

Form Report, printed by: Milliard, Suzanne, Feb 17, 2011

PIA SUMMARY

1					
<p>The following required questions with an asterisk (*) represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget (OMB) and public posting in accordance with OMB Memorandum (M) 03-22.</p> <p>Note: If a question or its response is not applicable, please answer "N/A" to that question where possible. If the system hosts a website, the Website Hosting Practices section is required to be completed regardless of the presence of personally identifiable information (PII). If no PII is contained in the system, please answer questions in the PIA Summary Tab and then promote the PIA to the Senior Official for Privacy who will authorize the PIA. If this system contains PII, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.</p>					
2	Summary of PIA Required Questions				
*Is this a new PIA?					
No					
If this is an existing PIA, please provide a reason for revision:					
PIA Validation					
*1. Date of this Submission:					
Jul 30, 2010					
*2. OPDIV Name:					
NIH					
*4. Privacy Act System of Records Notice (SORN) Number (If response to Q.21 is Yes, a SORN number is required for Q.4):					
09-25-0106					
*5. OMB Information Collection Approval Number:					
No					
*6. Other Identifying Number(s):					
NCI-64					
*7. System Name (Align with system item name):					
NIH NCI Office of Liaison Activities Database (OLA)					
*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #e0e0e0;"> <th colspan="2">Point of Contact Information</th> </tr> <tr> <td style="width: 50%;">POC Name</td> <td>Nelya Gunina</td> </tr> </table>		Point of Contact Information		POC Name	Nelya Gunina
Point of Contact Information					
POC Name	Nelya Gunina				
*10. Provide an overview of the system:					
The Office of Liaison Activities Database (OLA) maintains contact information for advocacy organizations and professional societies. The system also maintains information about					

individual advocates that serve the NCI through the Director's Consumer Liaison Group (DCLG) and the Consumer Advocates in Research and Related Activities (CARRA) program.

*13. Indicate if the system is new or an existing one being modified:

Existing

*17. Does/Will the system collect, maintain (store), disseminate and/or pass through PII within any database(s), record(s), file(s) or website(s) hosted by this system?

TIP: If the answer to Question 17 is "No" (indicating the system does not contain PII), only the remaining PIA Summary tab questions need to be completed and submitted. If the system does contain PII, the full PIA must be completed and submitted. (Although note that "Employee systems," - i.e., systems that collect PII "permitting the physical or online contacting of a specific individual ... employed [by] the Federal Government - only need to complete the PIA Summary tab.)

Yes

17a. Is this a GSS PIA included for C&A purposes only, with no ownership of underlying application data? If the response to Q.17a is Yes, the response to Q.17 should be No and only the PIA Summary must be completed.

*19. Are records on the system retrieved by 1 or more PII data elements?

Yes

*21. Is the system subject to the Privacy Act? (If the response to Q.19 is Yes, the response to Q.21 must be Yes and a SORN number is required for Q.4)

Yes

*23. If the system shares or discloses PII, please specify with whom and for what purpose(s):

Does not share outside the agency. Disclosures permitted in SOR 09-25-0106 are not made.

*30. Please describe in detail: (1) The information the agency will collect, maintain, or disseminate (clearly state if the information contained in the system ONLY represents federal contact data); (2) Why and for what purpose the agency will use the information; (3) Explicitly indicate whether the information contains PII; and (4) Whether submission of personal information is voluntary or mandatory:

Legislative authority is 42 U.S.C. 203, 241, 289I-1 and 44 U.S.C. 3101), and Section 301 and 493 of the Public Health Service Act. Information is maintained for advocates that are members of the CARRA program include membership status (active or non-active), race/ethnicity/age/gender of member, occupation, highest educational degree earned, area of educational degree, primary/personal/constituency cancer type, location/race/ethnicity of constituency, activity preferences, computer skills, ability to travel, and skills/accomplishments/activities. Information is used only within the agency. Submission of information is voluntary.

