</b>
615	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.2.1 and the
616	following additional guidance applies:
617	<b>Additional implementation guidance for 8.2.1, Classification of Information, of ISO/IEC 27002:2013 is:</b>
618	The organization's information classification system should explicitly consider PII as part of the scheme it
619	implements. Including PII as part of the overall classification system is integral to understanding what PII the
620	organization processes (e.g. type, special categories), where such PII is stored and the systems through
621	which it can flow.
622	<b>6.5.2.2 Labelling of information</b>
623	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.2.2 and the
624	following additional guidance applies.
625	<b>Additional implementation guidance for 8.2.2, labelling of information, of ISO/IEC 27002:2013 is:</b>
626	The organization should ensure that people under the organizations control are made aware of the definition
627	of PII and how to recognize whether information is PII.
628	<b>6.5.2.3 Handling of assets</b>
629	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.2.3 applies.
630	<b>6.5.3 Media handling</b>
631	<b>6.5.3.1 Management of removable media</b>
632	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.3.1 and the
633	following additional guidance applies:

634 **Additional implementation guidance for 8.3.1 Management of removable media, of ISO/IEC 27002:2013**  
 635 **is:**

636 Wherever feasible, the organization should use removable physical media and/or devices that permit  
 637 encryption for the storage of PII.

638 The organization should document any use of removable media and/or devices for the storage of PII. The  
 639 organization should not use removable physical media and/or devices that do not permit encryption for the  
 640 storage of PII, except where it is unavoidable. Instances where unencrypted physical media and/or devices is  
 641 used, the organization should implement procedures and compensating controls (e.g., tamper-evident  
 642 packaging) to mitigate risks to the PII.

643 Removable media which is taken outside the physical confines of the organization are prone to loss, damage  
 644 and inappropriate access. Encrypting removable media adds a level of protection for PII which reduces  
 645 security and privacy risks should the removable media be compromised.

#### 646 **6.5.3.2 Disposal of media**

647 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.3.2 and the  
 648 following additional guidance applies.

649 **Additional implementation guidance for 8.3.2 Disposal of media, of ISO/IEC 27002:2013 is:**

650 Where removable media upon which PII is stored is disposed of, secure disposal procedures should be  
 651 documented and implemented to ensure that previously stored PII will not be accessible.

#### 652 **6.5.3.3 Physical media transfer**

653 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 8.3.3 and the  
 654 following additional guidance applies:

655 **Additional implementation guidance for 8.3.3 Physical media transfer, of ISO/IEC 27002:2013 is:**

656 If physical media is used for information transfer, a system should be put in place to record incoming and  
 657 outgoing physical media containing PII, including the type of physical media, the authorized sender/recipients,  
 658 the date and time, and the number of physical media. Where possible, additional measures such as  
 659 encryption should be implemented to ensure that the data can only be accessed at the point of destination  
 660 and not in transit.

661 The organization should subject physical media containing PII before leaving its premises to an authorized  
 662 procedure and ensure the PII is not accessible to anyone other than authorized personnel.

663 NOTE One possible measure to ensure PII on physical media leaving the organization's premises is not generally  
 664 accessible is to encrypt the PII concerned and restrict decryption capabilities to authorized personnel.

### 665 **6.6 Access control**

#### 666 **6.6.1 Business requirements of access control**

##### 667 **6.6.1.1 Access control policy**

668 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.1.1 applies.

##### 669 **6.6.1.2 Access to networks and network services**

670 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.1.2 applies.

## 6.6.2 User access management

### 6.6.2.1 User registration and de-registration

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.1 and the following additional guidance applies:

#### **Additional implementation guidance for 9.2.1, User registration and de-registration, of ISO/IEC 27002:2013 is:**

Procedures for registration and de-registration of users who administer or operate systems and services that process PII should address the situation where user access control for those users is compromised, such that the corruption or compromise of passwords or other user registration data (e.g., as a result of inadvertent disclosure).

The organization should not reuse de-activated or expired user IDs for systems and services that process PII to other users.

In the context of distributed systems, the customer can be responsible for some or all aspects of user ID management. Such cases should be documented.

Some jurisdictions impose specific requirements regarding the frequency of checks for unused authentication credentials related to systems that process PII. Organizations operating in these jurisdictions should ensure that they comply with these requirements.

### 6.6.2.2 User access provisioning

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.2 and the following additional guidance applies:

#### **Additional implementation guidance for 9.2.2, User access provisioning, of ISO/IEC 27002:2013 is:**

In the context of the service providers, the customer can be responsible for some or all aspects of access management.

Where appropriate, the organization should provide the customer the means to perform access management, such as by providing administrative rights to manage or terminate access.

Such cases should be documented.

The organization should maintain an accurate, up-to-date record of the user profiles created for users who have been authorized access to the information system and the PII contained therein. This profile comprises the set of data about that user, including user ID, necessary to implement the identified technical controls providing authorized access.

Implementing individual user access IDs enables appropriately configured systems to identify who accessed PII and what additions, deletions or changes they made. As well as protecting the organization, users are also protected as they can identify what they have processed and what they have not processed.

### 6.6.2.3 Management of privileged access rights

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.3 applies:

### 6.6.2.4 Management of secret authentication information of users

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.4 applies.

708 **6.6.2.5 Review of user access rights**

709 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.5 applies.

710 **6.6.2.6 Removal or adjustment of access rights**

711 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.2.6 applies.

712 **6.6.3 User responsibilities**

713 **6.6.3.1 Use of secret authentication information**

714 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.3.1 applies.

715 **6.6.4 System and application access control**

716 **6.6.4.1 Information access restriction**

717 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.4.1 applies.

718 **6.6.4.2 Secure log-on procedures**

719 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.4.2 and the  
720 following additional guidance applies:

721 **Additional implementation guidance for 9.4.2, Secure log-on procedures, of ISO/IEC 27002:2013 is:**

722 Where required by the customer, the organization should provide the capability for secure log-on procedures  
723 for any user accounts under the customer's control.

724 **6.6.4.3 Password management system**

725 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.4.3 applies.

726 **6.6.4.4 Use of privileged utility programs**

727 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.4.4 applies.

728 **6.6.4.5 Access control to program source code**

729 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 9.4.5 applies.

730 **6.7 Cryptography**

731 **6.7.1 Cryptographic controls**

732 **6.7.1.1 Policy on the use of cryptographic controls**

733 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 10.1.1 and the  
734 following additional guidance applies:

735 **Additional implementation guidance for 10.1.1, Policy on the use of cryptographic controls, of ISO/IEC  
736 27002:2013 is:**

737 Some jurisdictions can require the use of cryptography to protect particular kinds of PII, such as health data,  
738 resident registration numbers, passport numbers and driver's licence numbers.

739 The organization should provide information to the customer regarding the circumstances in which it uses  
740 cryptography to protect the PII it processes. The organization should also provide information to the customer  
741 about any capabilities it provides that can assist the customer in applying their own cryptographic protection.

#### 742 **6.7.1.2 Key management**

743 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 10.1.2 applies.

### 744 **6.8 Physical and environmental security**

#### 745 **6.8.1 Secure areas**

##### 746 **6.8.1.1 Physical security perimeter**

747 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.1 applies.

##### 748 **6.8.1.2 Physical entry controls**

749 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.2 applies.

##### 750 **6.8.1.3 Securing offices, rooms and facilities**

751 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.3 applies.

##### 752 **6.8.1.4 Protecting against external and environmental threats**

753 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.4 applies.

##### 754 **6.8.1.5 Working in secure areas**

755 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.5 applies.

##### 756 **6.8.1.6 Delivery and loading areas**

757 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.1.6 applies.

#### 758 **6.8.2 Equipment**

##### 759 **6.8.2.1 Equipment siting and protection**

760 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.1 applies.

##### 761 **6.8.2.2 Supporting utilities**

762 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.2 applies.

##### 763 **6.8.2.3 Cabling security**

764 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.3 applies.



765 **6.8.2.4 Equipment maintenance**

766 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.4 applies.

767 **6.8.2.5 Removal of assets**

768 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.5 applies.

769 **6.8.2.6 Security of equipment and assets off-premises**

770 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.6 applies.

771 **6.8.2.7 Secure disposal or re-use of equipment**

772 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.7 and the  
773 following additional guidance applies:

774 **Additional implementation guidance for 11.2.7, Secure disposal or re-use of equipment, of ISO/IEC**  
775 **27002:2013 is:**

776 The organization should ensure that, whenever PII storage space is re-assigned, any PII previously residing  
777 on that storage space is not visible.

778 Upon deletion of PII held in an information system, performance issues can mean that explicit erasure of that  
779 PII is impractical. This creates the risk that another user can be able to read the PII. Such risk should be  
780 avoided by specific technical measures.

781 For secure disposal or re-use, equipment containing storage media that could possibly contain PII should be  
782 treated as though it does contain PII.

783 **6.8.2.8 Unattended user equipment**

784 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.8 applies.

785 **6.8.2.9 Clear desk and clear screen policy**

786 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 11.2.9 and the  
787 following additional guidance applies:

788 **Additional implementation guidance for 11.2.9, Clear desk and clear screen policy, of ISO/IEC**  
789 **27002:2013 is:**

790 The organization should restrict the creation of hardcopy material displaying PII to the minimum needed to  
791 fulfil the identified processing purpose.

792 **6.9 Operations security**

793 **6.9.1 Operational procedures and responsibilities**

794 **6.9.1.1 Documenting operating procedures**

795 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.1.1 applies.

796 **6.9.1.2 Change management**

797 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.1.2 applies.

798 **6.9.1.3 Capacity management**

799 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.1.3 applies.

800 **6.9.1.4 Separation of development, testing and operational environments**

801 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.1.4 applies.

802 **6.9.2 Protection from malware**

803 **6.9.2.1 Controls against malware**

804 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.2.1 applies.

805 **6.9.3 Backup**

806 **6.9.3.1 Information backup**

807 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.3.1 and the  
808 following additional guidance applies:

809 **Additional implementation guidance for 12.3.1 Information backup, of ISO/IEC 27002:2013 is:**

810 The organization should have a policy which addresses the requirements for backup, recovery and restoration  
811 of PII (which could be part of an overall information backup policy) and any further requirements (e.g.,  
812 contractual and/or legal requirements) for the erasure of PII contained in information held for backup  
813 requirements.

814 PII-specific responsibilities in this respect can lie with the customer. In this case, the organization should  
815 ensure that the customer has been informed of the limits of the service regarding backup.

816 Where the organization explicitly provides backup and restore services to customers, the organization should  
817 provide them with clear information about their capabilities with respect to backup and restoration of PII.

818 Some jurisdictions impose specific requirements regarding the frequency of backups of PII, the frequency of  
819 reviews and tests of backup, or regarding the recovery procedures for PII. Organizations operating in these  
820 jurisdictions should ensure that they comply with these requirements.

821 There can be occasions where PII needs to be restored, perhaps due to a system malfunction, attack or  
822 disaster. When PII is restored (typically from backup media), processes need to be in place to ensure that  
823 the PII is restored into a state where PII accuracy can be assured, or where PII inaccuracies are identified and  
824 processes put in place to resolve these inaccuracies (which can involve the PII principal).

825 The organization should have a procedure for, and a log of, PII restoration efforts. At a minimum, the log of  
826 the PII restoration efforts should contain:

- 827 – the name of person responsible for the restoration;
- 828 – a description of the restored PII.

829 Some jurisdictions can prescribe the content of the logs of PII restoration efforts. Organizations should  
830 familiarize themselves with the applicable legislation and/or regulations.

831 The use of subcontractors to store replicated or backup copies of PII being processed is covered by the  
832 controls in this document applying to subcontracted PII processing (6.12.1.2). Where physical media transfers  
833 take place related to backups and restoration, this is also covered by controls in this document (6.10.2.1).

## 6.9.4 Logging and monitoring

### 6.9.4.1 Event logging

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.4.1 and the following additional guidance applies:

#### **Additional implementation guidance for 12.4.1, Event logging, of ISO/IEC 27002:2013 is:**

A process should be put in place to review event logs using continuous, automated monitoring and alerting processes, or else manually where such review should be performed with a specified, documented periodicity, to identify irregularities and propose remediation efforts.

Where possible, event logs should record access to PII, including by whom, when, which PII principal's PII was accessed, and what (if any) changes were made (additions, modifications or deletions) as a result of the event.

Where multiple service providers are involved in providing services, there can be varied or shared roles in implementing this guidance. These roles should be clearly defined and documented, and agreement on any log access between providers should be addressed.

#### **Implementation guidance for PII processors:**

The organization should define criteria regarding if, when and how log information can be made available to or usable by the customer. These criteria should be made available to the customer.

Where the organization permits its customers to access log records controlled by the organization, the organization should implement appropriate controls to ensure that the customer can only access records that relate to that customer's activities, cannot access any log records which relate to the activities of other customers, and cannot amend the logs in any way.

### 6.9.4.2 Protection of log information

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.4.2 and the following additional guidance applies:

#### **Additional implementation guidance for 12.4.2, Protection of log information, of ISO/IEC 27002:2013 is:**

Log information recorded for, for example, security monitoring and operational diagnostics, could contain PII. Measures such as controlling access (see 9.2.3 of ISO/IEC 27002) should be put in place to ensure that logged information is only used as intended.

A procedure, preferably automatic, should be put in place to ensure that logged information is either deleted or de-identified within a specified and documented period.

### 6.9.4.3 Administrator and operator logs

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.4.3 applies.

### 6.9.4.4 Clock synchronization

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.4.4 applies.

868	<b>6.9.5 Control of operational software</b>
869	<b>6.9.5.1 Installation of software on operational systems</b>
870	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.5.1 applies.
871	<b>6.9.6 Technical vulnerability management</b>
872	<b>6.9.6.1 Management of technical vulnerabilities</b>
873	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.6.1 applies.
874	<b>6.9.6.2 Restriction on software installation</b>
875	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.6.2 applies.
876	<b>6.9.7 Information systems audit considerations</b>
877	<b>6.9.7.1 Information systems audit controls</b>
878	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 12.7.1 applies.
879	<b>6.10 Communications security</b>
880	<b>6.10.1 Network security management</b>
881	<b>6.10.1.1 Network controls</b>
882	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.1.1 applies.
883	<b>6.10.1.2 Security in network services</b>
884	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.1.2 applies.
885	<b>6.10.1.3 Segregation in networks</b>
886	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.1.3 applies.
887	<b>6.10.2 Information transfer</b>
888	<b>6.10.2.1 Information transfer policies and procedures</b>
889	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.2.1 and the
890	following additional guidance applies:
891	<b>Additional implementation guidance for 13.2.1, Information transfer policies and procedures, of</b>
892	<b>ISO/IEC 27002:2013 is:</b>
893	The organization should consider procedures for ensuring that rules related to the processing of PII are
894	enforced throughout and outside of the system, where applicable (e.g., metadata tags).
895	<b>6.10.2.2 Agreements for information transfer</b>
896	The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.2.2 applies.

897 **6.10.2.3 Electronic messaging**

898 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.2.3 applies.

