U.S. CONSUMER PRODUCT SAFETY COMMISSION



OFFICE OF THE INSPECTOR GENERAL

FEDERAL INFORMATION SECURITY MANAGEMENT ACT REPORT

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Federal Information Security Management Act Report Table of Contents

| EXECUTIVE SUMMARY Office of the Inspector General's Results | Page i |
|---|-------------|
| INTRODUCTION | 1 |
| Background Objective Scope and Methodology | 1 2 2 |
| RESULTS OF EVALUATION | 2 |
| Prior Findings, Recommendations, and Actions Taken Security Management Controls Security Operation Controls Security Technical Controls | 3 4 5 |
| Performance Measures | 6 |
| Privacy Program and Privacy Impact Assessment Processes | 7 |

Office of the Inspector General U.S. Consumer Product Safety Commission Washington, D.C. 20207

FEDERAL INFORMATION MANAGEMENT ACT REPORT

EXECUTIVE SUMMARY

Office of the Inspector General's Results

To meet the requirements of the Government Information Security Reform Act (GISRA), and its successor, the Federal Information Security Management Act (FISMA), the Consumer Product Safety Commission's (CPSC) Office of the Inspector General (IG) contracted with Grant Thornton, LLP to perform an independent audit of CPSC's automated information security control procedures and practices in Fiscal Year 2001. The audit included tests of entity-wide controls and six of CPSC's 49 application systems and their underlying elements. Grant Thornton used the National Institute of Standards and Technology Special Publication (SP) 800-XX, Draft Self-Assessment Guide for Information Technology Systems, March 9, 2001 to test security controls. The results of the Audit of Automated Information System Security, August 16, 2001, and the annual follow-ups to it, in conjunction with the independent reviews required by FISMA and audits with information technology aspects (CFO Act Audit, etc.), served as the basis for the IG's Fiscal Year 2008 evaluation.

The Fiscal Year 2006 (FY 06) FISMA IG independent evaluation found that substantial improvements had been made and all material weaknesses in the CPSC's Information Technology (IT) system had been corrected. After those deficiencies that were found to be "material weaknesses" were addressed, the CPSC began the process of implementing the recommendation set out in previous evaluations to deal with less serious security deficiencies ("high" priority security vulnerabilities). All eleven of these "high" priority security vulnerabilities have now also been addressed. As a result of the work done in Fiscal Year 2004, the interim label was removed from the CPSC's system certification and accreditation. The CPSC maintained certification and accreditation in FY 05 and FY 06. Unfortunately, certification and accreditation was not maintained in FY 07.

This years FISMA evaluation found that although much work remains to be done, the work was progressing in a satisfactory manner and the CPSC's IT system had regained its certification and accreditation.

The CPSC's efforts to meet the non-IT information security standards tested by FISMA and set out in a variety of OMB and related requirements, including those relating to privacy and the protection of personally identifiable information, have been less successful. Although much work has been done in drafting privacy and information security policies, not enough has been done to implement and test compliance with these policies.

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INTRODUCTION

Background: On October 30, 2000, the President signed into law the Fiscal Year (FY) 2001 National Defense Authorization Act, which included Title X, Subtitle G, the Government Information Security Reform Act (GISRA). On December 17, 2002, GISRA was superseded when the President signed into law the Electronic Government Act. Title III of this Act, the Federal Information Security Management Act (FISMA) along with OMB policy, lays out a framework for annual IT security reviews, reporting and remediation planning. FISMA seeks to ensure proper management and security for information resources supporting Federal operations and assets. The Act requires Inspectors General to perform an annual independent evaluation of their agencies' information systems security programs and practices.

