

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

Responsible Office: Office of Cybersecurity	Last Review: 09/08/2022 Next Review: 09/08/2024
Contact: Chris Madeksho	Phone: 901.448.1579 Email: mmadeksh@uthsc.edu

Purpose

To establish the minimum standard security requirements and responsibilities for UTHSC devices throughout the life cycle of the device. This standard is also designed to meet compliance requirements for data regulated by federal or state law. This includes, but is not limited to, security requirements and safeguards for the Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), or Gramm-Leach-Bliley Act (GLBA).

Scope

This Standard applies to all UTHSC owned devices or Information Technology (IT) resource that has the potential to store and transmit UTHSC data.

Definitions

Device – any hardware component capable of executing code, including but not limited to desktops, laptops, tablets and other portables, servers, and computing appliances

Responsibilities

Business managers/department representative works with ITS to keep the device inventory current. Working with data owners, they conduct security evaluations on devices in accordance with this Standard.

Data Owner is ultimately responsible for the data and information being collected and maintained by his or her department or division, usually a member of senior management. They assign data classification based on the data's potential impact level and determines if data access is allowed.

Information Technology Services (ITS) maintains an inventory of all devices and IT resources.

Office of Cybersecurity is responsible for establishing security controls and procedures to protect UTHSC intellectual property and data. Categorization of data

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

is per [GP-002-Data & System Classification](#). The security of the data is based on [GP-005-Data Security](#).

Third-party media destruction services physically inventories the surplus devices to be destroyed and executes the destruction.

Standard

All computing devices and systems that are used for UTHSC business and/or are connected to the UTHSC network must have an individual or an operational group responsible for configuration, maintenance, and administration of these devices and systems throughout the life cycle of the device. Failure to comply with this policy will be reported as an information security violation and may result in loss of network and system privileges for the computer and/or disciplinary action per [GP-001.04-Information Security Violations](#) for the individual violating the policy.

Procurement

1. All devices must be purchased from campus approved vendors whom UTHSC has a vendor repair agreement.
2. UTHSC does not purchase any products from manufacturers with known high risks to cybersecurity.
3. The current list of banned products and manufacturers can be found at <https://uthsc.edu/its/cybersecurity/banned-manufactures.php>
4. All computing devices and systems that are used for UTHSC business and/or are connected to the UTHSC network must have an individual or an operational group responsible for configuration, maintenance, and administration of these devices and systems.
5. New devices purchased with UTHSC funds should meet the minimum hardware requirements listed in this [Knowledge Base article](#).
6. The Data Owner, Business Manager or department representative must perform a security evaluation on computers that will be used to store data or information with a classification rating of 3 in any area, and/or will be used to provide concurrent user access to data or information with a classification rating of 3 in any area (i.e. a server).
 - a. The recommendations generated from the security evaluation must be followed prior to the use of the computer in production, prior to use by users and prior to interaction with data or information with a classification

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

rating of 3 in any area unless otherwise stated in the evaluation report.

7. Plan your data disposal requirements as part of the planning process for the devices that will store the data.
 - a. If the data is to be stored on a cloud service, make sure that the cloud service provider can meet the data destruction requirements for the data classification level from [GP-002-Data & System Classification](#).

Installation

1. All devices should be configured by the ITS Hardware team using current and standardized specifications.

In use

1. All UTHSC owned assets must be managed by the Vulnerability and Patch Management team. Management is defined as the following:
 - a. Windows Operating Systems:
 - i. Assets must be joined to the UTHSC Active Directory (AD).
 - ii. Assets must use the most recent approved operating system image at the time of joining the network and maintain supported operating systems while on the network.
 - iii. Assets will use domain accounts for user access to the computer. Local accounts will only be made with exception and approved by the UTHSC Office of Cybersecurity.
 - iv. Assets must be enrolled in the approved endpoint management software, SCCM (System Center Configuration Manager)
 - b. MacOS:
 - i. Assets must be enrolled in JAMF
 - ii. Assets must use the most recent approved operating system image at the time of joining the network and maintain supported operating systems while on the network.
 - iii. Assets must have the UT local administrator account.
2. UTHSC owned assets must have the currently supported UTHSC approved EDR (Endpoint Defense and Response) software
3. UTHSC owned assets must also have CISCO AnyConnect unless an exception is approved by the UTHSC Office of Cybersecurity.
4. UTHSC owned assets should be powered ON during the weekend hours. Windows devices should be connected to the UTHSC network via VPN. This is

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

in order to receive security patches and updates.