899 **6.10.2.4 Confidentiality or non-disclosure agreements**

900 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 13.2.4 and the  
901 following additional guidance applies:

902 **Additional implementation guidance for 13.2.4, Confidentiality or non-disclosure agreements, of**  
903 **ISO/IEC 27002:2013 is:**

904 The organization should ensure that individuals operating under its control with access to PII are subject to a  
905 confidentiality obligation. The confidentiality agreement, whether part of a contract or separate, should specify  
906 the length of time the obligations should be adhered to.

907 When the organization is a PII processor, a confidentiality agreement, in whatever form, between the  
908 organization, its employees and its agents should ensure that employees and agents comply with the policy  
909 and procedures concerning data handling and protection.

910 **6.11 Systems acquisition, development and maintenance**

911 **6.11.1 Security requirements of information systems**

912 **6.11.1.1 Information security requirements analysis and specification**

913 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.1.1 applies.

914 **6.11.1.2 Securing application services on public networks**

915 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.1.2 and the  
916 following additional guidance applies:

917 **Additional implementation guidance for 14.1.2, Securing application services on public networks, of**  
918 **ISO/IEC 27002:2013 is:**

919 The organization should ensure that PII that is transmitted over untrusted data transmission networks is  
920 encrypted for transmission.

921 Untrusted networks can include the public internet and other facilities outside of the operational control of the  
922 organization.

923 NOTE In some cases (e.g., the exchange of e-mail) the inherent characteristics of untrusted data transmission  
924 network systems might require that some header or traffic data be exposed for effective transmission.

925 **6.11.1.3 Protecting application services transactions**

926 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.1.3 applies.

927 **6.11.2 Security in development and support processes**

928 **6.11.2.1 Secure development policy**

929 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.1 and the  
930 following additional guidance applies.

931 **Additional implementation guidance for 14.2.1, Secure development policy, of ISO/IEC 27002:2013 is:**

Policies for system development and design should include guidance for the organization's processing of PII needs, based on obligations to PII principals and/or any applicable laws or regulations and the types of processing performed by the organization. Clauses 7 and 8 provide control considerations for processing of PII, which may be useful in developing policies for privacy in systems design.

Policies that contribute to privacy by design and privacy by default should consider the following aspects:

- a) guidance on PII protection and the implementation of the privacy principles (see ISO/IEC 29100) in the software development lifecycle;
- b) privacy and PII protection requirements in the design phase, which should be based on the output from a privacy impact assessment (see 7.2.5);
- c) PII protection checkpoints within project milestones;
- d) required privacy and PII protection knowledge;
- e) by default minimise processing of PII.

#### **6.11.2.2 System change control procedures**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.2 applies.

#### **6.11.2.3 Technical review of applications after operating platform changes**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.3 applies.

#### **6.11.2.4 Restrictions of changes to software packages**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.4 applies.

#### **6.11.2.5 Secure systems engineering principles**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.5 and the following additional guidance applies:

#### **Additional implementation guidance for 14.2.5, Secure systems engineering principles, of ISO/IEC 27002:2013 is:**

Systems and/or components related to the processing of PII should be designed following the principles of privacy by design and privacy by default, and to anticipate and facilitate the implementation of relevant controls (as described in clauses 7 and 8, for PII controllers and PII processors, respectively), in particular such that the collection and processing of PII in those systems is limited to what is necessary for the identified purposes of the processing of PII (clause 7.2).

For example, an organization that processes PII can need to ensure that, based on the relevant jurisdiction, it disposes of PII after a specified period. The system that processes that PII should be designed in a way to facilitate this deletion requirement.

The same principles of privacy by design and privacy by default should be applied, if applicable, to outsourced information systems.

#### **6.11.2.6 Secure development environment**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.6 applies.

#### **6.11.2.7 Outsourced development**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.7 applies.

**6.11.2.8 System security testing**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.8 applies.

**6.11.2.9 System acceptance testing**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.2.9 applies.

**6.11.3 Test data**

**6.11.3.1 Protection of test data**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 14.3.1 and the following additional guidance applies:

**Additional implementation guidance for 14.3.1, Protection of test data, of ISO/IEC 27002:2013 is:**

PII should not be used for testing purposes; false or synthetic PII should be used. Where the use of PII for testing purposes cannot be avoided, technical and organizational measures equivalent to those used in the production environment should be implemented to minimize the risks. Where such equivalent measures are not feasible, a risk-assessment should be undertaken and used to inform the selection of appropriate mitigating controls.

**6.12 Supplier relationships**

**6.12.1 Information security in supplier relationships**

**6.12.1.1 Information security policy for supplier relationships**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 15.1.1 applies.

**6.12.1.2 Addressing security within supplier agreements**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 15.1.2 and the following additional guidance applies:

**Additional implementation guidance for 15.1.2, Addressing security within supplier agreements, of ISO/IEC 27002:2013 is:**

The organization should specify in contracts between themselves and any suppliers whether PII is being processed and the minimum technical and organizational measures that the supplier needs to meet in order for the organization's to meet its information security and PII protection obligations.

Contractual agreements should clearly allocate responsibilities between the organization, its partners, its suppliers and its applicable third parties (customers, suppliers, etc.) taking into account the type of PII processed.

The contract between the organization and its customers should provide a mechanism for ensuring the organization supports and manages compliance with all applicable legislation and regulation. The contract should call for independently audited compliance, acceptable to the customer.

NOTE For such audit purposes, compliance with relevant and applicable security and privacy standards such as ISO/IEC 27001 or this document can be considered acceptable.

**Implementation guidance for PII processors**

The organization should specify in contracts with any suppliers that PII is only processed on its instructions.

**6.12.1.3 Information and communication technology supply chain**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 15.1.3 applies.

**6.12.2 Supplier service delivery management**

**6.12.2.1 Monitoring and review of supplier services**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 15.2.1 applies.

**6.12.2.2 Managing changes to supplier services**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 15.2.2 applies.

**6.13 Information security incident management**

**6.13.1 Management of information security incidents and improvements**

**6.13.1.1 Responsibilities and procedures**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.1 and the following additional guidance applies:

**Additional implementation guidance for 16.1.1, Responsibilities and procedures, of ISO/IEC 27002:2013 is:**

As part of the overall incident management process, the organization should establish responsibilities and procedures for the identification and recording of breaches of PII processing. Additionally, the organization should establish responsibilities and procedures related to notification to required parties of PII breaches (including the timing of such notifications) and the disclosure to authorities as required by applicable legislation and/or regulation.

Some jurisdictions impose specific regulations regarding breach responses, including notification. Organizations operating in these jurisdictions should ensure responsibilities to ensure that they comply with these requirements.

**6.13.1.2 Reporting information security events**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.2 applies.

**6.13.1.3 Reporting information security weaknesses**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.3 applies.

**6.13.1.4 Assessment of and decisions on information security events**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.4 applies.

**6.13.1.5 Response to information security incidents**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.5 and the following additional guidance applies:

**Additional implementation guidance for 16.1.5, Response to information security incidents, of ISO/IEC 27002:2013 is:**



## 1038 Implementation guidance for PII controllers

1039 An incident that involves PII should trigger a review by the organization, as part of its information security  
1040 incident management process, to determine if a breach involving PII that requires a response has taken place.

1041 An event does not necessarily trigger such a review.

1042 NOTE 1 An event is one that does not result in actual, or the significant probability of, unauthorized access to PII or to  
1043 any of the organization's equipment or facilities storing PII. These can include, but not limited to, pings and other  
1044 broadcast attacks on firewalls or edge servers, port scans, unsuccessful log-on attempts, denial of service attacks and  
1045 packet sniffing.

1046 When a breach of PII has occurred, response procedures should include relevant notifications and records.

1047 Some jurisdictions define cases when the breach should be notified to the supervisory authority, and when it  
1048 should be notified to PII principals.

1049 Notifications should be clear, and, depending on jurisdiction, could be required.

1050 NOTE 2 Notification could contain details such as:

- 1051 – a contact point where more information can be obtained;
- 1052 – a description of and the likely consequences of the breach;
- 1053 – a description of the breach including the number of individuals concerned as well as the number of records  
1054 concerned;
- 1055 – measures taken or planned to be taken.

1056 NOTE 3 Information on the management of security incidents can be found in ISO/IEC 27035.

1057 Where a breach involving PII has occurred, a record should be maintained with sufficient information to  
1058 provide a report for regulatory and/or forensic purposes, such as:

- 1059 — a description of the incident;
- 1060 — the time period;
- 1061 — the consequences of the incident;
- 1062 — the name of the reporter;
- 1063 — to whom the incident was reported;
- 1064 — the steps taken to resolve the incident (including the person in charge and the data recovered);
- 1065 — the fact that the incident resulted in unavailability, loss, disclosure or alteration of PII.

1066 In the event that a breach involving PII has occurred, the record should also include a description of the PII  
1067 compromised, if known; and if notifications were performed, the steps taken to notify PII individuals, regulatory  
1068 agencies or customers.

## 1069 Implementation guidance for PII processors

1070 Provisions covering the notification of a breach involving PII should form part of the contract between the  
1071 organization and the customer. The contract should specify how the organization will provide the information  
1072 necessary for the customer to fulfil their obligation to notify relevant authorities. This notification obligation  
1073 does not extend to a breach caused by the customer or PII principal or within system components for which  
1074 they are responsible. The contract should also define the maximum delay in notification of a breach involving  
1075 PII.

- 1076 – where a breach involving PII has occurred, a record should be maintained with sufficient information to  
1077 provide a report for regulatory and/or forensic purposes, such as:
- 1078 – a description of the incident;
- 1079 – the time period;
- 1080 – the consequences of the incident;
- 1081 – the name of the reporter;
- 1082 – to whom the incident was reported;

- the steps taken to resolve the incident (including the person in charge and the data recovered);
- the fact that the incident resulted in unavailability, loss, disclosure or alteration of PII.

In the event that a breach involving PII has occurred, the record should also include a description of the PII compromised, if known; and if notifications were performed, the steps taken to notify the customer and/or the regulatory agencies.

In some jurisdictions, the PII processor should notify the PII controller of the existence of a breach without undue delay (i.e. as soon as possible), preferably, as soon as it is discovered so that the PII controller can take the appropriate actions.

In some jurisdictions, applicable legislation or regulations can require the organization to directly notify appropriate regulatory authorities (e.g., a PII protection authority) of a breach involving PII.

#### **6.13.1.6 Learning from information security incidents**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.6 applies.

#### **6.13.1.7 Collection of evidence**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 16.1.7 applies:

### **6.14 Information security aspects of business continuity management**

#### **6.14.1 Information security continuity**

##### **6.14.1.1 Planning information security continuity**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 17.1.1 applies.

##### **6.14.1.2 Implementing information security continuity**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 17.1.2 applies.

##### **6.14.1.3 Verify, renew and evaluate information security continuity**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 17.1.3 applies.

#### **6.14.2 Redundancies**

##### **6.14.2.1 Availability of information processing facilities**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 17.2.1 applies.

### **6.15 Compliance**

#### **6.15.1 Compliance with legal and contractual requirements**

##### **6.15.1.1 Identification of applicable legislation and contractual requirements**

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.1.1 and the following additional guidance applies:

**Additional other information for 18.1.1, Identification of applicable legislation and contractual requirements, of ISO/IEC 27002:2013 is:**

1115 The organization should identify any potential legal sanctions (which could result from some obligations being  
 1116 missed) related to the processing of PII, including substantial fines directly from the local supervisory authority.  
 1117 In some jurisdictions, International Standards such as this document can be used to form the basis for a  
 1118 contract between the organization and the customer, outlining their respective security, privacy and PII  
 1119 protection responsibilities. The terms of the contract can provide a basis for contractual sanctions in the event  
 1120 of a breach of those responsibilities.

#### 1121 **6.15.1.2 Intellectual property rights**

1122 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.1.2 applies.

#### 1123 **6.15.1.3 Protection of records**

1124 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.1.3 and the  
 1125 following additional guidance applies:

#### 1126 **Additional implementation guidance for 18.1.3, Protection of records, of ISO/IEC 27002:2013 is:**

1127 Review of current and historical policies and procedures can be required (e.g., in the cases of customer  
 1128 dispute resolution and investigation by a supervisory authority).

1129 The organization should retain copies of its privacy policies and associated procedures for a specified,  
 1130 documented period of time (see 7.2.8). This includes retaining copies of previous versions of these documents  
 1131 when they are updated.

#### 1132 **6.15.1.4 Privacy and protection of personally identifiable information**

1133 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.1.4 applies.

#### 1134 **6.15.1.5 Regulation of cryptographic controls**

1135 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.1.5 applies.

### 1136 **6.15.2 Information security reviews**

#### 1137 **6.15.2.1 Independent review of information security**

1138 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.2.1 and the  
 1139 following additional guidance applies:

#### 1140 **Additional implementation guidance for 18.2.1, Independent review of information security, of ISO/IEC** 1141 **27002:2013 is:**

1142 Where an organization is acting as a PII processor, and where individual customer audits are impractical or  
 1143 could increase risks to security, the organization should make available to customers, prior to entering into,  
 1144 and for the duration of, a contract, independent evidence that information security is implemented and  
 1145 operated in accordance with the organization's policies and procedures. A relevant independent audit, as  
 1146 selected by the organization, should normally be an acceptable method for fulfilling the customer's interest in  
 1147 reviewing the organization's processing operations, if it covers the needs of anticipated users and if results are  
 1148 provided in a sufficient transparent manner.

#### 1149 **6.15.2.2 Compliance with security policies and standards**

1150 The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.2.2 applies.

### 6.15.2.3 Technical compliance review

The control, implementation guidance and other information stated in ISO/IEC 27002:2013, 18.2.3 and the following additional guidance applies:

#### Additional implementation guidance for 18.2.3, Technical compliance review, of ISO/IEC 27002:2013 is:

As part of technical reviews of compliance with security policies and standards, the organization should include methods of reviewing those tools and components related to processing PII. This can include:

- Ongoing monitoring to verify that only permitted processing is taking place; and/or
- Specific penetration or vulnerability tests (for example, de-identified datasets can be subject to a motivated intruder test to validate that de-identification methods are compliant with organizational requirements).

## 7 Additional ISO/IEC 27002 guidance for PII controllers

### 7.1 General

The guidance contained in Clause 6 plus the additions in the current clause create the PIMS-specific guidance for PII controllers. The implementation guidance documented in the current clause relate to the controls listed in Annex A.

### 7.2 Conditions for collection and processing

Objective: To ensure that processing is lawful, with legal basis as per applicable jurisdictions, with clearly defined and legitimate purposes.

#### 7.2.1 Identify and document purpose

##### Control

The organization should identify and document the specific purposes for which the PII will be processed.

##### Implementation guidance

The organization should ensure that PII principals understand the purpose for which their PII is processed. It is the responsibility of the organization to clearly document and communicate this to PII principals. Without a clear statement of the purpose for processing, consent and choice cannot be adequately given.

Documentation of the purpose(s) for processing PII should be sufficiently clear and detailed to be usable in the required information to be provided to PII principals (see 7.3.2). This includes information necessary to obtain consent (see 7.2.3), as well as records of policies and procedures (see 7.2.8).

##### Other information

In the deployment of cloud computing services, the taxonomy and definitions in ISO/IEC 19944 can be helpful in providing terms for describing the purpose of the processing of PII.