To establish a baseline to help it meet the requirements outlined above, the CPSC's Office of the Inspector General (OIG) contracted with Grant Thornton to perform an independent audit of CPSC's automated information security control procedures and practices in FY 2001. The requirements of the audit included:

- Evaluating and testing the internal controls, evaluating weaknesses and identifying the degree of risk for the related weakness.
- Testing the effectiveness of the information security controls on a sample of CPSC's systems.
- Assessing whether CPSC's information security policy, procedures, and practices comply with Federal laws, regulations, and policies.
- Recommending improvements, where necessary, in security record keeping, internal security controls, and system security.
- Identifying the degree of risk associated with identified internal security controls weaknesses.

The audit included tests of entity-wide controls and six of CPSC's 49 applications systems and their underlying elements. Grant Thornton used the National Institute of Standards and Technology Special Publication (SP) 800-XX, Draft Self-Assessment Guide for information Technology Systems, March 9, 2001 to test security controls. The objective of the audit was to determine whether CPSC's automated information system was adequately safeguarded.

In its report, Audit of Automated Information System Security, Grant Thornton, identified material weaknesses in CPSC's management, operational, and technical controls policies, procedures, and practices. According to the report, the conditions of these controls could permit the modification or destruction of data, disclosure of sensitive information, or denial of services to the users who require the information to support the mission of the CPSC. In addition, it was reported that the CPSC did not have a capital budget for IT security. Without appropriate capital budget planning, Grant Thornton was concerned that CPSC's management might not be able to properly implement and maintain resources to ensure system safeguards.

Objective: In compliance with FISMA, to perform an annual independent evaluation of the information security program and practices of the agency to determine the effectiveness of such program and practices.

Scope and Methodology: The evaluation was conducted in August and September of 2008. This evaluation consisted of: an evaluation of a representative sampling of all types of agency systems, a review of agency progress in implementing and managing the Plan of Action and Milestones (POA&M) process, and an assessment of the agency's certification and accreditation process.

This review took place in the form of both a follow-up of the findings and recommendations resulting from earlier audits and a review of the CPSC's implementation of recent IT and Personally Identifiable Information (PII) security criteria. Emphasis was placed on the weaknesses that had been previously identified in the CPSC's management, operational, and technical controls and the actions taken to resolve these weaknesses. Additionally, special attention was placed on the certification process, CPSC's Information System Security Plan, and the Plan of Action and Milestones, as well as the status of implementation of each.

The status of each of these items was reviewed and discussed with the Chief Information Officer and the Information Security Officer. The Budget Officer provided budgetary information. Documentation developed by both CPSC officials and contractor personnel was reviewed as necessary.

RESULTS OF EVALUATION

Prior Findings, Recommendations and Actions Taken: The FY 2001 audit of CPSC's information security program revealed several material weaknesses in CPSC's security policies, procedures, and practices. Specifically, CPSC management had not implemented sufficient management, operational, and technical controls. All previously identified material weaknesses have now been corrected. No additional material weaknesses have been identified. However, due to a combination of budget limitations and the new security system requirements promulgated by NIST and OMB, the CPSC failed to accomplish all of the new security requirements by their implementation target dates. All recommendations are considered open until all of the underlying weaknesses have been corrected. A summary of Prior Findings, Recommendations, and Actions Taken follows:

1. Security Management Controls

Prior Finding: Security management controls are enterprise-wide procedures for managing and assessing the risks and security controls of a system over its life cycle. Because CPSC management had not implemented sufficient management controls in the areas of risk management, review of security controls, life cycle management, authorized processing, and system security planing, the techniques and concerns that are normally addressed by management were not fully implemented. OMB Circular A-130, Appendix III requires sufficient management controls in these areas. This condition appears to have been due to CPSC management not having the resources necessary to make the implementation of Security Management controls a priority.

Prior Recommendation: CPSC management should implement sufficient management controls in the areas of risk management, review of security controls, life cycle management, authorized processing, and system planning in order to ensure efficient and effective management of the IT systems and its inherent risk.

Action Taken: CPSC contracted with Patriot Technologies (Patriot) to develop an Information System Security Plan (ISSP), January 31, 2002, that conforms to OMB Circular A-130 requirements and responds to Grant Thornton's findings. The new ISSP provides CPSC with an overall security plan describing a functional information systems security framework. It describes CPSC organizational responsibilities for information system security.