*31. Please describe in detail any processes in place to: (1) Notify and obtain consent from the individuals whose PII is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection); (2) Notify and obtain consent from individuals regarding what PII is being collected from them; and (3) How the information will be used or shared. (Note: Please describe in what format individuals will be given notice of consent [e.g., written notice, electronic notice, etc.]):

Notification and consent in both cases is done via e-mail.

*32. Does the system host a website? (Note: If the system hosts a website, the Website Hosting Practices section is required to be completed regardless of the presence of PII)

Yes

*37. Does the website have any information or pages directed at children under the age of thirteen?

No

*50. Are there policies or guidelines in place with regard to the retention and destruction of PII? (Refer to the C&A package and/or the Records Retention and Destruction section in SORN)

Yes

*54. Briefly describe in detail how the PII will be secured on the system using administrative, technical, and physical controls:

Information is secured using username/passwords, least privilege, separation of duties, an intrusion detection system, firewalls, locks, badge access, background investigations. A comprehensive IRT capability is also maintained.

PIA REQUIRED INFORMATION

1 HHS Privacy Impact Assessment (PIA)

The PIA determines if Personally Identifiable Information (PII) is contained within a system, what kind of PII, what is done with that information, and how that information is protected. Systems with PII are subject to an extensive list of requirements based on privacy laws, regulations, and guidance. The HHS Privacy Act Officer may be contacted for issues related to Freedom of Information Act (FOIA) and the Privacy Act. Respective Operating Division (OPDIV) Privacy Contacts may be contacted for issues related to the Privacy Act. The Office of the Chief Information Officer (OCIO) can be used as a resource for questions related to the administrative, technical, and physical controls of the system. Please note that answers to questions with an asterisk (*) will be submitted to the Office of Management and Budget (OMB) and made publicly available in accordance with OMB Memorandum (M) 03-22.

Note: If a question or its response is not applicable, please answer "N/A" to that question where possible.

2 General Information

*Is this a new PIA?

No

If this is an existing PIA, please provide a reason for revision:

PIA Validation

*1. Date of this Submission:

Jul 30, 2010

*2. OPDIV Name:

NIH

3. Unique Project Identifier (UPI) Number for current fiscal year (Data is auto-populated from the System Inventory form, UPI table):

*4. Privacy Act System of Records Notice (SORN) Number (If response to Q.21 is Yes, a SORN number is required for Q.4):

09-25-0106

*5. OMB Information Collection Approval Number:

No

5a. OMB Collection Approval Number Expiration Date:

*6. Other Identifying Number(s):

NCI-64

*7. System Name: (Align with system item name)

NIH NCI Office of Liaison Activities Database (OLA)

8. System Location: (OPDIV or contractor office building, room, city, and state)

System Location:	
OPDIV or contractor office building	6116 Executive Blvd.
Room	220

City	Rockville
State	MD

*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

Point of Contact Information	
POC Name	Nelya Gunina

The following information will not be made publicly available:

POC Title	IT Specialist (Sys Analysis) Program Manager
POC Organization	NIH/NCI/OD/CBIIT/IOB
POC Phone	301-594-0678
POC Email	guninan@mail.nih.gov

*10. Provide an overview of the system: (Note: The System Inventory form can provide additional information for child dependencies if the system is a GSS)

The Office of Liaison Activities Database (OLA) maintains contact information for advocacy organizations and professional societies. The system also maintains information about individual advocates that serve the NCI through the Director's Consumer Liaison Group (DCLG) and the Consumer Advocates in Research and Related Activities (CARRA) program.