#### 7.2.2 Identify lawful basis

##### Control

The organization should determine, document and comply with the relevant lawful basis for the processing of PII for the identified purposes.

1186 **Implementation guidance**

1187 Some jurisdictions require the organization to be able to demonstrate that the lawfulness of processing was  
1188 duly established before the processing.

1189 The legal basis for the processing of PII could include:

- 1190 - consent from PII principals;
- 1191 - performance of a contract;
- 1192 - compliance with a legal obligation;
- 1193 - protect the vital interests of PII principals;
- 1194 - performance of a task carried out in the public interests;
- 1195 - legitimate interests of the PII controller.

1196 The organization should document its basis for each PII processing activity (see 7.2.8).

1197 The legitimate interests of the organization could include, for instance, information security objectives, which  
1198 should be balanced against the obligations to PII principals with regards to privacy protection.

1199 Whenever special categories of PII are defined, either by the nature of the PII (e.g. health information) or by  
1200 the PII principals concerned (e.g. PII relating to children), the organization should include those categories of  
1201 PII in its classification schemes.

1202 The classification of PII that falls into these categories can vary from one jurisdiction to another and can vary  
1203 between different regulatory regimes that apply to different kinds of business, so the organization needs to be  
1204 aware of the classification(s) that apply to the PII processing being performed.

1205 The use of special categories of PII might also be subject to more stringent controls.

1206 Changing or extending the purposes for the processing of PII might require updating and/or revision of the  
1207 legal basis. It might also require additional consent to be obtained from the PII principal.

1208 **7.2.3 Determine when and how consent is to be obtained**

1209 **Control**

1210 The organization should determine and document a process by which it can demonstrate if, when and how  
1211 consent for the processing of PII was obtained from PII principals.

1212 **Implementation guidance**

1213 Consent is normally required for processing of PII unless other lawful grounds apply. The organization should  
1214 clearly document when consent needs to be obtained and the requirements for obtaining consent. It can be  
1215 useful to correlate the purpose(s) for processing with information about if and how consent is obtained.

1216 Some jurisdictions have specific requirements for how consent is collected and recorded (e.g., not bundled  
1217 with other agreements). Additionally, certain types of data collection (for scientific research for example) and  
1218 certain types of PII principals, such as children, can be subject to additional requirements. The organization  
1219 should take into account such requirements and document how mechanisms for consent meet those  
1220 requirements.

1221 **7.2.4 Obtain and record consent**

1222 **Control**

1223 The organization should obtain and record consent from PII principals according to the documented  
1224 processes.

**Implementation guidance**

The organization should obtain and record consent from PII principals in such a way that it can provide on request details of the consent provided (for example the time that consent was provided, the identification of the PII principal, and the consent statement).

The information delivered to the PII principal before the consent process should follow the guidance in 7.3.3

The consent should fulfil the following conditions:

- be freely given;
- be specific regarding the purpose for processing;
- be unambiguous and explicit.

**7.2.5 Privacy impact assessment****Control**

The organization should assess the need for, and implement where appropriate, a privacy impact assessment whenever new processing of PII or changes to existing processing of PII is planned.

**Implementation guidance**

PII processing generates risks for PII principals. These risks should be assessed through a privacy impact assessment. Some jurisdictions define cases for which a privacy impact assessment should be performed. Criteria could include automated decision making which produces legal effects on PII principals, large scale processing of special categories of PII (e.g., health related information, racial or ethnic origin, political opinions, religious or philosophical beliefs, trade-union membership, genetic data or biometric data), or systematic monitoring of a publicly accessible area on a large scale.

The organization should determine the elements that are necessary for the completion of a privacy impact assessment. These could include a list of the types of PII being processed, where the PII is stored and where it can be transferred. Data flow diagrams and data maps could also be helpful in this context. See 7.2.8 for details of records of the processing of PII that might inform a privacy impact or other risk assessment.

**Other information**

Guidance on the assessment of privacy impacts related to the processing of PII can be found in ISO/IEC 29134

**7.2.6 Contracts with PII processors****Control**

The organization should have a written contract with any PII processor that it uses, and should ensure that their contracts with PII processors address the implementation of the appropriate controls in Annex B.

**Implementation guidance**

The contract between the organization and any PII processor processing PII on its behalf should require the PII processor to implement the appropriate controls specified in Annex B, taking account of the information security risk assessment process (see 5.4.1.2) and the scope of the processing of PII performed by the PII processor (see 6.12). By default, all controls specified in Annex B should be assumed as relevant. If the organization decides to not require the PII processor to implement a control from Annex B, it should justify its exclusion.

A contract can define the responsibilities of each party differently but, to be consistent with this document, all controls should be considered and documented.

## 1265 7.2.7 Joint PII controller

### 1266 Control

1267 The organization should determine respective roles and responsibilities for the processing of PII (including PII  
1268 protection and security requirements) with any joint PII controller.

### 1269 Implementation guidance

1270 Roles and responsibilities for the processing of PII should be determined in a transparent manner. They  
1271 should at least address the requirements of applicable legislation(s) and/or regulation(s).

1272 These roles and responsibilities should be documented in a contract or any similar binding document that  
1273 contains the terms and conditions for the joint processing of PII. In some jurisdictions, such an agreement is  
1274 termed a data sharing agreement.

1275 A joint PII controller agreement can include (this list is neither definitive nor exhaustive):

- 1276 – purpose of PII sharing / joint PII controller relationship;
- 1277 – identity of the organizations (PII controllers) that are part of the joint PII controller relationship;
- 1278 – categories of PII to be shared and/or transferred and processed under the agreement;
- 1279 – overview of the processing operations (e.g., transfer, use);
- 1280 – description of the respective roles and responsibilities;
- 1281 – responsibility for implementing technical and organizational security measures for PII protection;
- 1282 – definition of responsibility in case of a PII breach (e.g. who will notify, when, mutual information);
- 1283 – terms of retention and/or disposal of PII;
- 1284 – liabilities for failure to comply with the agreement;
- 1285 – how obligations to PII principals are met;
- 1286 – how to provide PII principals with information covering the essence of the arrangement between the joint  
1287 PII controllers;
- 1288 – how PII principals can obtain other information they are entitled to receive; and
- 1289 – a contact point for PII principals.

## 1290 7.2.8 Records related to processing PII

### 1291 Control

1292 The organization should determine and securely maintain the necessary records in support of its obligations  
1293 for the processing of PII.

### 1294 Implementation guidance

1295 A step in maintaining records of the processing of PII is to have an inventory or list of the PII processing  
1296 activities that the organization performs. Such an inventory could include:

- 1297 - the type of processing;
- 1298 - the purposes for the processing;
- 1299 - a description of the categories of PII and PII principals (e.g., children);
- 1300 - the categories of recipients to whom PII has been or will be disclosed, including recipients in third  
1301 countries or international organizations;
- 1302 - a general description of the technical and organizational security measures; and
- 1303 - a Privacy Impact Assessment report.

1304 Such an inventory should have an owner who is responsible for its accuracy and completeness.

### 7.3 Obligations to PII principals

Objective: To ensure that PII principals are provided with appropriate information about the processing of their PII, and to meet any other applicable obligations to PII principals related to the processing of their PII.

#### 7.3.1 Determining and fulfilling obligations to PII principals

##### Control

The organization should determine, document and comply with their legal, regulatory and business obligations to PII principals, related to the processing of their PII and provide the means to meet these obligations.

##### Implementation guidance

Obligations to PII principals and the means to support them vary from one jurisdiction to another.

The organization should ensure that they provide the appropriate means to meet the obligations to PII principals in an accessible and timely manner. Clear documentation should be provided to the PII principal describing the extent and manner in which the obligations to them are fulfilled, along with an up-to-date contact point where they can address their requests.

The contact point should be provided in a manner similar to the one used to collect PII and consent (e.g. if PII are collected by email or a website, the contact point should be by email or the website, not an alternative such as phone or fax).

#### 7.3.2 Determining information for PII principals

##### Control

The organization should determine and document the information which is to be provided to PII principals regarding the processing of their PII and the timing of such a provision.

##### Implementation guidance

The organization should determine the legal, regulatory and/or business requirements for when information is to be provided to the PII principal (e.g., prior to processing, within a certain time from when it is requested, etc.) and for the type of information to be provided.

Depending on the requirements, the information can take the form of a notice. Examples of types of information that can be provided to PII principals are:

- information about the purpose of the processing;
- contact details for the PII controller or its representative;
- information about the basis for the processing;
- information on where the PII was obtained, if not obtained directly from the PII principal;
- information about whether the provision of PII is a statutory or contractual requirement, and where appropriate, the possible consequences of failure to provide PII;
- information on how the PII principal can trigger the obligations described in 7.3.1 especially regarding access, amend, correct, request erasure, receive a copy of their PII and object to the processing;
- information on how the PII principal can withdraw consent;
- information about transfers of PII;
- information about recipients or categories of recipients of PII;
- information about the period for which the PII will be retained;
- information about the use of automated decision making based on the automated processing of PII;
- information about the right to lodge a complaint and how to lodge such a complaint;
- information regarding the frequency with which information is provided (e.g. "just in time" notification, organization defined frequency, etc.).



1347 The organization should provide updated information if the purposes for the processing of PII are changed or  
 1348 extended.

### 1349 **7.3.3 Providing information to PII principals**

#### 1350 **Control**

1351 The organization should provide PII principals with clear and easily accessible information related to the PII  
 1352 controller and the processing of their PII.

#### 1353 **Implementation guidance**

1354 The organization should provide the information detailed in 7.3.2 to PII principals in a timely, concise,  
 1355 complete, transparent, intelligible and easily accessible form, using clear and plain language, as appropriate  
 1356 to the target audience.

1357 Where appropriate, the information should be given at the time of PII collection. It should also be permanently  
 1358 accessible.

1359 NOTE Icons and images can be helpful to the PII principal by giving a visual overview of the intended processing.

### 1360 **7.3.4 Provide mechanism to modify or withdraw consent**

#### 1361 **Control**

1362 The organization should provide a mechanism for PII principals to modify or withdraw their consent.

#### 1363 **Implementation guidance**

1364 The organization should provide information to PII principals informing them of their right to withdraw consent  
 1365 at any time, and provide the mechanism by which to withdraw consent. The mechanism used for withdrawal  
 1366 will be dependent on the system; it should be consistent with the mechanisms used for obtaining consent  
 1367 when possible. For example, if the consent is collected by email or a website, the mechanism for withdrawing  
 1368 it should be the same, not an alternative solution such as phone or fax.

1369 Modifying consent can include placing restrictions on the processing of PII, which can include restricting the  
 1370 PII controller from deleting the PII in some cases.

1371 Some jurisdictions impose restrictions on the circumstances under which, and the extent to which, a PII  
 1372 principal can modify or withdraw their consent.

1373 The organization should record any request to withdraw or change consent in a similar way to the recording of  
 1374 the consent itself.

1375 Any change of consent should be disseminated, through appropriate systems, to authorized users and to  
 1376 relevant third parties.

1377 The organization should define a response time and requests should be handled according to it.

#### 1378 **Additional information**

1379 When consent for particular processing of PII is withdrawn, all the processing of PII performed before  
 1380 withdrawal should normally be considered as appropriate, but the results of such processing should not be  
 1381 used for new processing. For example, if a PII principal withdraws their consent for profiling, their profile  
 1382 should not be further used or consulted.

**7.3.5 Provide mechanism to object to PII processing****Control**

The organization should provide a mechanism for PII principals to object to the processing of their PII.

**Implementation guidance**

Some jurisdictions provide PII principals with a right to object to the processing of their PII. Organizations operating in these jurisdictions should ensure that they implement appropriate measures to enable PII principals to exercise this right.

The organization should document the legal and regulatory requirements related to objections by the PII principals to processing (e.g., objection relating to the processing of PII for direct marketing purposes). The organization should provide information to principals regarding the ability to object in these situations. Mechanisms to object can vary, but should be consistent with the type of service provided (e.g., online services should provide this capability online).

**7.3.6 Access, correction and/or erasure****Control**

The organization should implement policies, procedures and/or mechanisms to meet their obligations to PII principals to access, correct and/or erase their PII.

**Implementation guidance**

The organization should implement policies, procedures and/or mechanisms for enabling PII principals to obtain access to, correction and erasure of their PII, if requested and without undue delay, if not against applicable laws.

The organization should define a response time and requests should be handled according to it.

Any corrections or erasures should be disseminated through the system and/or to authorized users, and should be passed to third parties (see 7.3.7) to whom the PII has been transferred.

NOTE Records generated by the control specified in 7.5.3 could help in this regard.

The organization should implement policies, procedures and/or mechanisms for use when there could be a dispute about the accuracy or correction of the data by the PII principal. These policies, procedures and/or mechanisms should include informing the PII principal of what changes were made, and of reasons why corrections could not be made (where this is the case).

Some jurisdictions impose restrictions on the circumstances under which, and the extent to which, a PII principal can request correction or erasure of their PII. The organization should determine, keep up to date and abide by, any such restrictions that could be applicable.

**7.3.7 PII controllers' obligations to inform third parties****Control**

The organization should implement policies, procedures and/or mechanisms to inform third parties with whom the PII has been shared of any modification, withdrawal or objections pertaining to the shared PII.

**Implementation guidance**

Some jurisdictions impose a legal requirement to inform these third parties of these results.

1420 The organization should take appropriate steps, bearing in mind the available technology, to inform third  
1421 parties of any modification or withdrawal of consent, or objections pertaining to the shared PII.

1422 The organization should determine and maintain active communication channels with third parties. Related  
1423 responsibilities can be assigned to individuals in charge of their operations and maintenance. When informing  
1424 third parties, the organization should monitor their acknowledgement of receipt of the information.

1425 NOTE Changes resulting from the obligations to PII principals could include modification or withdrawal of consent,  
1426 requests for correction, erasure, or restrictions on processing, or objections to the processing of PII as requested by the  
1427 PII principal.

### 1428 **7.3.8 Providing copy of PII processed**

#### 1429 **Control**

1430 The organization should be able to provide a copy of the PII that is being processed when requested by the  
1431 PII principal.

#### 1432 **Implementation guidance**

1433 The organization should provide a copy of the PII that is being processed in a structured, commonly used,  
1434 format accessible by the PII principal.

1435 Some jurisdictions define cases where the organization should provide a copy of the PII being processed in a  
1436 format allowing portability to the PII principals or to recipient PII controllers (typically structured, commonly  
1437 used and machine readable).

1438 The organization should ensure that any copies of PII provided to a PII principal relate specifically to that PII  
1439 principal.

1440 Where the requested PII has already been deleted subject to the retention and disposal policy (as described  
1441 in 7.4.6), the PII controller should inform the PII principal that the requested PII has been deleted.

1442 In cases where the organization is no longer able to identify the PII principal (e.g. as a result of a de-  
1443 identification process), the organization should not seek to (re-)identify the PII principals for the sole reason of  
1444 implementing this control. In this case, additional information should be requested from the PII principal to  
1445 enable re-identification and subsequent disclosure.

1446 Where technically feasible, it should be possible to transfer a copy of the PII from one organization directly to  
1447 another organization, at the request of the PII principal.