In FY 03, CPSC contracted with PEC Solutions Inc. (PEC) to perform systems certification and accreditation and to develop a plan to ensure adequate management control in the areas of risk management, review of security controls, life cycle management, authorized processing, and system planning. In addition to the ISSP, a System Development Life Cycle (SDLC) Plan and Business Continuity Plan have been prepared. PEC has completed the work contracted for regarding system certification and accreditation, risk management, and the development of a SDLC Plan and a Business Continuity Plan. All previously identified "material weaknesses" in this area have been addressed. Although PEC did not find that "full" certification and accreditation of CPSC's systems was appropriate in FY 03, they did issue an "interim approval" and indicated that full certification would be appropriate once certain recommendations set out in their report were achieved.

In FY 04, after those deficiencies that were found to be "material weaknesses" were addressed, the CPSC began the process of implementing the recommendation set out in these plans to deal with less serious security deficiencies ("high" priority security vulnerabilities). Ten of the eleven "high" priority security vulnerabilities have been mitigated. The eleventh, after a new cost risk analysis was completed, was reclassified as an "acceptable risk." As a result of the work done in FY 04, the interim label was removed from the CPSC's system certification and accreditation.

In FY 05, in accordance with new OMB guidance, the CPSC began using NIST SP 800-26 to perform agency security self-assessments and began implementing new system configuration policies. Efforts are also still being made to bring the CPSC into full compliance with all other FISMA and OMB requirements.

In FY 06, new security system requirements previously promulgated by NIST and OMB became mandatory. In order to retain accreditation and certification of their computer system the CPSC was required to have their security controls independently tested and evaluated annually. Due to funding limitations this was not done in FY 06.

In order to both meet the accreditation and certifications requirements outlined above and to determine whether the security controls identified for the CPSC Network General Support System in the System Security Plan were implemented correctly and effectively, in FY 07 the Office of Inspector General conducted a Security Test and Evaluation (STE Evaluation) in accordance with NIST SP 800-53. The STE Evaluation identified sixty-three (63) vulnerabilities for the CPSC Network General Support System. Of these, six were found to be high risk vulnerabilities, 31 were found to be medium risk vulnerabilities, and 26 were found to be low risk vulnerabilities. The STE Evaluation Report included a planned mitigation with an associated due date for each vulnerability identified.

In FY 08, the CPSC regained system certification. This was accomplished after the mitigation of the six high risk vulnerabilities found in the STE Evaluation and the successful approval and testing of the CPSC's IT Contingency Plan.

2. Security Operational Controls

Prior Finding: Security operational controls are used to assess the security of the system processes and the people who interact with or operate those systems. Because CPSC management had not implemented sufficient operational controls in the area of personnel security, data integrity, and documentation, CPSC management was not able to address security procedures to focus on security mechanisms that affect the daily operation of the Commission. OMB Circular A-130, Appendix III requires that sufficient operational controls for personal security, data integrity, and documentation be in place. This condition may have been due to CPSC management not having the resources necessary to make implementation of operational controls a priority. The level of risk was rated "high" for personnel security and data integrity.

Prior Recommendation: CPSC Management should implement sufficient operational controls in the area of personnel security, data integrity, and documentation in order to ensure efficient and effective management of the IT systems in support of CPSC's mission.

Action Taken: CPSC contracted with Patriot to develop the Information System Security Plan (ISSP). Patriot reported that in order for CPSC to adequately implement and maintain the requirements of the ISSP, a staff of three full-time personnel (information system security officer, network security engineer, and applications security engineer) would be needed. Qualifications for and responsibilities of each position were delineated in the ISSP.