SYSTEM CHARACTERIZATION AND DATA CATEGORIZATION

1	System Characterization and Data Configuration																					
11. Does HHS own the system?																						
Yes																						
11a. If no, identify the system owner:																						
12. Does HHS operate the system? (If the system is operated at a contractor site, the answer should be No)																						
Yes																						
12a. If no, identify the system operator:																						
*13. Indicate if the system is new or an existing one being modified:																						
Existing																						
14. Identify the life-cycle phase of this system:																						
Operations/Maintenance																						
15. Have any of the following major changes occurred to the system since the PIA was last submitted?																						
No																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr style="background-color: #e0e0e0;"> <th style="width: 50%; text-align: left;">Please indicate "Yes" or "No" for each category below:</th> <th style="width: 50%; text-align: center;">Yes/No</th> </tr> </thead> <tbody> <tr> <td>Conversions</td> <td> </td> </tr> <tr> <td>Anonymous to Non-Anonymous</td> <td> </td> </tr> <tr> <td>Significant System Management Changes</td> <td> </td> </tr> <tr> <td>Significant Merging</td> <td> </td> </tr> <tr> <td>New Public Access</td> <td> </td> </tr> <tr> <td>Commercial Sources</td> <td> </td> </tr> <tr> <td>New Interagency Uses</td> <td> </td> </tr> <tr> <td>Internal Flow or Collection</td> <td> </td> </tr> <tr> <td>Alteration in Character of Data</td> <td> </td> </tr> </tbody> </table>			Please indicate "Yes" or "No" for each category below:	Yes/No	Conversions		Anonymous to Non-Anonymous		Significant System Management Changes		Significant Merging		New Public Access		Commercial Sources		New Interagency Uses		Internal Flow or Collection		Alteration in Character of Data	
Please indicate "Yes" or "No" for each category below:	Yes/No																					
Conversions																						
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Significant Merging																						
New Public Access																						
Commercial Sources																						
New Interagency Uses																						
Internal Flow or Collection																						
Alteration in Character of Data																						
16. Is the system a General Support System (GSS), Major Application (MA), Minor Application (child) or Minor Application (stand-alone)?																						
Minor Application (child)																						
*17. Does/Will the system collect, maintain (store), disseminate and/or pass through PII within any database(s), record(s), file(s) or website(s) hosted by this system?																						
Yes																						
TIP: If the answer to Question 17 is "No" (indicating the system does not contain PII), only the remaining PIA Summary tab questions need to be completed and submitted. If the system does contain PII, the full PIA must be completed and submitted. (Although note that "Employee																						

systems," - i.e., systems that collect PII "permitting the physical or online contacting of a specific individual ... employed [by] the Federal Government - only need to complete the PIA Summary tab.)

Please indicate "Yes" or "No" for each PII category. If the applicable PII category is not listed, please use the Other field to identify the appropriate category of PII.

Categories:	Yes/No
Name (for purposes other than contacting federal employees)	Yes
Date of Birth	Yes
Social Security Number (SSN)	No
Photographic Identifiers	No
Driver's License	No
Biometric Identifiers	No
Mother's Maiden Name	No
Vehicle Identifiers	No
Personal Mailing Address	Yes
Personal Phone Numbers	Yes
Medical Records Numbers	No
Medical Notes	Yes
Financial Account Information	No
Certificates	No
Legal Documents	No
Device Identifiers	No
Web Uniform Resource Locator(s) (URL)	Yes
Personal Email Address	Yes
Education Records	No
Military Status	No
Employment Status	Yes
Foreign Activities	No
Other	Health Information

17a. Is this a GSS PIA included for C&A purposes only, with no ownership of underlying application data? If the response to Q.17a is Yes, the response to Q.17 should be No and only the PIA Summary must be completed.

18. Please indicate the categories of individuals about whom PII is collected, maintained, disseminated and/or passed through. Note: If the applicable PII category is not listed, please use the Other field to identify the appropriate category of PII. Please answer "Yes" or "No" to each of these choices (NA in other is not applicable).

Categories:	Yes/No
Employees	No
Public Citizen	Yes

Patients	No
Business partners/contacts (Federal, state, local agencies)	Yes
Vendors/Suppliers/Contractors	No
Other	none

*19. Are records on the system retrieved by 1 or more PII data elements?

Yes

Please indicate "Yes" or "No" for each PII category. If the applicable PII category is not listed, please use the Other field to identify the appropriate category of PII.