### 1448 **7.3.9 Handling requests**

#### 1449 **Control**

1450 The organization should define and document policies and procedures for handling and responding to  
1451 legitimate requests from PII principals.

#### 1452 **Implementation guidance**

1453 Legitimate requests could include requests for a copy of PII being processed, or requests to lodge a complaint.

1454 Some jurisdictions allow the organization to charge a fee in certain cases (e.g., excessive or repetitive  
1455 requests).

1456 Requests should be handled within the appropriate defined response times and in accordance with applicable  
1457 legislation and/or regulation.

Some jurisdictions define response times, depending on the complexity and number of the requests, as well as requirements to inform PII principals of any delay. The appropriate response times should be defined in the privacy policy.

### 7.3.10 Automated decision making

#### Control

The organization should identify and address all obligations, including legal obligations, to the PII principals resulting from decisions made by the organization and related to the PII principal based solely on automated processing of PII.

#### Implementation guidance

Some jurisdictions define specific obligations to PII principals when a decision based solely on automated processing of PII significantly affects them, such as notifying the existence of automated decision making, allowing for the PII principals to object to such decision making, and/or obtaining human intervention.

NOTE In some jurisdictions, some processing of PII cannot be fully automated.

Organizations operating in these jurisdictions should ensure that they comply with these obligations.

## 7.4 Privacy by design and privacy by default

Objective: To ensure that processes and systems are designed such that the collection and processing (including use, disclosure, retention, transmission and disposal) are limited to what is necessary for the identified purpose.

### 7.4.1 Limit collection

#### Control

The organization should limit the collection of PII to the minimum that is relevant, proportional and necessary for the identified purposes.

#### Implementation guidance

The organization should limit the collection of PII to what is adequate, relevant and necessary in relation to the identified purposes. This includes limiting the amount of PII that the organization collects indirectly (e.g., through web logs, system logs, etc.).

Privacy by default implies that, where any optionality in the collection and processing of PII exists, each option should be disabled by default and only enabled by explicit choice of the PII principal.

### 7.4.2 Limit processing

#### Control

The organization should limit the processing of PII to that which is adequate, relevant and necessary for the identified purposes.

#### Implementation guidance

Limiting the processing of PII needs to be managed through information security and privacy policies (see 6.2) along with documented procedures for their adoption and compliance.

1493 Processing of PII, including the period of PII storage and who is able to access the PII, should be limited by  
1494 default to the minimum necessary relative to the identified purposes.

### 1495 **7.4.3 Accuracy and quality**

#### 1496 **Control**

1497 The organization should ensure and document that PII is as accurate, complete and up-to-date as is  
1498 necessary for the purposes for which it is to be processed, throughout the life-cycle of the PII.

#### 1499 **Implementation guidance**

1500 The organization should implement policies, procedures and/or mechanisms to minimize inaccuracies in the  
1501 PII it processes. There should also be policies, procedures and/or mechanisms to respond to instances of  
1502 inaccurate PII. These policies, procedures and/or mechanisms should be well documented (e.g., through  
1503 technical system configurations, etc.) and should apply throughout the PII lifecycle.

#### 1504 **Additional information**

1505 For further information on the PII processing life-cycle, see ISO/IEC 29101:2013, 6.2.

### 1506 **7.4.4 PII minimization and de-identification objectives**

#### 1507 **Control**

1508 The organization should define and document data minimization objectives and how those objectives are met,  
1509 including what mechanisms (such as de-identification) are used.

#### 1510 **Implementation guidance**

1511 Organizations should identify how the specific PII and amount of PII collected and processed is limited relative  
1512 to the identified purposes: this can include the use of de-identification or other data minimization techniques.

1513 The identified purpose (see 7.2.1) can require the processing of PII that has not been de-identified, in which  
1514 case the organization should be able to describe such processing.

1515 In other cases, the identified purpose might not require the processing of the original PII, and the processing  
1516 of PII which has been de-identified can suffice to achieve the identified purpose. In these cases, the  
1517 organization should define and document the extent to which the PII needs to be associated with the PII  
1518 principal, as well as the mechanisms and techniques designed to process PII, such that the de-identification  
1519 and/or PII minimization objectives are achieved.

1520 Mechanisms used to minimize PII will vary depending on the type of processing and the systems used for the  
1521 processing. The organization should document any mechanisms (technical system configurations, etc.) used  
1522 to implement data minimization.

1523 In those cases where processing of de-identified data is sufficient for the purposes, the organization should  
1524 document any mechanisms (technical system configurations, etc.) designed to implement de-identification  
1525 objectives set by the organization in a timely manner. For instance, the removal of attributes associated with  
1526 PII principals can be sufficient to allow the organization to achieve its identified purpose. In other cases, other  
1527 de-identification techniques, such as generalization (e.g., rounding) or randomization techniques (e.g., noise  
1528 addition) can be used to achieve an adequate level of de-identification.

1529 **NOTE 1** For further information on de-identification techniques, refer to ISO IEC 20889.

1530 **NOTE 2** For Cloud computing, ISO/IEC 19944 provides a definition of data identification qualifiers that can be used to  
1531 classify the degree to which the data can identify a PII principal or associate a PII principal with a set of characteristics in  
1532 the PII.

**7.4.5 PII de-identification and deletion at the end of processing****Control**

The organization should either delete PII or render it in a form which does not permit (re-)identification of PII principals, as soon as the original PII is no longer necessary for the identified purpose(s).

**Implementation guidance**

The organization should have mechanisms to erase the PII when no further processing is anticipated. Alternatively, some de-identification techniques can be used as long as the resulting de-identified data cannot reasonably permit re-identification of PII principals.

**7.4.6 Temporary files****Control**

The organization should ensure that temporary files created as a result of the processing of PII are disposed of (e.g., erased or destroyed) following documented procedures within a specified, documented period.

**Implementation guidance**

The organization should perform periodic checks that unused temporary files are deleted within the identified time period.

**Other information**

Information systems can create temporary files in the normal course of their operation. Such files are specific to the system or application, but can include file system roll-back journals and temporary files associated with the updating of databases and the operation of other application software. Temporary files are not needed after the related information processing task has completed but there are circumstances in which they cannot be deleted. The length of time for which these files remain in use is not always deterministic but a “garbage collection” procedure should identify the relevant files and determine how long it has been since they were last used.

**7.4.7 Retention****Control**

The organization should not retain PII for longer than is necessary for the purposes for which the PII is processed.

**Implementation guidance**

The organization should develop and maintain retention schedules for information it retains, taking into account the requirement to retain PII for no longer than is necessary. Such schedules should take into account legal, regulatory and business requirements. Where such requirements conflict, a business decision needs to be taken (based on a risk assessment) and documented in the appropriate schedule.

**7.4.8 Disposal****Control**

The organization should have documented policies, procedures and/or mechanisms for the disposal of PII.

**Implementation guidance**

1569 The choice of PII disposal techniques will depend on a number of factors, as disposal techniques differ in their  
 1570 properties and outcomes (for example in the granularity of the resultant physical media, or the ability to  
 1571 recover deleted information on electronic media). Factors to consider when choosing an appropriate disposal  
 1572 technique include, but are not limited to, the nature and extent of the PII to be disposed of, whether or not  
 1573 there is metadata associated with the PII, and the physical characteristics of the media upon which the PII is  
 1574 stored.

#### 1575 **7.4.9 PII transmission controls**

##### 1576 **Control**

1577 The organization should subject PII transmitted (e.g. sent to another organization) over a data-transmission  
 1578 network to appropriate controls designed to ensure that the data reaches its intended destination.

##### 1579 **Implementation guidance**

1580 Transmission of PII needs to be controlled, typically by ensuring that only authorized individuals have access  
 1581 to transmission systems, and by following the appropriate processes (including the retention of audit logs) to  
 1582 ensure that PII is transmitted without compromise to the correct recipients.

#### 1583 **7.5 PII sharing, transfer, and disclosure**

1584	Objective: To ensure that PII is shared, transferred to other jurisdictions or third parties and/or disclosed in accordance with applicable obligations.
1585	

##### 1586 **7.5.1 Identify basis for PII transfer between jurisdictions**

##### 1587 **Control**

1588 The organization should identify and document the relevant basis for transfers of PII between jurisdictions.

##### 1589 **Implementation guidance**

1590 PII transfer can be subject to laws or regulations depending on the jurisdiction or international organization to  
 1591 which data is to be transferred (and from where it originates). The organization should document compliance  
 1592 to such requirements as the basis for transfer.

1593 Some jurisdictions may require that information transfer agreements be reviewed by a designated supervisory  
 1594 authority. Organizations operating in such jurisdictions should ensure they are aware of any such  
 1595 requirements.

1596 NOTE Where transfers take place within a specific jurisdiction, the applicable laws and regulations will be the same  
 1597 for the sender and recipient.

##### 1598 **7.5.2 Countries and international organizations to which PII might be transferred**

##### 1599 **Control**

1600 The organization should specify and document the countries and international organizations to which PII might  
 1601 possibly be transferred.

##### 1602 **Implementation guidance**

1603 The identities of the countries and international organizations to which PII might possibly be transferred in  
 1604 normal operations should be made available to customers. The identities of the countries arising from the use  
 1605 of subcontracted PII processing should be included. The countries included should be considered in relation to  
 1606 7.5.1 and any applicable legal or regulatory requirements.

Out of normal operations, there can be cases of transfer made at the request of a law enforcement authority, for which the identity of the countries cannot be specified in advance, or is prohibited by applicable jurisdictions to preserve the confidentiality of a law enforcement investigation (see 7.5.1, 8.5.4 and 8.5.5).

### 7.5.3 Records of transfer of PII

#### Control

The organization should record transfers of PII to or from third parties and ensure cooperation with those parties to support future requests related to obligations to the PII principals.

#### Implementation guidance

Recording can include transfers from third parties of PII which has been modified as a result of PII controllers' managing their obligations, or transfers to third parties to implement legitimate requests from PII principals, including requests to erase PII (e.g., after consent withdrawal).

The organization should have a policy defining the amount of time these records are maintained.

The organization should apply the minimization principle to the records of transfers by collecting only the strictly needed information.

### 7.5.4 Records of PII disclosure to third parties

#### Control

The organization should record disclosures of PII to third parties, including what PII has been disclosed, to whom and at what time.

#### Implementation guidance

PII can be disclosed during the course of normal operations. These disclosures should be recorded. Any additional disclosures to third parties, such as those arising from lawful investigations or external audits, should also be recorded. The records should include the source of the disclosure and the source of the authority to make the disclosure.

## 8 Additional ISO/IEC 27002 guidance for PII processors

### 8.1 General

The guidance contained in ISO/IEC 27002:2013 plus the additions of this clause create the PIMS-specific guidance for PII processors. The implementation guidance documented in clause 8 relate to the controls listed in Annex B.

### 8.2 Conditions for collection and processing

Objective: To ensure that processing is lawful, based on legitimate purposes or consent, and/or other bases as applicable by jurisdiction.

#### 8.2.1 Cooperation agreement

##### Control

The organization should ensure that the contract to process PII addresses (wherever relevant and taking into account the nature of processing and the information available to the organization) the organization's role in providing assistance with the customer's obligations.



1643 **Implementation guidance**

1644 The contract between the organization and the customer should, wherever relevant, and depending upon the  
1645 customer's role (PII controller or PII processor), include (this list is neither definitive nor exhaustive):

- 1646 • Privacy by Design and Privacy by Default (see 7.4, 8.4);
- 1647 • Achieving security of processing;
- 1648 • Notification of personal data breaches to a supervisory authority;
- 1649 • Notification of personal data breaches to customers and PII principals;
- 1650 • Conducting Privacy Impact Assessments (PIA); and
- 1651 • The assurance of assistance by the PII processor if prior consultations with relevant PII protection  
1652 authorities are needed.

1653 Some jurisdictions require that the contract include the subject matter and duration of the processing, the  
1654 nature and purpose of the processing, the type of PII and categories of PII principals.

1655 **8.2.2 Organization's purposes**

1656 **Control**

1657 The organization should ensure that PII processed on behalf of a customer is not processed for any purpose  
1658 independent of the documented instructions of the customer.

1659 **Implementation guidance**

1660 The contract between the organization and the customer should include, but not be limited to, the objective  
1661 and time frame to be achieved by the service.

1662 In order to achieve the customer's purpose, there could be technical reasons why it is appropriate for the  
1663 organization to determine the method for processing PII, consistent with the general instructions of the  
1664 customer but without the customer's express instruction. For example, in order to efficiently utilize network or  
1665 processing capacity it can be necessary to allocate specific processing resources depending on certain  
1666 characteristics of the PII principal.

1667 The organization should allow the customer to verify their compliance with the purpose specification and  
1668 limitation principles. This will also ensure that no PII is processed by the organization or any of its  
1669 subcontractors for further purposes independent of the instructions of the customer.

1670 **8.2.3 Marketing and advertising use**

1671 **Control**

1672 The organization should not use PII processed under a contract for the purposes of marketing and advertising  
1673 without prior consent from the appropriate PII principal. The organization should not make providing such  
1674 consent a condition for receiving the service.

1675 **Implementation guidance**

1676 PII processors need to comply with the customer's contractual requirements, especially where marketing  
1677 and/or advertising is planned.

1678 Organizations should not insist on the inclusion of marketing and/or advertising uses where express consent  
1679 has not been fairly obtained from PII principals.

1680 **NOTE** This control is in addition to the more general control in 8.2.2 and does not replace or otherwise supersede it.

#### 8.2.4 Infringing instruction

##### Control

The organization should inform the customer if, in its opinion, a processing instruction infringes applicable legislation or regulation.

##### Implementation guidance

The organization's ability to check if the instruction infringes legislation can depend on the technological context, on the instruction itself, and on the contract between the organization and the customer.

#### 8.2.5 Customer obligations

##### Control

The organization should provide the customer with the appropriate information such that it can demonstrate compliance with its obligations.

##### Implementation guidance

The information needed by the customer might include whether the organization allows for and contributes to audits, including inspections, conducted by the customer or another auditor mandated or otherwise agreed by the customer.

#### 8.2.6 Records related to processing PII

##### Control

The organization should determine and maintain the necessary records in support of demonstrating compliance with its obligations (as specified in the applicable agreement) for the processing of PII carried out on behalf of a customer.

##### Implementation guidance

Some jurisdictions can require the organization to record information such as:

- categories of processing carried out on behalf of each customer;
- transfers to third countries or international organizations; and
- a general description of the technical and organizational security measures.

### 8.3 Obligations to PII principals

Objective: To ensure that PII principals are provided with the appropriate information about the processing of their PII, and to meet any other applicable obligations to PII principals related to the processing of their PII.

#### 8.3.1 Obligations to PII principals

##### Control

The organization should provide the customer with the means to comply with its obligations related to PII principals.

##### Implementation guidance

1716 A PII controller's obligations can be defined by law, by regulations or by contract. These obligations can  
 1717 include matters where the customer uses the services of the organization for implementation of these  
 1718 obligations. For example, this could include the correction or deletion of PII in a timely fashion.