Due to staffing constraints, CPSC recruited one of the three recommended positions (Information Security Officer) and contracted out the remaining responsibilities on an "as needed" basis. A contract was awarded to PEC Solutions Inc. (PEC) to produce a new ISSP that conforms with the resource constraints in place at the CPSC and sets out the specific steps (in the form of recommendations) necessary to implement the plan. The ISSP was completed just before the end of FY 03. Implementation of the recommendations contained in the ISSP, augmented by new requirement created by subsequent regulations, continues.

After steady improvements in previous years, the lack of a security operational control that would automatically terminate a system connection after a specified period of inactivity plated a role in the CPSC's loss of system certification in FY 07. In FY 08 certification and accreditation was regained when the needed security operational control was implemented.

Currently, 70 percent of CPSC staff have completed security training.

3. Security Technical Controls

Prior Finding: Security technical controls are specific to the system's ability to identify, track, and act on authorized or unauthorized usage. Because CPSC management had not implemented sufficient technical controls in the areas of identification and authentication, logical access, and audit trails, CPSC management had left sensitive information vulnerable. This condition appears to have been due to CPSC management not having the resources necessary to make implementation of sufficient technical controls a priority. The level of risk was rated high for identification and authentication, and logical access.

Prior Recommendation: CPSC management should implement sufficient technical controls in the areas of identification and authentication, logical access, and audit trail in order to protect the information that is used to support the mission of the Commission.

Action Taken: The effectiveness of six of CPSC's systems and the underlying elements of each were tested during the FY 2001 audit. Weaknesses identified in controls related to these systems contributed to the overall condition of CPSC's information security program. Management was advised of specific weaknesses and recommendations, each of which was to be addressed during the implementation of the ISSP and Systems Certification and Accreditation contract. Weaknesses outlined in the ISSP were to be corrected in all applications. Additional systems were not tested because management was in the process of implementing prior recommendations, the implementation of which would alter the policies and procedures applicable to all applications. As reported in the management response to the original audit, CPSC requested funding in Fiscal years 1999 through 2002 without success to establish a capital budget for information technology. The need for such funds was also included, unsuccessfully, in CPSC's FY 03 and 04 budget requests. Budget requests cited the need for new investments to protect the current operating capability and efficiency of information technology. According to the Budget Officer, in the absence of a capital budget for information technology, CPSC has applied some savings from operating funds to this area. In FY 02, CPSC committed over \$500,000 from one-time salary savings to this area to develop an ISSP, address data system

weaknesses, enhanced firewall intrusion detection capabilities, and other operating and system application enhancements. In FY 03, CPSC committed \$714,891 to this area in the form of salaries and other expenses. In FY 04, CPSC committed \$715,000 for its Information Technology programs. In FY 05, this figure rose to \$1,035,100. In FY 06, the CPSC spent \$2,082,050 on its IT programs. In FY 07, the CPSC committed \$6,300,000 to its IT program. In FY 08, the CPSC's commitment rose to 30 FTEs and \$13,000,000. Work on implementing the recommendations contained in the ISSP and more recent guidance continues.

In some cases the implementation of security controls has outstripped the documentation or generation of policies regarding same. The CPSC currently conducts continuous intrusion detection monitoring and performs an annual vulnerability assessment, but neither of these efforts are formally documented or covered by existing policies. Similarly, although there is no written agency wide security configuration policy, the agency does in fact comply with NIST common security configurations, it simply fails to document that it does so.

CPSC's most recent Plan of Action and Milestones (POAM) report to the OMB reflects the improvements that the CPSC has made. The agency has now resolved all material weaknesses as well as all "high" security vulnerabilities, both those originally found by Grant Thornton and the more recent STE evaluation. However, the CPSC acknowledges its need for continued improvement. Over the past few years, the CPSC has met the following goals in its effort to improve its security technical controls: implementing a security awareness training program, providing a redundant cooling capability to the Agency's existing computer room air conditioning unit, providing the ability to quickly recover from an e-mail server failure by periodically taking and storing e-mail "snapshots" of the e-mail database, and implementing the ability to perform automated system auditing. The monitoring of Internet usage has been implemented. The enforcement of strong user passwords has been implemented.