Categories:	Yes/No
Name (for purposes other than contacting federal employees)	Yes
Date of Birth	Yes
SSN	No
Photographic Identifiers	No
Driver's License	No
Biometric Identifiers	No
Mother's Maiden Name	No
Vehicle Identifiers	No
Personal Mailing Address	Yes
Personal Phone Numbers	Yes
Medical Records Numbers	No
Medical Notes	Yes
Financial Account Information	No
Certificates	No
Legal Documents	No
Device Identifiers	No
Web URLs	Yes
Personal Email Address	Yes
Education Records	No
Military Status	No
Employment Status	No
Foreign Activities	No
Other	Health Information

20. Are 10 or more records containing PII maintained, stored or transmitted/passed through this system?

Yes

*21. Is the system subject to the Privacy Act? (If the response to Q.19 is Yes, the response to Q.21 must be Yes and a SORN number is required for Q.4)

Yes

21a. If yes but a SORN has not been created, please provide an explanation.

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INFORMATION SHARING PRACTICES

1 Information Sharing Practices

22. Does the system share or disclose PII with other divisions within this agency, external agencies, or other people or organizations outside the agency?

No

Please indicate "Yes" or "No" for each category below:	Yes/No
Name (for purposes other than contacting federal employees)	
Date of Birth	
SSN	
Photographic Identifiers	
Driver's License	
Biometric Identifiers	
Mother's Maiden Name	
Vehicle Identifiers	
Personal Mailing Address	
Personal Phone Numbers	
Medical Records Numbers	
Medical Notes	
Financial Account Information	
Certificates	
Legal Documents	
Device Identifiers	
Web URLs	
Personal Email Address	
Education Records	
Military Status	
Employment Status	
Foreign Activities	
Other	

*23. If the system shares or discloses PII please specify with whom and for what purpose(s):

Does not share outside the agency. Disclosures permitted in SOR 09-25-0106 are not made.

24. If the PII in the system is matched against PII in one or more other computer systems, are computer data matching agreement(s) in place?

No

25. Is there a process in place to notify organizations or systems that are dependent upon the

PII contained in this system when major changes occur (i.e., revisions to PII, or when the system is replaced)?

Yes

26. Are individuals notified how their PII is going to be used?

Yes

26a. If yes, please describe the process for allowing individuals to have a choice. If no, please provide an explanation.

Individuals participate voluntarily.

27. Is there a complaint process in place for individuals who believe their PII has been inappropriately obtained, used, or disclosed, or that the PII is inaccurate?

Yes

27a. If yes, please describe briefly the notification process. If no, please provide an explanation.

This is done via e-mail per SOR 09-25-0156

28. Are there processes in place for periodic reviews of PII contained in the system to ensure the data's integrity, availability, accuracy and relevancy?

Yes

28a. If yes, please describe briefly the review process. If no, please provide an explanation.

Per SOR 09-25-0156

29. Are there rules of conduct in place for access to PII on the system?

Yes

Please indicate "Yes," "No," or "N/A" for each category. If yes, briefly state the purpose for each user to have access:

Users with access to PII	Yes/No/N/A	Purpose
User	Yes	View/Edit own records
Administrators	Yes	System maintenance/performance
Developers	Yes	Maintenance/updates/changes
Contractors	Yes	Primary POC is a contractor
Other	No	

*30. Please describe in detail: (1) The information the agency will collect, maintain, or disseminate (clearly state if the information contained in the system ONLY represents federal contact data); (2) Why and for what purpose the agency will use the information; (3) Explicitly indicate whether the information contains PII; and (4) Whether submission of personal information is voluntary or mandatory:

Legislative authority is 42 U.S.C. 203, 241, 289I-1 and 44 U.S.C. 3101), and Section 301 and 493 of the Public Health Service Act. Information is maintained for advocates that are members of the CARRA program include membership status (active or non-active), race/ethnicity/age/gender of member, occupation, highest educational degree earned, area of educational degree, primary/personal/constituency cancer type, location/race/ethnicity of constituency, activity preferences, computer skills, ability to travel, and skills/accomplishments/activities. Information is used only within the agency. Submission of information is voluntary.