1719 Where a customer depends on the organization for information or technical measures to facilitate meeting the  
 1720 obligations to PII principals rights, the relevant information or technical measures should be specified in a  
 1721 contract.

## 1722 **8.4 Privacy by design and privacy by default**

1723	Objective: To ensure that processes and systems are designed such that the collection and processing
1724	(including use, disclosure, retention, transmission and disposal) are limited to what is necessary for the
1725	identified purpose.

### 1726 **8.4.1 Temporary files**

#### 1727 **Control**

1728 The organization should ensure that temporary files created as a result of the processing of PII are disposed  
 1729 of (e.g., erased or destroyed) following documented procedures within a specified, documented period.

#### 1730 **Implementation guidance**

1731 The organization should perform periodic checks that unused temporary files are deleted within the identified  
 1732 time period.

#### 1733 **Other information**

1734 Information systems can create temporary files in the normal course of their operation. Such files are specific  
 1735 to the system or application, but can include file system roll-back journals and temporary files associated with  
 1736 the updating of databases and the operation of other application software. Temporary files are not needed  
 1737 after the related information processing task has completed but there are circumstances in which they cannot  
 1738 be deleted. The length of time for which these files remain in use is not always deterministic but a "garbage  
 1739 collection" procedure should identify the relevant files and determine how long it has been since they were last  
 1740 used.

### 1741 **8.4.2 Return, transfer or disposal of PII**

#### 1742 **Control**

1743 The organization should provide a capability for the return, transfer and/or disposal of PII in a secure manner  
 1744 and should make its policy for the exercise of this capability available to the customer.

#### 1745 **Implementation guidance**

1746 At some point in time, PII might need to be disposed of in some manner. This can involve returning the PII to  
 1747 the customer, transferring it to another organization or to a PII controller (e.g., as a result of a merger),  
 1748 deleting or otherwise destroying it, de-identifying it or archiving it. Such capabilities should be managed in a  
 1749 secure manner.

1750 The organization should provide the assurance necessary to allow the customer to ensure that PII processed  
 1751 under a contract is erased (by the organization and any of its subcontractors) from wherever they are stored,  
 1752 including for the purposes of backup and business continuity, as soon as they are no longer necessary for the  
 1753 identified purposes of the customer.

1754 The organization should develop and implement a policy in respect of the disposition of PII and should make  
 1755 this policy available to customer when requested.

The policy should cover the retention period for PII before its disposal after termination of a contract, to protect the customer from losing PII through an accidental lapse of the contract.

NOTE This control and guidance is also relevant under the retention principle (see 7.4.8).

### 8.4.3 PII transmission controls

#### Control

The organization should subject PII transmitted over a data-transmission network to appropriate controls designed to ensure that the data reaches its intended destination.

#### Implementation guidance

Transmission of PII needs to be controlled, typically by ensuring that only authorized individuals have access to transmission systems, and by following the appropriate processes (including the retention of audit data) to ensure that PII is transmitted without compromise to the correct recipients. Requirements for transmission controls can be included in the PII processor – customer contract; if so these requirements should ensure that these requirements are met.

Where no contractual requirements related to transmission are in place, it can be appropriate to take advice from the customer prior to transmission.

## 8.5 PII sharing, transfer, and disclosure

Objective: To ensure that PII is shared, transferred to other jurisdictions or third parties, and/or disclosed in accordance with applicable obligations.

### 8.5.1 Basis for PII transfer between jurisdictions

#### Control

The organization should inform the customer in a timely manner of the basis for PII transfers between jurisdictions and of any intended changes in this regard, so that the customer has the ability to object to such changes or to terminate the contract.

#### Implementation guidance

PII transfer between jurisdictions can be subject to laws or regulations depending on the jurisdiction or organization to which PII is to be transferred (and from where it originates). The organization should document compliance with such requirements as the basis for transfer.

The organization should inform the customer of any transfer of PII, including transfers to:

- suppliers;
- other parties;
- other countries or international organizations.

In case of changes, the organization should inform the customer in advance, according to an agreed timeframe, so that the customer has the ability to object to such changes or to terminate the contract.

The agreement between the organization and the customer can have clauses where the organization can implement changes without informing the customer. In these cases, the limits of this allowance should be set (e.g. the organization can change suppliers without informing the customer, but cannot transfer PII to other countries).

1793 In case of international transfer of PII, agreements such as Model Contract Clauses, Binding Corporate Rules  
 1794 or Cross Border Privacy Rules, the countries involved and the circumstances in which such agreements apply,  
 1795 should be identified.

## 1796 **8.5.2 Countries and international organizations to which PII might be transferred**

### 1797 **Control**

1798 The organization should specify and document the countries and international organizations to which PII might  
 1799 possibly be transferred.

### 1800 **Implementation guidance**

1801 The identities of the countries and international organizations to which PII might possibly be transferred in  
 1802 normal operations should be made available to customers. The identities of the countries arising from the use  
 1803 of subcontracted PII processing should be included. The countries included should be considered in relation to  
 1804 8.5.1 and any applicable legal or regulatory requirements.

1805 Out of normal operations, there can be cases of transfer made at the request of a law enforcement authority,  
 1806 for which the identity of the countries cannot be specified in advance, or is prohibited by applicable  
 1807 jurisdictions to preserve the confidentiality of a law enforcement investigation (see 7.5.1, 8.5.4 and 8.5.5).

## 1808 **8.5.3 Records of PII disclosure to third parties**

### 1809 **Control**

1810 The organization should record disclosures of PII to third parties, including what PII has been disclosed, to  
 1811 whom and when.

### 1812 **Implementation guidance**

1813 PII can be disclosed during the course of normal operations. These disclosures should be recorded. Any  
 1814 additional disclosures to third parties, such as those arising from lawful investigations or external audits,  
 1815 should also be recorded. The records should include the source of the disclosure and the source of the  
 1816 authority to make the disclosure.

## 1817 **8.5.4 Notification of PII disclosure requests**

### 1818 **Control**

1819 The organization should notify the customer of any legally binding requests for disclosure of PII, unless  
 1820 otherwise prohibited by law.

### 1821 **Implementation guidance**

1822 The organization can receive legally binding requests for disclosure of PII (e.g. from law enforcement  
 1823 authorities). In these cases, and where permitted by law, the organization should notify the customer of any  
 1824 such request within agreed timeframes and according to an agreed procedure (which may be included in the  
 1825 data processing contract).

1826 In some cases, the legally binding requests include the requirement for the organization not to notify anyone  
 1827 about the event (an example of a possible prohibition on disclosure would be a prohibition under criminal law  
 1828 to preserve the confidentiality of a law enforcement investigation).

## 1829 **8.5.5 Legally binding PII disclosures**

### 1830 **Control**

The organization should reject any requests for PII disclosures that are not legally binding, consult the corresponding customer where legally permissible before making any PII disclosures and accepting any contractually agreed requests for PII disclosures that are authorized by the corresponding customer.

#### **Implementation guidance**

Details relevant to the implementation of the control can be included in the data processing contract.

Such requests might originate from several sources, including courts, tribunals and administrative authorities. They can arise from any jurisdiction.

### **8.5.6 Disclosure of subcontractors used to process PII**

#### **Control**

The organization should disclose any use of subcontractors to process PII to the customer before use.

#### **Implementation guidance**

Provisions for the use of subcontractors to process PII should be included in the contract between the organization and the customer.

Information disclosed should cover the fact that subcontracting is used and the names of relevant subcontractors. The information disclosed should also include the countries and international organisations to which subcontractors can transfer data (see 8.5.2) and the means by which subcontractors are obliged to meet or exceed the obligations of the organization (see 8.5.7).

Where public disclosure of subcontractor information is assessed to increase security risk beyond acceptable limits, disclosure should be made under a non-disclosure agreement and/or on the request of the customer. The customer should be made aware that the information is available.

This does not concern the list of countries where the PII might be transferred. This list should be disclosed to the customer in all cases in a way that allow them to inform the appropriate PII principals.

### **8.5.7 Engagement of a subcontractor to process PII**

#### **Control**

The organization should only engage a subcontractor to process PII according to the contract agreed with the customer.

#### **Implementation guidance**

Where the organization subcontracts some or all of the processing of that PII to another organization, then written authorization from the customer is required prior to the PII being processed by the subcontractor. This can be in the form of appropriate clauses in the PII processor – customer agreement, or can be a specific 'one-off' agreement.

The organization should have a written contract with any sub-contractors that it uses, and should ensure that their contracts with sub-contractors address the implementation of the appropriate controls in Annex B.

The contract between the organization and any sub-contractor processing PII on its behalf should require the sub-contractor to implement the appropriate controls specified in Annex B, taking account of the information security risk assessment process (see 5.4.1.2) and the scope of the processing of PII performed by the PII processor (see 6.12). By default, all controls specified in Annex B should be assumed as relevant. If the organization decides to not require the sub-contractor to implement a control from Annex B, it should justify its exclusion.

1870 A contract can define the responsibilities of each party differently but, to be consistent with this document, all  
1871 controls should be considered and documented.

1872 **8.5.8 Change of subcontractor to process PII**

1873 **Control**

1874 The organization should, in the case of having general written authorization, inform the customer of any  
1875 intended changes concerning the addition or replacement of subcontractors to process PII, thereby giving the  
1876 customer the opportunity to object to such changes.

1877 **Implementation guidance**

1878 Where the organization changes the organization with which it subcontracts some or all of the processing of  
1879 that PII, then written authorization from the customer is required for the change, prior to the PII being  
1880 processed by the new subcontractor. This can be in the form of appropriate clauses in the PII processor –  
1881 customer agreement, or can be a specific 'one-off' agreement.

Annex A  
(normative)

PIMS specific reference control objectives and controls (PII Controllers)

This Annex is for use by organizations acting as PII controllers, with or without the use of PII processors. It extends Annex A of ISO/IEC 27001:2013.

The additional or modified control objectives and controls listed in Table A.1 are directly derived from and aligned with those defined in this document and are to be used in context with ISO/IEC 27001:2013, 6.1.3 as refined by Clause 5.3 of this document.

Not all the control objectives and controls listed in this Annex need to be included in the PIMS implementation. A justification for excluding any control objectives shall be included in the Statement of Applicability (see 5.4.1.3). Justification for exclusion may include where the controls are not deemed necessary by the risk assessment, or where they are not required by (or are subject to exceptions under) the laws and/or regulations applicable to the PII principal.

NOTE      Section numbers in this Annex relate to the paragraph numbers in section 7 of this document.

Table A.1 — Control objectives and controls

<div>A.7.2 Conditions for collection and processing</div> <div>Objective:</div> <div>To ensure that processing is lawful, with legal basis as per applicable jurisdictions, with clearly defined and legitimate purposes.</div>		
A.7.2.1	Identify and document purpose	<div>Control</div> <div>The organization shall identify and document the specific purposes for which the PII will be processed.</div>
A.7.2.2	Identify lawful basis	<div>Control</div> <div>The organization shall determine, document and comply with the relevant lawful basis for the processing of PII for the identified purposes.</div>
A.7.2.3	Determine when and how consent is to be obtained	<div>Control</div> <div>The organization shall determine and document a process by which it can demonstrate if, when and how consent for the processing of PII was obtained from PII principals</div>
A.7.2.4	Obtain and record consent	<div>Control</div> <div>The organization shall obtain and record consent from PII principals according to the documented processes.</div>



A.7.2.5	Privacy impact assessment	<p><i>Control</i></p> <p>The organization shall assess the need for, and implement where appropriate, a privacy impact assessment whenever new processing of PII or changes to existing processing of PII is planned.</p>
A.7.2.6	Contracts with PII processors	<p><i>Control</i></p> <p>The organization shall have a written contract with any PII processor that it uses, and shall ensure that their contracts with PII processors address the implementation of the appropriate controls in Annex B.</p>
A.7.2.7	Joint PII controller	<p><i>Control</i></p> <p>The organization shall determine respective roles and responsibilities for the processing of PII (including PII protection and security requirements) with any joint PII controller.</p>
A.7.2.8	Records related to processing PII	<p><i>Control</i></p> <p>The organization shall determine and securely maintain the necessary records in support of its obligations for the processing of PII.</p>
<p><b>A.7.3 Obligations to PII principals</b></p> <p>Objective:</p> <p>To ensure that PII principals are provided with appropriate information about the processing of their PII, and to meet any other applicable obligations to PII principals related to the processing of their PII.</p>		
A.7.3.1	Determining and fulfilling obligations to PII principals	<p><i>Control</i></p> <p>The organization shall determine, document and comply with their legal, regulatory and business obligations to PII principals, related to the processing of their PII and provide the means to meet these obligations.</p>
A.7.3.2	Determining information for PII principals	<p><i>Control</i></p> <p>The organization shall determine and document the information which is to be provided to PII principals regarding the processing of their PII and the timing of such a provision.</p>
A.7.3.3	Providing information to PII principals	<p><i>Control</i></p> <p>The organization shall provide PII principals with clear and easily accessible information related to the PII controller and the processing of their PII.</p>
A.7.3.4	Provide mechanism to modify or withdraw consent	<p><i>Control</i></p> <p>The organization shall provide a mechanism for PII principals to modify or withdraw their consent.</p>

A.7.3.5	Provide mechanism to object to PII processing	<i>Control</i> The organization shall provide a mechanism for PII principals to object to the processing of their PII.
A.7.3.6	Access, correction and/or erasure	<i>Control</i> The organization shall implement policies, procedures and/or mechanisms to meet their obligations to PII principals to access, correct and/or erase their PII.
A.7.3.7	PII controllers' obligations to inform third parties	<i>Control</i> The organization shall implement policies, procedures and mechanisms to inform third parties with whom the PII has been shared of any modification, withdrawal or objections pertaining to the shared PII.
A.7.3.8	Providing copy of PII processed	<i>Control</i> The organization shall be able to provide a copy of the PII that is being processed when requested by the PII principal.
A.7.3.9	Handling requests	<i>Control</i> The organization shall define and document policies and procedures for handling and responding to legitimate requests from PII principals.
A.7.3.10	Automated decision making	<i>Control</i> The organization shall identify and address all obligations, including legal obligations, to the PII principals resulting from decisions made by the organization and related to the PII principal based solely on automated processing of PII.
<b>A.7.4 Privacy by design and by privacy default</b> Objective: To ensure that processes and systems are designed such that the collection and processing (including use, disclosure, retention, transmission and disposal) are limited to what is necessary for the identified purpose.		
A.7.4.1	Limit collection	<i>Control</i> The organization shall limit the collection of PII to the minimum that is relevant, proportional and necessary for the identified purposes.
A.7.4.2	Limit processing	<i>Control</i> The organization shall limit the processing of PII to that which is adequate, relevant and necessary for the identified purposes.