5. The UTHSC Office of Cybersecurity may require or initiate security validation testing for the purpose of identifying vulnerabilities.
6. Computers determined by the security evaluation process to present an unacceptable security risk to UTHSC are prohibited from accessing or using the UTHSC network, and from interacting with UTHSC data or information with a classification rating of 3 in any area.
7. The UTHSC Office of Cybersecurity, may at any time disconnect a Computing device from the UTHSC network that has been identified as creating an unacceptable security risk, in accordance with Procedure-InfoSec-SC-001.02-Removing Potential Compromised Devices.
8. Do not store contractually restricted or compliance restricted data on removable media.
9. ITS recommends refreshing, or replacing, endpoints every three to five years. More information about the refresh cycle is found in this [Knowledge Base article](#).

End of life

1. When hardware can no longer support modern or supported operating systems, or they are no longer needed by the department, college or unit, they must be surplussed using guidelines found at <https://www.uthsc.edu/finance/procurement/surplus/index.php>.
2. All covered IT Resources when re-used, removed, donated, sold, or disposed of shall have all information removed and/or destroyed in such manner that the information cannot be retrieved, even partially, by conventional means or commercially available processes.
3. Removal and destruction of any (or potential) data shall be in accordance with [GP-005.01-Disposal or Destruction of Electronic & Non-Electronic Media](#). Examples of the methods of sanitization on specific device types are found on the [Sanitization webpage](#).
4. Destruction of data shall be in accordance with the applicable records-retention schedule.
5. A record shall be maintained detailing the property decal number, time and date, a description of the IT Resource, the disposition of the IT Resource, the procedure employed to remove and/or destroy the information, and the individual executing the procedure.
6. Acceptable methods of data destruction include, but are not limited to,

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

the following:

- a. Overwriting: Unlike other data-destruction methods, overwriting preserves the media for re-use after the data-destruction process. This needs to comply with the Department of Defense (DOD) data destruction standard, DOD 5220.00-M. Only industry- standard tools can be used. A minimum of three overwriting passes are required.
- b. Degaussing: Degaussing is exposing magnetic media to a strong magnetic field in order to disrupt the recorded magnetic domains. A degausser is a device that generates a magnetic field used to sanitize magnetic media.
- c. Destruction: Destruction involves the physical dismantling or disablement of the media. UTHSC has contracted with an outside facility for media destruction services. (Note: Electronic media disposal service companies contracted by UTHSC must be certified by the National Association for Information Destruction.)
 - i. Shredding can be used to destroy flexible media, such as floppy discs.
 - ii. Optical mass storage media must be destroyed by pulverizing, crosscut shredding, or burning. When material is disintegrated or shredded, all residues must be reduced to nominal edge dimensions of five millimeters (5 mm) and surface area of 25 square millimeters (25 mm²).
- d. Further information about the appropriate destruction techniques are explained in [GP-005.01-Disposal or Destruction of Electronic & Non-Electronic Media](#).

Note: Almost all computers and mobile devices, including cell phones, implement some form of storage media. Care must be taken at the time of disposal or recycle to discover the storage within and destroy the data it stores according to these standards. If the existence of internal storage cannot be definitively ruled out, then the device must be destroyed.

Exceptions

Exceptions to this Practice should be requested using the process outlined in [GP-001.02-Security Exceptions and Exemptions to ITS Standards Practices & Controls](#).

References

1. [PE-001-Physical Security of Information Resources and Related Facilities](#)[GP-](#)

UT Health Science Center: CS-001-Device Life Cycle Security	
Version 4	Effective Date: 08/26/2020

- [005-Data Security](#)[GP-002-Data & System Classification](#)[GP-005.01-Disposal or Destruction of Electronic & Non-Electronic Media](#)
2. [GP-001.02-Security Exceptions and Exemptions to ITS Standards Practices & Controls](#)[GP-001.04-Information Security Violations](#)[UTHSC Surplus Equipment Guidance](#)