*31. Please describe in detail any processes in place to: (1) Notify and obtain consent from the individuals whose PII is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection); (2) Notify and obtain consent from individuals regarding what PII is being collected from them; and (3) How the information will be used or shared. (Note: Please describe in what format individuals will be given notice of consent [e.g., written notice, electronic notice, etc.]

Notification and consent in both cases is done via e-mail.

WEBSITE HOSTING PRACTICES

1 Website Hosting Practices

*32. Does the system host a website? (Note: If the system hosts a website, the Website Hosting Practices section is required to be completed regardless of the presence of PII)

Yes

Please indicate "Yes" or "No" for each type of site below. If the system hosts both Internet and Intranet sites, indicate "Yes" for "Both" only.	Yes/ No	If the system hosts an Internet site, please enter the site URL. Do not enter any URL(s) for Intranet sites.
Internet	Yes	
Intranet	No	
Both	No	

33. Does the system host a website that is accessible by the public and does not meet the exceptions listed in OMB M-03-22?

Note: OMB M-03-22 Attachment A, Section III, Subsection C requires agencies to post a privacy policy for websites that are accessible to the public, but provides three exceptions: (1) Websites containing information other than "government information" as defined in OMB Circular A-130; (2) Agency intranet websites that are accessible only by authorized government users (employees, contractors, consultants, fellows, grantees); and (3) National security systems defined at 40 U.S.C. 11103 as exempt from the definition of information technology (see section 202(i) of the E-Government Act.).

No

34. If the website does not meet one or more of the exceptions described in Q. 33 (i.e., response to Q. 33 is "Yes"), a website privacy policy statement (consistent with OMB M-03-22 and Title II and III of the E-Government Act) is required. Has a website privacy policy been posted?

Yes

35. If a website privacy policy is required (i.e., response to Q. 34 is "Yes"), is the privacy policy in machine-readable format, such as Platform for Privacy Preferences (P3P)?

Yes

35a. If no, please indicate when the website will be P3P compliant:

36. Does the website employ tracking technologies?

No

Please indicate "Yes", "No", or "N/A" for each type of cookie below:	Yes/No/N/A
Web Bugs	
Web Beacons	
Session Cookies	
Persistent Cookies	

Other	
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*37. Does the website have any information or pages directed at children under the age of thirteen?

No

37a. If yes, is there a unique privacy policy for the site, and does the unique privacy policy address the process for obtaining parental consent if any information is collected?

38. Does the website collect PII from individuals?

Yes

Please indicate "Yes" or "No" for each category below:	Yes/No
Name (for purposes other than contacting federal employees)	Yes
Date of Birth	Yes
SSN	No
Photographic Identifiers	No
Driver's License	No
Biometric Identifiers	No
Mother's Maiden Name	No
Vehicle Identifiers	No
Personal Mailing Address	Yes
Personal Phone Numbers	Yes
Medical Records Numbers	No
Medical Notes	Yes
Financial Account Information	No
Certificates	No
Legal Documents	No
Device Identifiers	No
Web URLs	Yes
Personal Email Address	Yes
Education Records	No
Military Status	No
Employment Status	Yes
Foreign Activities	No
Other	Health Information

39. Are rules of conduct in place for access to PII on the website?

Yes

40. Does the website contain links to sites external to HHS that owns and/or operates the system?

No

40a. If yes, note whether the system provides a disclaimer notice for users that follow external links to websites not owned or operated by HHS.