A.7.4.3	Accuracy and quality	<p><i>Control</i></p> <p>The organization shall ensure and document that PII is as accurate, complete and up-to-date as is necessary for the purposes for which it is to be processed, throughout the life-cycle of the PII.</p>
A.7.4.4	PII minimization and de-identification objectives	<p><i>Control</i></p> <p>The organization should define and document data minimization objectives and how those objectives are met, including what mechanisms (such as de-identification) are used.</p>
A.7.4.5	PII de-identification and deletion at the end of processing	<p><i>Control</i></p> <p>The organization shall either delete PII or render it in a form which does not permit (re-)identification of PII principals, as soon as the original PII is no longer necessary for the identified purpose(s).</p>
A.7.4.6	Temporary files	<p><i>Control</i></p> <p>The organization shall ensure that temporary files created as a result of the processing of PII are disposed of (e.g., erased or destroyed) following documented procedures within a specified, documented period.</p>
A.7.4.7	Retention	<p><i>Control</i></p> <p>The organization shall not retain PII for longer than is necessary for the purposes for which the PII is processed.</p>
A.7.4.8	Disposal	<p><i>Control</i></p> <p>The organization shall have documented policies, procedures and/or mechanisms for the disposal of PII.</p>
A.7.4.9	PII transmission controls	<p><i>Control</i></p> <p>The organization shall subject PII transmitted (e.g. sent to another organization) over a data-transmission network to appropriate controls designed to ensure that the data reaches its intended destination.</p>
<p><b>A.7.5 PII sharing, transfer and disclosure</b></p> <p>Objective:</p> <p>To ensure that PII is shared, transferred to other jurisdictions or third parties and/or disclosed in accordance with applicable obligations.</p>		
A.7.5.1	Identify basis for PII transfer between jurisdictions	<p><i>Control</i></p> <p>The organization shall identify and document the relevant basis for transfers of PII between jurisdictions.</p>

A.7.5.2	Countries and international organizations to which PII might be transferred	<i>Control</i> The organization shall specify and document the countries and international organizations to which PII might possibly be transferred.
A.7.5.3	Records of transfer of PII	<i>Control</i> The organization shall record transfers of PII to or from third parties and ensure cooperation with those parties to support future requests related to obligations to the PII principals.
A.7.5.4	Records of PII disclosures to third parties	<i>Control</i> The organization shall record disclosures of PII to third parties, including what PII has been disclosed, to whom and at what time.

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## Annex B (normative)

### PIMS specific reference control objectives and controls (PII Processors)

This Annex is for use by organizations acting as PII processors, with or without the use of PII subcontractors. It extends Annex A of ISO/IEC 27001:2013.

The additional or modified control objectives and controls listed in Table B.1 are directly derived from and aligned with those defined in this document and are to be used in context with ISO/IEC 27001:2013, 6.1.3 as refined by this document.

Not all the control objectives and controls listed in this Annex need to be included in the PIMS implementation. A justification for excluding any control objectives shall be included in the Statement of Applicability (see 5.4.1.3). Justification for exclusion may include where the controls are not deemed necessary by the risk assessment, or where they are not required by (or are subject to exceptions under) the laws and/or regulations applicable to the PII principal.

NOTE Section numbers in this Annex relate to the paragraph numbers in section 7 of this document.

**Table B.1 — Control objectives and controls**

<b>B.8.2 Conditions for collection and processing</b>		
<b>Objective:</b> To ensure that processing is lawful, based on legitimate purposes or consent, and/or other bases as applicable by jurisdiction.		
B.8.2.1	Cooperation agreement	<i>Control</i> The organization shall ensure that the contract to process PII addresses (wherever relevant and taking into account the nature of processing and the information available to the organization) the organization's role in providing assistance with the customer's obligations.
B.8.2.2	Organization's purposes	<i>Control</i> The organization shall ensure that PII processed on behalf of a customer is not processed for any purpose independent of the documented instructions of the customer.
B.8.2.3	Marketing and advertising use	<i>Control</i> The organization shall not use PII processed under a contract for the purposes of marketing and advertising without prior consent from the appropriate PII principal. The organization shall not make providing such consent a condition for receiving the service.
B.8.2.4	Infringing instruction	<i>Control</i> The organization shall inform the customer if, in its opinion, a processing instruction infringes applicable legislation or regulation.

B.8.2.5	Customer obligations	<i>Control</i> The organization shall provide the customer with the appropriate information such that it can demonstrate compliance with its obligations.
B.8.2.6	Records related to processing PII	<i>Control</i> The organization shall determine and maintain the necessary records in support of demonstrating compliance with its obligations (as specified in the applicable agreement) for the processing of PII carried out on behalf of a customer.
<b>B.8.3 Obligations to PII principals</b>  Objective: To ensure that PII principals are provided with the appropriate information about the processing of their PII, and to meet any other applicable obligations to PII principals related to the processing of their PII.		
B.8.3.1	Obligations to PII principals	<i>Control</i> The organization shall provide the customer with the means to comply with its obligations related to PII principals.
<b>B.8.4 Privacy by design and privacy by default</b>  Objective: To ensure that processes and systems are designed such that the collection and processing (including use, disclosure, retention, transmission and disposal) are limited to what is necessary for the identified purpose.		
B.8.4.1	Temporary files	<i>Control</i> The organization shall ensure that temporary files created as a result of the processing of PII are disposed of (e.g., erased or destroyed) following documented procedures within a specified, documented period.
B.8.4.2	Return, transfer or disposal of PII	<i>Control</i> The organization shall provide a capability for the return, transfer and/or disposal of PII in a secure manner and shall make its policy for the exercise of this capability available to the customer.
B.8.4.3	PII transmission controls	<i>Control</i> The organization shall subject PII transmitted over a data-transmission network to appropriate controls designed to ensure that the data reaches its intended destination.
<b>B.8.5 PII sharing, transfer and disclosure</b>  Objective: To ensure that PII is shared, transferred to other jurisdiction or third parties, and/or disclosed in accordance with applicable obligations.		

B.8.5.1	Basis for PII transfer between jurisdictions	<p><i>Control</i></p> <p>The organization shall inform the customer in a timely manner of the basis for PII transfers between jurisdictions and of any intended changes in this regard, so that the customer has the ability to object to such changes or to terminate the contract.</p>
B.8.5.2	Countries and international organizations to which PII might be transferred	<p><i>Control</i></p> <p>The organization shall specify and document the countries and international organizations to which PII might possibly be transferred.</p>
B.8.5.3	Records of PII disclosures to third parties	<p><i>Control</i></p> <p>The organization shall record disclosures of PII to third parties, including what PII has been disclosed, to whom and when.</p>
B.8.5.4	Notification of PII disclosure requests	<p><i>Control</i></p> <p>The organization shall notify the customer of any legally binding requests for disclosure of PII, unless otherwise prohibited by law.</p>
B.8.5.5	Legally binding PII disclosures	<p><i>Control</i></p> <p>The organization shall reject any requests for PII disclosures that are not legally binding, consult the corresponding customer where legally permissible before making any PII disclosures and accepting any contractually agreed requests for PII disclosures that are authorized by the corresponding customer.</p>
B.8.5.6	Disclosures of subcontractors used to process PII	<p><i>Control</i></p> <p>The organization shall disclose any use of subcontractors to process PII to the customer before use.</p>
B.8.5.7	Engagement of a subcontractor to process PII	<p><i>Control</i></p> <p>The organization shall only engage a subcontractor to process PII according to the contract agreed with the customer.</p>
B.8.5.8	Change of subcontractor to process PII	<p><i>Control</i></p> <p>The organization shall, in the case of having general written authorization, inform the customer of any intended changes concerning the addition or replacement of subcontractors to process PII, thereby giving the customer the opportunity to object to such changes.</p>

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## Annex C (informative)

### Mapping to the General Data Protection Regulation

This table gives an indicative mapping between provisions of this document and Articles 5 to 49 except 43 of the General Data Protection Regulation of the European Union. It shows how compliance to requirements and controls of this document can be relevant to fulfil obligations of GDPR.

However it is purely indicative and as per this document, it is the organizations responsibility to assess its legal obligations and decide how to comply with them.

#### C.1 Mapping ISO/IEC 27552 structure to GDPR articles

ISO/IEC 27552 sub-clause	GDPR article
5.2.1	(23)(1)(a), (23)(1)(b), (23)(1)(c), (23)(1)(d), (23)(1)(e), (23)(1)(f), (23)(1)(g), (23)(1)(h), (23)(1)(i), (23)(1)(j), (23)(2)(a), (23)(2)(b), (23)(2)(c), (23)(2)(d), (23)(2)(e), (23)(2)(f), (23)(2)(g), (23)(2)(h), (24)(3), (25)(3), (28)(5), (28)(6), (28)(7), (28)(8), (28)(10), (32)(3), (40)(1), (40)(2)(a), (40)(2)(b), (40)(2)(c), (40)(2)(d), (40)(2)(e), (40)(2)(f), (40)(2)(g), (40)(2)(h), (40)(2)(i), (40)(2)(j), (40)(2)(k), (40)(3), (40)(4), (40)(5), (40)(6), (40)(7), (40)(8), (40)(9), (40)(10), (40)(11), (41)(1), (41)(2)(a), (41)(2)(b), (41)(2)(c), (41)(2)(d), (41)(3), (41)(4), (41)(5), (41)(6), (42)(1), (42)(2), (42)(3), (42)(4), (42)(5), (42)(6), (42)(7), (42)(8)
5.2.2	(31), (35)(9), (36)(1), (36)(2), (36)(3)(a), (36)(3)(b), (36)(3)(c), (36)(3)(d), (36)(3)(e), (36)(3)(f), (36)(4), (36)(5)
5.2.3	(32)(2)
5.2.4	(32)(2)
5.4.1.2	(32)(1)(b), (32)(2)
5.4.1.3	(32)(1)(b), (32)(2)
6.2.1.1	(24)(2)
6.3.1.1	(27)(1), (27)(2)(a), (27)(2)(b), (27)(3), (27)(4), (27)(5), (37)(1)(a), (37)(1)(b), (37)(1)(c), (37)(2), (37)(3), (37)(4), (37)(5), (37)(6), (37)(7), (38)(1), (38)(2), (38)(3), (38)(4), (38)(5), (38)(6), (39)(1)(a), (39)(1)(b), (39)(1)(c), (39)(1)(d), (39)(1)(e), (39)(2)
6.4.2.2	(39)(1)(b)
6.5.2.1	(5)(1)(f), (32)(2)
6.5.3.1	(5)(1)(f), (32)(1)(a)
6.5.3.3	(5)(1)(f), (32)(1)(a)
6.6.2.1	(5)(1)(f)
6.6.2.2	(5)(1)(f)
6.6.4.2	(5)(1)(f)
6.7.1.1	(32)(1)(a)
6.8.2.7	(5)(1)(f)
6.8.2.9	(5)(1)(f)



6.9.3.1	(5)(1)(f), (32)(1)(c)
6.9.4.1	(5)(1)(f)
6.9.4.2	(5)(1)(f)
6.10.2.1	(5)(1)(f)
6.10.2.4	(5)(1)(f), (28)(3)(b), (38)(5)
6.11.1.2	(5)(1)(f), (32)(1)(a)
6.11.2.5	(25)(1)
6.11.3.1	(5)(1)(f)
6.12.1.2	(5)(1)(f), (28)(1), (28)(3)(a), (28)(3)(b), (28)(3)(c), (28)(3)(d), (28)(3)(e), (28)(3)(f), (28)(3)(g), (28)(3)(h), (30)(2)(d), (32)(1)(b)
6.13.1.1	(5)(1)(f), (33)(1), (33)(3)(a), (33)(3)(b), (33)(3)(c), (33)(3)(d), (33)(4), (33)(5), (34)(1), (34)(2), (34)(3)(a), (34)(3)(b), (34)(3)(c), (34)(4)
6.13.1.5	(33)(1), (33)(2), (33)(3)(a), (33)(3)(b), (33)(3)(c), (33)(3)(d), (33)(4), (33)(5), (34)(1), (34)(2)
6.15.1.1	(5)(1)(f), (28)(1), (28)(3)(a), (28)(3)(b), (28)(3)(c), (28)(3)(d), (28)(3)(e), (28)(3)(f), (28)(3)(g), (28)(3)(h), (30)(2)(d), (32)(1)(b)
6.15.1.3	(5)(2), (24)(2)
6.15.2.1	(32)(1)(d), (32)(2)
6.15.2.3	(32)(1)(d), (32)(2)
7.2.1	(5)(1)(b), (32)(4)
7.2.2	(10), (5)(1)(a), (6)(1)(a), (6)(1)(b), (6)(1)(c), (6)(1)(d), (6)(1)(e), (6)(1)(f), (6)(2), (6)(3), (6)(4)(a), (6)(4)(b), (6)(4)(c), (6)(4)(d), (6)(4)(e), (8)(3), (9)(1), (9)(2)(b), (9)(2)(c), (9)(2)(d), (9)(2)(e), (9)(2)(f), (9)(2)(g), (9)(2)(h), (9)(2)(i), (9)(2)(j), (9)(3), (9)(4), (17)(3)(a), (17)(3)(b), (17)(3)(c), (17)(3)(d), (17)(3)(e), (18)(2), (22)(2)(a), (22)(2)(b), (22)(2)(c), (22)(4)
7.2.3	(8)(1), (8)(2)
7.2.4	(7)(1), (7)(2), (9)(2)(a)
7.2.5	(35)(1), (35)(2), (35)(3)(a), (35)(3)(b), (35)(3)(c), (35)(4), (35)(5), (35)(7)(a), (35)(7)(b), (35)(7)(c), (35)(7)(d), (35)(8), (35)(9), (35)(10), (35)(11), (36)(1), (36)(2), (36)(3)(a), (36)(3)(b), (36)(3)(c), (36)(3)(d), (36)(3)(e), (36)(3)(f), (36)(4), (36)(5)
7.2.6	(5)(2), (28)(3)(e), (28)(9)
7.2.7	(26)(1), (26)(2), (26)(3)
7.2.8	(5)(2), (24)(1), (30)(1)(a), (30)(1)(b), (30)(1)(c), (30)(1)(d), (30)(1)(f), (30)(1)(g), (30)(3), (30)(4), (30)(5)
7.3.1	(12)(2)
7.3.2	(11)(2), (13)(3), (13)(1)(a), (13)(1)(b), (13)(1)(c), (13)(1)(d), (13)(1)(e), (13)(1)(f), (13)(2)(c), (13)(2)(d), (13)(2)(e), (13)(4), (14)(1)(a), (14)(1)(b), (14)(1)(c), (14)(1)(d), (14)(1)(e), (14)(1)(f), (14)(2)(b), (14)(2)(e), (14)(2)(f), (14)(3)(a), (14)(3)(b), (14)(3)(c), (14)(4), (14)(5)(a), (14)(5)(b), (14)(5)(c), (14)(5)(d), (15)(1)(a), (15)(1)(b), (15)(1)(c), (15)(1)(d), (15)(1)(e), (15)(1)(f), (15)(1)(g), (15)(1)(h), (15)(2), (18)(3), (21)(4)
7.3.3	(11)(2), (12)(1), (12)(7), (12)(8), (13)(3), (15)(1)(a), (15)(1)(b), (15)(1)(c), (15)(1)(d), (15)(1)(e), (15)(1)(f), (15)(1)(g), (15)(1)(h), (21)(4)
7.3.4	(7)(3), (13)(2)(c), (14)(2)(d), (18)(1)(a), (18)(1)(b), (18)(1)(c), (18)(1)(d)
7.3.5	(13)(2)(b), (14)(2)(c), (21)(1), (21)(2), (21)(3), (21)(5), (21)(6)