Although work has begun on most of them, several known weaknesses have still not been remedied. The implementation of network data port authentication has not been implemented. The development of a physical access control document has not been completed; and the agency has decided not to implement an agency-wide security configuration policy at this time.

Performance Measures: Security responsibilities and authorities have been defined for the Chief Information Officer, Information Security Officer, and program officials in CPSC's ISSP. The performance measures detailed in NIST 800-26 have been incorporated into existing organizational goals for IT security in the ISSP.

After the STE Evaluation in FY 07 resulted in the decertification of the CPSC's system, much work was put into regaining system certification, which was achieved in FY 08. NIST 800-53 controls have now been incorporated by the agency and future certification and accreditation work should be consistent with the most recent NIST Special Publication requirements.

4. Agency Privacy Program and Privacy Impact Assessment (PIA) Processes

Background: Historically, the Federal government has placed a much greater emphasis on IT security than on privacy or protection of personally identifiable information. The challenge facing the CPSC regarding protection of personally identifiable information and other sensitive data is in many ways even more pronounced than the challenge of information technology security. Although many of the challenges facing the agency regarding information system security can be addressed through technical improvements, the issues regarding personally identifiable information are more complex and will require the adoption of new policies, methodologies, and in many cases mindsets in the management of the agency. This area in particular has been subject to numerous new statutory and regulatory requirements in the past few years including recent guidance calling for the implementation of plans to eliminate the unnecessary use of Social Security Numbers and the review and reduction of the agency's holdings of personally identifiable information.

Status: The agency has made progress in privacy management in the past three years. In that time, a Privacy Impact Assessment process has been implemented and begun to operate, staff have been assigned to work in this area (previously this was treated strictly as an additional duty), and efforts have been made to draft and implement agency policies regarding training and the implementation of internal controls to ensure the protection of PII. However, much work remains to be done in this area.

Although the majority of the challenges facing the agency regarding information system security may be addressed through technical improvements, the issues regarding personally identifiable information are more complex and will require the adoption of new policies and methodologies in the management of the agency. This area in particular has been subject to numerous new statutory and regulatory requirements (recent guidance has called for the implementation of plans to eliminate the unnecessary use of Social Security Numbers and the review and reduction of the agency's holdings of personally identifiable information.) Although much progress has been made in this area in terms of policy creation, much work remains to be done before these policies will be adequately implemented and effective.

For example, although a Privacy Impact Assessment (PIA) program has been implemented by the agency, the program currently only results in the conduct of PIAs on newly created eligible systems of records. The agency has no definitive plan in place to review existing eligible systems of records.

The CPSC has developed a mandatory training policy to attempt to ensure that all personnel (employees, contractors, etc.) with access to Federal data are generally familiar with information privacy laws, regulations and policies, and understand the ramifications of inappropriate access and disclosure. The training was prepared and made available to employees in a timely fashion; however, this program lacks adequate controls to verify whether or not employees actually took the training, much less whether or not they benefited from it.

In addition to the training policy detailed above, the CPSC has a policy that requires managers and supervisors to provide job-specific privacy training for all employees and contractors who in

the course of their duties work with systems (in any medium) containing personally identifiable information. There has been no review and verification that System Owners and CPSC managers and supervisors are actually providing this training and much anecdotal evidence that would suggest that they are not.

Similarly, although there is an agency policy requiring agency managers and supervisors to review the internal controls relied upon to provide information security, this requirement has not been adequately publicized. Managers have not received training in its implementation. This internal control is not certified in the agencies annual letters of assurance.

The most recent compliance review of agency privacy policies and practices took place in FY 07, in accordance with OMB Memorandum M-06-15. Although the majority of the weaknesses identified in that review have been or are being addressed, no additional reviews have taken place so the agency lacks adequate benchmarks to assess the effectiveness of its privacy policies and practices.

Christopher W. Dentel Inspector General