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ADMINISTRATIVE CONTROLS

1	Administrative Controls
Note: This PIA uses the terms “Administrative,” “Technical” and “Physical” to refer to security control questions—terms that are used in several Federal laws when referencing security requirements.	
41. Has the system been certified and accredited (C&A)?	
No	
41a. If yes, please indicate when the C&A was completed (Note: The C&A date is populated in the System Inventory form via the responsible Security personnel):	
Dec 15, 2006	
41b. If a system requires a C&A and no C&A was completed, is a C&A in progress?	
42. Is there a system security plan for this system?	
No	
43. Is there a contingency (or backup) plan for the system?	
No	
44. Are files backed up regularly?	
Yes	
45. Are backup files stored offsite?	
Yes	
46. Are there user manuals for the system?	
Yes	
47. Have personnel (system owners, managers, operators, contractors and/or program managers) using the system been trained and made aware of their responsibilities for protecting the information being collected and maintained?	
Yes	
48. If contractors operate or use the system, do the contracts include clauses ensuring adherence to privacy provisions and practices?	
Yes	
49. Are methods in place to ensure least privilege (i.e., “need to know” and accountability)?	
Yes	
49a. If yes, please specify method(s):	
Via account permissions.	
*50. Are there policies or guidelines in place with regard to the retention and destruction of PII? (Refer to the C&A package and/or the Records Retention and Destruction section in SORN):	
Yes	
50a. If yes, please provide some detail about these policies/practices:	
Data retention and destruction for system follows established NIH guidelines.	

TECHNICAL CONTROLS

1 Technical Controls

51. Are technical controls in place to minimize the possibility of unauthorized access, use, or dissemination of the data in the system?

Yes

Please indicate "Yes" or "No" for each category below:	Yes/No
User Identification	Yes
Passwords	Yes
Firewall	Yes
Virtual Private Network (VPN)	Yes
Encryption	No
Intrusion Detection System (IDS)	Yes
Common Access Cards (CAC)	No
Smart Cards	No
Biometrics	No
Public Key Infrastructure (PKI)	Yes

52. Is there a process in place to monitor and respond to privacy and/or security incidents?

Yes

52a. If yes, please briefly describe the process:

NIH maintains a comprehensive Incident Response Team (IRT) capability.

PHYSICAL ACCESS

1 Physical Access

53. Are physical access controls in place?

Yes

Please indicate "Yes" or "No" for each category below:	Yes/No
Guards	Yes
Identification Badges	Yes
Key Cards	Yes
Cipher Locks	Yes
Biometrics	No
Closed Circuit TV (CCTV)	No

*54. Briefly describe in detail how the PII will be secured on the system using administrative, technical, and physical controls:

Information is secured using username/passwords, least privilege, separation of duties, an intrusion detection system, firewalls, locks, badge access, background investigations. A comprehensive IRT capability is also maintained.

APPROVAL/DEMOTION

1	System Information					
System Name:	NIH NCI Office of Liaison Activities Database (OLA)					
2	PIA Reviewer Approval/Promotion or Demotion					
Promotion/Demotion:	Promote					
Comments:	IIF.					
Approval/Demotion Point of Contact:	Suzy Milliard					
Date:	Jul 30, 2010					
3	Senior Official for Privacy Approval/Promotion or Demotion					
Promotion/Demotion:	Promote					
Comments:						
4	OPDIV Senior Official for Privacy or Designee Approval					
Please print the PIA and obtain the endorsement of the reviewing official below. Once the signature has been collected, retain a hard copy for the OPDIV's records. Submitting the PIA will indicate the reviewing official has endorsed it						
This PIA has been reviewed and endorsed by the OPDIV Senior Official for Privacy or Designee (Name and Date):						
Name: _____ Date: _____						
<table border="1"> <tr> <td>Name:</td> <td>Karen Plá</td> </tr> <tr> <td>Date:</td> <td>Sep 28, 2010</td> </tr> </table>			Name:	Karen Plá	Date:	Sep 28, 2010
Name:	Karen Plá					
Date:	Sep 28, 2010					
5	Department Approval to Publish to the Web					
Approved for web publishing	Yes					
Date Published:	Sep 1, 2009					
Publicly posted PIA URL or no PIA URL explanation:	http://www.hhs.gov/pia/nih.html					

PIA % COMPLETE	
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1	PIA Completion
PIA Percentage Complete:	100.00
PIA Missing Fields:	