7.3.6	(5)(1)(d), (13)(2)(b), (14)(2)(c), (16), (17)(1)(a), (17)(1)(b), (17)(1)(c), (17)(1)(d), (17)(1)(e), (17)(1)(f), (17)(2)
7.3.7	(19)
7.3.8	(13)(2)(b), (14)(2)(c), (15)(3), (15)(4), (20)(1), (20)(2), (20)(3), (20)(4)
7.3.9	(15)(1)(a), (15)(1)(b), (15)(1)(c), (15)(1)(d), (15)(1)(e), (15)(1)(f), (15)(1)(g), (15)(1)(h), (12)(3), (12)(4), (12)(5), (12)(6)
7.3.10	(13)(2)(f), (14)(2)(g), (15)(1)(h), (22)(1), (22)(3)
7.4.1	(5)(1)(b), (5)(1)(c)
7.4.2	(25)(2)
7.4.3	(5)(1)(d)
7.4.4	(5)(1)(c)
7.4.5	(5)(1)(c), (5)(1)(e), (6)(4)(e), (11)(1), (32)(1)(a)
7.4.6	(5)(1)(c)
7.4.7	(13)(2)(a), (14)(2)(a)
7.4.8	(5)(1)(f)
7.5.1	(15)(2), (44), (45)(1), (45)(2)(a), (45)(2)(b), (45)(2)(c), (45)(3), (45)(4), (45)(5), (45)(6), (45)(7), (45)(8), (45)(9), (46)(1), (46)(2)(a), (46)(2)(b), (46)(2)(c), (46)(2)(d), (46)(2)(e), (46)(2)(f), (46)(3)(a), (46)(3)(b), (46)(4), (46)(5), (47)(1)(a), (47)(1)(b), (47)(1)(c), (47)(2)(a), (47)(2)(b), (47)(2)(c), (47)(2)(d), (47)(2)(e), (47)(2)(f), (47)(2)(g), (47)(2)(h), (47)(2)(i), (47)(2)(j), (47)(2)(k), (47)(2)(l), (47)(2)(m), (47)(2)(n), (47)(3), (49)(1)(a), (49)(1)(b), (49)(1)(c), (49)(1)(d), (49)(1)(e), (49)(1)(f), (49)(1)(g), (49)(2), (49)(3), (49)(4), (49)(5), (49)(6), (30)(1)(e), (48)
7.5.2	(15)(2), (30)(1)(e)
7.5.3	(30)(1)(e)
7.5.4	(30)(1)(d)
7.5.5	(5)(1)(f)
8.2.1	(28)(3)(f), (28)(3)(e), (28)(9), (35)(1)
8.2.2	(5)(1)(a), (5)(1)(b), (28)(3)(a), (29), (32)(4)
8.2.3	(7)(4)
8.2.4	(28)(3)(h)
8.2.5	(28)(3)(h)
8.2.6	(30)(3), (30)(4), (30)(5), (30)(2)(a), (30)(2)(b)
8.3.1	(15)(3), (17)(2), (28)(3)(e)
8.4.1	(5)(1)(c)
8.4.2	(28)(3)(g), (30)(1)(f)
8.4.3	(5)(1)(f)
8.5.1	(44), (46)(1), (46)(2)(a), (46)(2)(b), (46)(2)(c), (46)(2)(d), (46)(2)(e), (46)(2)(f), (46)(3)(a), (46)(3)(b), (48), (49)(1)(a), (49)(1)(b), (49)(1)(c), (49)(1)(d), (49)(1)(e), (49)(1)(f), (49)(1)(g), (49)(2), (49)(3), (49)(4), (49)(5), (49)(6)
8.5.2	(30)(2)(c)
8.5.3	(30)(1)(d)

8.5.4	(28)(3)(a)
8.5.5	(48)
8.5.6	(28)(2), (28)(4)
8.5.7	(28)(2), (28)(3)(d)
8.5.8	(28)(2)

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## Annex D (informative)

### Mapping to ISO/IEC 29100

This table gives an indicative mapping between provisions of this document and the principles from ISO/IEC 29100. It shows in a purely indicative manner how compliance to requirements and controls of this document relates to the general privacy principles specified in 29100.

#### D.1 Mapping for PII controllers

<b><i>Privacy Principles of ISO/IEC 29100</i></b>	<b><i>Related Controls for PII controllers</i></b>
1. Consent and Choice	A.7.2.1 Identify and document purpose A.7.2.2 Identify lawful basis A.7.2.3 Determine when and how consent is to be obtained A.7.2.4 Obtain and record consent A.7.2.5 Privacy impact assessment A.7.3.2 Determining information for PII principals A.7.3.3 Providing information to PII principals A.7.3.4 Provide mechanism to modify or withdraw consent A.7.3.5 Provide mechanism to object to processing A.7.3.7 PII controllers' obligations and third parties
2. Purpose of legitimacy and specification	A.7.2.1 Identify and document purpose A.7.2.2 Identify lawful basis A.7.2.5 Privacy impact assessment A.7.3.2 Determining information for PII principals A.7.3.3 Providing information to PII principals
3. Collection limitation	A.7.2.5 Privacy impact assessment A.7.4.1 Limit collection
4. Data minimization	A.7.4.2 Limit processing A.7.4.4 PII minimization and de-identification objectives A.7.4.5 PII de-identification and deletion at the end of processing
5. Use, retention and disclosure limitation	A.7.4.4 PII minimization and de-identification objectives A.7.4.5 PII de-identification and deletion at the end of processing A.7.4.6 Temporary files A.7.4.7 Retention A.7.4.8 Disposal A.7.5.4 Records of PII disclosure to third parties
6. Accuracy and quality	A.7.4.3 Accuracy and quality
7. Openness, transparency and notice	A.7.3.2 Determining information for PII principals A.7.3.3 Providing information to PII principals

	A.7.3.8 Providing copy of PII processed
8. Individual participation and access	A.7.3.1 Determining and fulfilling obligations to PII principals A.7.3.3 Providing copy of PII processed A.7.3.6 Access, correction and/or erasure A.7.3.9 Handling requests A.7.3.10 Automated decision making
9. Accountability	A.7.2.6 Contracts with PII processors A.7.2.7 Joint controller A.7.2.8 Records related to processing PII A.7.3.9 Handling requests A.7.5.1 Identify basis for international PII transfer A.7.5.2 Countries and organizations to which PII might be transferred A.7.5.3 Records and transfer of PII
10. Information Security	A.7.2.6 Contracts with PII processors A.7.4.9 PII transmission controls
11. Privacy compliance	A.7.2.5 Privacy impact assessment

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## D.2 Mapping for PII processors

<b><i>Privacy Principles of ISO/IEC 29100</i></b>	<b><i>Related Controls for PII processors</i></b>
1. Consent and Choice	B.8.2.5 PII controller obligations
2. Purpose of legitimacy and specification	B.8.2.1 Cooperation agreement B.8.2.2 Organization's purposes B.8.2.3 Marketing and advertising use B.8.2.4 Infringing instruction B.8.3.1 Obligations to PII principals
3. Collection limitation	N/A
4. Data minimization	B.8.4.1 Temporary files
5. Use, retention and disclosure limitation	B.8.5.3 Records of PII disclosure to third parties B.8.5.4 Notification of PII disclosure requests B.8.5.5 Legally binding PII disclosures
6. Accuracy and quality	N/A
7. Openness, transparency and notice	B.8.5.6 Disclosure of subcontractors used to process PII B.8.5.7 Engagement of a subcontractor to process PII B.8.5.8 Change of subcontractor to process PII
8. Individual participation and access	N/A
9. Accountability	B.8.2.6 Records related to processing PII B.8.4.2 Return, transfer or disposal of PII B.8.5.1 Identify basis for international PII transfer B.8.5.2 Countries and organizations to which PII might be transferred

10. Information Security	B.8.4.3 PII transmission controls
11. Privacy compliance	B.8.2.5 PII controller obligations

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## Annex E (informative)

### Mapping to ISO/IEC 27018 and ISO/IEC 29151

This table gives an indicative mapping between provisions of this document and provisions from ISO/IEC 27018 and ISO/IEC 29151. It shows how requirements and controls of this document can have some correspondence with provisions from ISO/IEC 27018 and/or ISO/IEC 29151.

It is purely indicative and it should not be assumed that a given link between provisions means equivalence.

ISO/IEC 27552 sub-clause	ISO/IEC 27018 sub-clause	ISO/IEC 29151 sub-clause
5.2	N/A	N/A
5.3	N/A	N/A
5.4	N/A	A.7.12
5.5	7.2.2	7.2.3, A.7.11.5
5.6	N/A	N/A
5.7	N/A	N/A
5.8	N/A	N/A
6.1	N/A	N/A
6.2	6.1.1	A.7.11.1
6.3	N/A	N/A
6.4	N/A	N/A
6.5.1	N/A	8.2.1
6.5.2	A.7.10.5	8.2.6
6.5.3	A.7.10.4	8.3.4
6.6.1	9.2	N/A
6.6.2	9.2.1, A.7.10.10	9.2.2
6.6.3	A.7.10.9	9.2.3
6.6.4	A.7.10.8	9.2.4
6.7	10.1.1	N/A
6.8.1	11.2.7, A.7.10.13	11.2.8
6.8.2	A.7.10.2	N/A
6.9.1	N/A	12.1.5
6.9.2	12.3.1, A.7.10.3	12.3.2
6.9.3	12.4.1	12.4.2

6.9.4	12.4.2	12.4.3
6.9.5	N/A	N/A
6.9.6	N/A	N/A
6.9.7	N/A	N/A
6.10.1	13.2.1	13.2.2
6.10.2	A.7.10.11	13.2.5
6.11.1	A.7.10.6	N/A
6.11.2	N/A	N/A
6.11.3	N/A	N/A
6.12	N/A	N/A
6.13.1	16.1	N/A
6.14	N/A	N/A
6.15.1	A.7.9.2	N/A
6.15.2	18.2.1	18.2.2, A.7.11.4
6.15.3	N/A	N/A
7.2.1	N/A	A.7.4.2
7.2.2	N/A	A.7.4.1
7.2.3	N/A	N/A
7.2.4	N/A	A.7.3.1
7.2.5	N/A	A.7.11.2
7.2.6	N/A	A.7.11.3
7.2.7	N/A	A.7.7.4
7.2.8	N/A	N/A
7.3.1	N/A	A.7.10.1
7.3.2	N/A	N/A
7.3.3	N/A	A.7.4.2, A.7.9.1, A.7.9.2
7.3.4	N/A	N/A
7.3.5	N/A	N/A
7.3.6	N/A	A.7.10.2
7.3.7	N/A	N/A
7.3.8	N/A	N/A
7.3.9	N/A	N/A
7.3.10	N/A	A.7.10.3
7.4.1	N/A	A.7.5, A.7.6



7.4.2	N/A	N/A
7.4.3	N/A	A.7.8
7.4.4	N/A	N/A
7.4.5	N/A	A.7.7.2
7.4.6	N/A	A.7.6
7.4.7	N/A	A.7.7.1
7.4.8	N/A	N/A
7.4.9	N/A	N/A
7.5.1	N/A	A.7.13.2
7.5.2	N/A	A.7.13.2
7.5.3	N/A	A.7.13.2
7.5.4	N/A	A.7.7.3
8.2.1	N/A	N/A
8.2.2	A.7.2.1	N/A
8.2.3	A.7.2.2	N/A
8.2.4	N/A	N/A
8.2.5	N/A	N/A
8.2.6	N/A	N/A
8.3.1	A.7.1.1	N/A
8.4.1	A.7.4.1	N/A
8.4.2	A.7.9.3	N/A
8.4.3	A.7.11.2	N/A
8.5.1	N/A	N/A
8.5.2	A.7.11.1	N/A
8.5.3	A.7.5.1	N/A
8.5.4	N/A	N/A
8.5.5	A.7.5.2	N/A
8.5.6	A.7.7.1	A.7.7.5
8.5.7	N/A	N/A
8.5.8	N/A	N/A

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**Annex F**  
(informative)

**Terms and alternative terms**

There are laws and regulations in many jurisdictions dealing with the protection of PII. In some cases, these laws and regulations use similar terms, in others, different terms are used having identical or similar meanings. Table 1 gives a list of terms used in this document and indicates terms of an identical or similar meaning used in other jurisdictions.

**Table F.1 — Terms and alternative terms**

<b>Term as used in this document</b>	<b>Alternate term</b>
Privacy Information Management System (PIMS)	Personal Information Management System (PIMS)
PII principal	Data subject
PII	Personal data
Privacy by design	Data protection by design
Privacy by default	Data protection by default
PII controller	Controller
PII processor	Processor

## Annex G (informative)

### How to apply ISO/IEC 27552 to ISO/IEC 27001 and ISO/IEC 27002

#### G.1 How to apply this standard

This standard is based on ISO/IEC 27001:2013 and ISO/IEC 27002:2013 and extends their requirements and guidance to take into account, in addition to information security, the protection of privacy of PII principals as potentially affected by the processing of PII. That means, where the term "information security" is used in ISO/IEC 27001 or ISO/IEC 27002 "information security and privacy" applies instead.

Table G.1 gives the mapping of the extension of the term information security in order to apply it to this document.

**Table L.1 — Mapping of the extension of the term information security by privacy**

ISO/IEC 27001	ISO/IEC 27552 (extension)
information security	information security and privacy
information security policy	information security and privacy policy
information security management	information security and privacy information management
information security management system (ISMS)	privacy information management system (PIMS)
information security objectives	information security and privacy objectives
Information security performance	information security and privacy performance
Information security requirements	information security and privacy requirements
information security risk	information security and privacy risk
information security risk assessment	information security and privacy risk assessment
information security risk treatment	information security and privacy risk treatment

Basically, there are three cases for applying this document to protection of privacy of PII principals when processing PII ("privacy"):

1. Application of security standards as is:  
The referring standards apply as it is with the extension of terms as listed above. Therefore, the referring standard is not repeated, but only referred to in respective clauses.

2. Additions to security standards:  
The referring standards apply with additional privacy-specific requirements or implementation guidance.
3. Refinement of security standards:  
The referring standards are refined by privacy-specific requirements or implementation guidance.

## G.2 Example of refinement of security standards

This section describes how the section 5.4.1.2 of this standard is applied to section 6.1.2 of ISO/IEC 27001.

This is the respective section of this document:

### 5.4.1.2 Information security risk assessment

The requirements stated in ISO/IEC 27001:2013, 6.1.2 apply with the following refinements:

#### ISO/IEC 27001:2013, 6.1.2 c) 1) is refined as follows:

The organization shall apply the information security and privacy risk assessment process(s) to identify risks associated with the loss of confidentiality, integrity and availability, within the scope of PIMS.

The organization shall apply the privacy risk assessment process(s) to identify risks related to the processing of PII, within the scope of the PIMS.

The organization shall ensure throughout the risk assessment processes that the relationship between information security and PII protection is appropriately managed.

NOTE The organization can either apply an integrated information security and privacy risk assessment process or two separate ones for information security and the risks related to the processing of PII.

#### ISO/IEC 27001:2013, 6.1.2 d) is refined as follows:

The organization shall assess the potential consequences for both the organization and PII principals, that would result if the risks identified in 6.1.2.c) of ISO/IEC 27001:2013, as refined above, were to materialize.

This is referring to the following section from ISO/IEC 27001:2013:

### 6.1.2 Information security risk assessment

The organization shall define and apply an information security risk assessment process that:

- a) establishes and maintains information security risk criteria that include:
  - 1) the risk acceptance criteria; and
  - 2) criteria for performing information security risk assessments;
- b) ensures that repeated information security risk assessments produce consistent, valid and comparable results;
- c) identifies the information security risks:

- 2018 1) apply the information security risk assessment process to identify risks associated with  
 2019 the loss of confidentiality, integrity and availability for information within the scope of the  
 2020 information security management system; and
- 2021 2) identify the risk owners;
- 2022 d) analyses the information security risks:
- 2023 1) assess the potential consequences that would result if the risks identified in 6.1.2 c) 1)  
 2024 were to materialize;
- 2025 2) assess the realistic likelihood of the occurrence of the risks identified in 6.1.2 c) 1); and
- 2026 3) determine the levels of risk;
- 2027 e) evaluates the information security risks:
- 2028 1) compare the results of risk analysis with the risk criteria established in 6.1.2 a); and
- 2029 2) prioritize the analysed risks for risk treatment.
- 2030 The organization shall retain documented information about the information security risk assessment  
 2031 process.
- 2032 This section of ISO/IEC 27001:2013, when taking into account the protection of privacy of PII principals when  
 2033 processing PII would be amended as following:
- 2034 The organization shall define and apply an information security and privacy risk assessment process  
 2035 that:
- 2036 a) establishes and maintains information security and privacy risk criteria that include:
- 2037 1) the risk acceptance criteria; and
- 2038 2) criteria for performing information security and privacy risk assessments;
- 2039 b) ensures that repeated information security and privacy risk assessments produce consistent, valid  
 2040 and comparable results;
- 2041 c) identifies the information security and privacy risks:
- 2042 1) apply the information security and privacy risk assessment process to identify risks  
 2043 associated with the loss of confidentiality, integrity and availability for information within  
 2044 the scope of the information security and privacy information management system; and
- 2045 2) identify the risk owners;
- 2046 d) analyses the information security and privacy risks:
- 2047 1) assess the potential consequences that would result if the risks identified in 6.1.2.c) were  
 2048 to materialize;
- 2049 2) assess the realistic likelihood of the occurrence of the risks identified in 6.1.2 c) 1); and
- 2050 3) determine the levels of risk;
- 2051 e) evaluates the information security and privacy risks:
- 2052 1) compare the results of risk analysis with the risk criteria established in 6.1.2 a); and

2053 2) prioritize the analysed risks for risk treatment.

2054 The organization shall retain documented information about the information security and privacy risk  
2055 assessment process.

2056 End of the example

2057

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2060 *data categories and data use*
- 2061 [2] ISO/IEC DIS 20899 *Information technology -- Security techniques – Privacy enhancing data de-*  
2062 *identification techniques*
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2064 *management*
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2071 *assessment*
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2075 *notices and consent*
- 2076 [EDITOR'S NOTE: Check status before FDIS, plus link to 7.2]
- 2077

**Form 8A: Committee decision for DIS**

Secretariat:	ISO/IEC JTC 1/SC 27
DIN	N 19115
Project number and title: ISO/IEC CD 27552 - Information technology -- Security techniques -- Extension to ISO/IEC 27001 and ISO/IEC 27002 for privacy information management -- Requirements and guidelines	

This form should be sent to the ISO Central Secretariat (<http://isotc.iso.org/livelink/si/>), together with the draft of the project, by the secretariat of the technical committee or subcommittee concerned.

<b>The accompanying document is submitted for circulation to member body vote:</b> <input checked="" type="checkbox"/> As a DIS
<b>Consensus has been obtained from the P-members of the committee:</b> on 2018-10-04 <input checked="" type="checkbox"/> At the meeting of ISO/IEC JTC 1/SC 27. See Resolution number 5. In document N 19100. <input type="checkbox"/> By ballot initiated on Please attach a copy of the ballot results (if applicable)

<b>Listing of the P-members (NWIP, CD or Resolution)</b>	
P-members in favour:	30
Australia (SA), Brazil (ABNT), Canada (SCC), China (SAC), Costa Rica (INTECO), Denmark (DS), Finland (SFS), France (AFNOR), Germany (DIN), India (BIS), Iran, Islamic Republic of (ISIRI), Ireland (NSAI), Israel (SII), Kenya (KEBS), Korea, Republic of (KATS), Lebanon (LIBNOR), Mauritius (MSB), Mexico (DGN), Netherlands (NEN), New Zealand (NZSO), Panama (COPANIT), Peru (INACAL), Philippines (BPS), Saint Kitts and Nevis (SKNBS), Slovakia (UNMS SR), South Africa (SABS), Sweden (SIS), Switzerland (SNV), Ukraine (DSTU), United Kingdom (BSI)	



P-members voting against:     4  Japan (JISC), Luxembourg (ILNAS), Malaysia (DSM), United States (ANSI)
P-members abstaining:             16  Algeria (IANOR), Argentina (IRAM), Austria (ASI), Belgium (NBN), Côte d'Ivoire (CODINORM), Indonesia (BSN), Italy (UNI), Kazakhstan (KAZMEMST), Poland (PKN), Portugal (IPQ), Romania (ASRO), Russian Federation (GOST R), Singapore (ESG), Spain (UNE), United Arab Emirates (ESMA), Uruguay (UNIT)
P-members who did not vote:   1  Chile (INN)
Remarks:  The text for the 2nd CD of ISO/IEC 27552 was circulated as SC 27 N18410. The summary of voting on SC 27 N18410 was presented as SC 27 N18822 for consideration at the Comment Resolution Meeting held during the SC 27/WG week in held in Gjøvik, Norway, during the SC 27/WG week on 2018-09-30/10-04. The dispositions of comments received on SC 27 N18410 (text for 2nd CD) are shown in SC 27 N19114. As per Gjøvik Resolution 5 of the Comment Resolution Meeting (contained in SC 27 N19100) the text for a 1st DIS of ISO/IEC 27552 as presented in SC 27 N19115 was submitted to the ISO Central Secretariat(ITTf) for the 12-week DIS ballot processing on 2018-10-15.  The negative National Body votes of United States has been satisfactorily resolved and changed to approval.

I hereby confirm that this draft meets the requirements of <a href="#">Part 2</a> of the ISO/IEC Directives:		
<b>Secretariat:</b>  DIN	<b>Date:</b>  2018-10-15	<b>Name/Signature of TC/SC Secretary:</b>  Passia, Krystyna Mrs

## Result of voting

### Ballot Information

<b>Ballot reference</b>	ISO/IEC CD 27552.2 - ISO-IECJTC1-SC27_N18410
<b>Ballot type</b>	CD
<b>Ballot title</b>	Information technology -- Security techniques -- Enhancement to ISO/IEC 27001 for privacy management -- Requirements
<b>Opening date</b>	2018-06-05
<b>Closing date</b>	2018-08-28
<b>Note</b>	2nd CD Registration and Consideration In accordance with resolution 2 (see SC 27 N18431 = WG 5 N1331) of the Comment Resolution Meeting (CRM) held in Wuhan, Hubei Province, China (April 2018) the hereby attached document is circulated for a 12 weeks 2nd CD letter ballot closing by .2018-08-28

### Member responses:

<b>Votes cast (50)</b>	Algeria (IANOR) Argentina (IRAM) Australia (SA) Austria (ASI) Belgium (NBN) Brazil (ABNT) Canada (SCC) China (SAC) Costa Rica (INTECO) Côte d'Ivoire (CODINORM) Denmark (DS) Finland (SFS) France (AFNOR) Germany (DIN) India (BIS) Indonesia (BSN) Iran, Islamic Republic of (ISIRI) Ireland (NSAI) Israel (SII) Italy (UNI) Japan (JISC) Kazakhstan (KAZMEMST) Kenya (KEBS) Korea, Republic of (KATS) Lebanon (LIBNOR) Luxembourg (ILNAS) Malaysia (DSM)
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	Mauritius (MSB) Mexico (DGN) Netherlands (NEN) New Zealand (NZSO) Panama (COPANIT) Peru (INACAL) Philippines (BPS) Poland (PKN) Portugal (IPQ) Romania (ASRO) Russian Federation (GOST R) Saint Kitts and Nevis (SKNBS) Singapore (ESG) Slovakia (UNMS SR) South Africa (SABS) Spain (UNE) Sweden (SIS) Switzerland (SNV) Ukraine (DSTU) United Arab Emirates (ESMA) United Kingdom (BSI) United States (ANSI) Uruguay (UNIT)
<b>Comments submitted (1)</b>	SBS - Small Business Standards
<b>Votes not cast (1)</b>	Chile (INN)

Questions:	
<b>Q.1</b>	"Do you approve the circulation of the draft as a DIS?"

Votes by members	Q.1
<b>Algeria (IANOR)</b>	Abstention
<b>Argentina (IRAM)</b>	Abstention
<b>Australia (SA)</b>	Approval
<b>Austria (ASI)</b>	Abstention
<b>Belgium (NBN)</b>	Abstention
<b>Brazil (ABNT)</b>	Approval
<b>Canada (SCC)</b>	Approval with comments
<b>China (SAC)</b>	Approval
<b>Costa Rica (INTECO)</b>	Approval
<b>Côte d'Ivoire (CODINORM)</b>	Abstention
<b>Denmark (DS)</b>	Approval
<b>Finland (SFS)</b>	Approval
<b>France (AFNOR)</b>	Approval with comments

<b>Germany (DIN)</b>	Approval with comments
<b>India (BIS)</b>	Approval
<b>Indonesia (BSN)</b>	Abstention
<b>Iran, Islamic Republic of (ISIRI)</b>	Approval
<b>Ireland (NSAI)</b>	Approval
<b>Israel (SII)</b>	Approval
<b>Italy (UNI)</b>	Abstention
<b>Japan (JISC)</b>	Disapproval
<b>Kazakhstan (KAZMEMST)</b>	Abstention
<b>Kenya (KEBS)</b>	Approval
<b>Korea, Republic of (KATS)</b>	Approval with comments
<b>Lebanon (LIBNOR)</b>	Approval
<b>Luxembourg (ILNAS)</b>	Disapproval
<b>Malaysia (DSM)</b>	Disapproval
<b>Mauritius (MSB)</b>	Approval
<b>Mexico (DGN)</b>	Approval
<b>Netherlands (NEN)</b>	Approval
<b>New Zealand (NZSO)</b>	Approval
<b>Panama (COPANIT)</b>	Approval
<b>Peru (INACAL)</b>	Approval
<b>Philippines (BPS)</b>	Approval
<b>Poland (PKN)</b>	Abstention
<b>Portugal (IPQ)</b>	Abstention
<b>Romania (ASRO)</b>	Abstention
<b>Russian Federation (GOST R)</b>	Abstention
<b>Saint Kitts and Nevis (SKNBS)</b>	Approval
<b>Singapore (ESG)</b>	Abstention
<b>Slovakia (UNMS SR)</b>	Approval
<b>South Africa (SABS)</b>	Approval
<b>Spain (UNE)</b>	Abstention
<b>Sweden (SIS)</b>	Approval with comments

<b>Switzerland (SNV)</b>	Approval
<b>Ukraine (DSTU)</b>	Approval
<b>United Arab Emirates (ESMA)</b>	Abstention
<b>United Kingdom (BSI)</b>	Approval with comments
<b>United States (ANSI)</b>	Disapproval
<b>Uruguay (UNIT)</b>	Abstention

Answers to Q.1: "Do you approve the circulation of the draft as a DIS?"		
<b>24 x</b>	<b>Approval</b>	<b>Australia (SA)</b> <b>Brazil (ABNT)</b> <b>China (SAC)</b> <b>Costa Rica (INTECO)</b> <b>Denmark (DS)</b> <b>Finland (SFS)</b> <b>India (BIS)</b> <b>Iran, Islamic Republic of (ISIRI)</b> <b>Ireland (NSAI)</b> <b>Israel (SII)</b> <b>Kenya (KEBS)</b> <b>Lebanon (LIBNOR)</b> <b>Mauritius (MSB)</b> <b>Mexico (DGN)</b> <b>Netherlands (NEN)</b> <b>New Zealand (NZSO)</b> <b>Panama (COPANIT)</b> <b>Peru (INACAL)</b> <b>Philippines (BPS)</b> <b>Saint Kitts and Nevis (SKNBS)</b> <b>Slovakia (UNMS SR)</b> <b>South Africa (SABS)</b> <b>Switzerland (SNV)</b> <b>Ukraine (DSTU)</b>
<b>6 x</b>	<b>Approval with comments</b>	<b>Canada (SCC)</b> <b>France (AFNOR)</b> <b>Germany (DIN)</b> <b>Korea, Republic of (KATS)</b> <b>Sweden (SIS)</b> <b>United Kingdom (BSI)</b>
<b>4 x</b>	<b>Disapproval</b>	<b>Japan (JISC)</b> <b>Luxembourg (ILNAS)</b> <b>Malaysia (DSM)</b> <b>United States (ANSI)</b>
<b>16 x</b>	<b>Abstention</b>	<b>Algeria (IANOR)</b> <b>Argentina (IRAM)</b> <b>Austria (ASI)</b> <b>Belgium (NBN)</b> <b>Côte d'Ivoire (CODINORM)</b> <b>Indonesia (BSN)</b>

Italy (UNI)  
Kazakhstan (KAZMEMST)  
Poland (PKN)  
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Romania (ASRO)  
Russian Federation (GOST R)  
Singapore (ESG)  
Spain (UNE)  
United Arab Emirates (ESMA)  
Uruguay (UNIT)

Comments from Voters		
Member:	Comment:	Date:
<b>Canada</b> (SCC)	<i>Comment File</i>	2018-08-28 21:09:13
<b>France</b> (AFNOR)	<i>Comment File</i>	2018-08-21 11:00:43
<b>Germany</b> (DIN)	<i>Comment File</i>	2018-08-16 15:47:50
<b>Italy</b> (UNI)	<i>Comment File</i>	2018-08-11 17:18:36
<b>Japan</b> (JISC)	<i>Comment File</i>	2018-08-24 02:36:36
<b>Korea, Republic of</b> (KATS)	<i>Comment File</i>	2018-08-27 03:55:46
<b>Luxembourg</b> (ILNAS)	<i>Comment File</i>	2018-08-28 09:41:38
<b>Malaysia</b> (DSM)	<i>Comment File</i>	2018-08-21 11:29:11
<b>Sweden</b> (SIS)	<i>Comment File</i>	2018-08-27 23:19:24
<b>United Kingdom</b> (BSI)	<i>Comment File</i>	2018-08-23 12:31:13
<b>United States</b> (ANSI)	<i>Comment File</i>	2018-08-22 17:51:17

Comments from Commenters		
Member:	Comment:	Date:
<b>SBS - Small Business Standards</b>	<i>Comment File</i>	2018-08-10 18:16:10