

# Privacy Impact Assessment Form

v 1.45

Status 

Form Number

Form Date

Question

Answer

1 OPDIV:

2 PIA Unique Identifier:

2a Name:

3 The subject of this PIA is which of the following?

- General Support System (GSS)  
 Major Application  
 Minor Application (stand-alone)  
 Minor Application (child)  
 Electronic Information Collection  
 Unknown

3a Identify the Enterprise Performance Lifecycle Phase of the system.

3b Is this a FISMA-Reportable system?

- Yes  
 No

4 Does the system include a Website or online application available to and for the use of the general public?

- Yes  
 No

5 Identify the operator.

- Agency  
 Contractor

6 Point of Contact (POC):

POC Title

POC Name

POC Organization

POC Email

POC Phone

7 Is this a new or existing system?

- New  
 Existing

8 Does the system have Security Authorization (SA)?

- Yes  
 No

8b Planned Date of Security Authorization

 Not Applicable

11 Describe the purpose of the system.

LEDS is a combination of CDC-developed message handlers and SAS programs that capture, store and analyze laboratory confirmed isolate information obtained through the transmittal and receiving of isolate information from external laboratories. Data from this system is used by CDC for disease surveillance and analysis. There are four programs that participate and receive some or all of their data via this system: Foodborne, Influenza, Rabies and FoodNet.

12

Describe the type of information the system will collect, maintain (store), or share. (Subsequent questions will identify if this information is PII and ask about the specific data elements.)

Four independent programs fall under the umbrella that is called LEDS. Each program collects the same basic demographic information and differentiates themselves by the additional information each collects. The external sites are provided detailed instructions on how to create the disease specific ASCII delimited files from their Laboratory Information Management System (LIMS). They send these files via CDC's Public Health Information Network Messaging System (PHINMS).

The information collection and analysis requirements of the LEDS programs are managed independently through their corresponding CDC divisions as follows:

Division of Foodborne, Waterborne and Environmental Diseases (NCEZID\DFWED)

- Foodborne

- o Diseases: Campylobacteriosis, Escherichia coli, Salmonellosis, Shigellosis
- o Detailed isolate information is collected along with minimal demographic information such as State, Zip code, County, Sex, Ethnicity, Race and Age.

- FoodNet

- o Diseases: Campylobacteriosis, Cholera, Cryptosporidiosis, Cyclosporiasis, Escherichia coli, HUS, Listeriosis, Salmonellosis, Shigellosis, Yersiniosis
- o Detailed isolate information is collected along with minimal demographic information such as State, Zip code, County, Sex, Ethnicity, Race and Age. Once or twice a year, case studies are conducted and the interview questions are transmitted and added to the database. No PII data is collected for case studies.

Influenza Division (NCIRD/ID)

- Influenza

- o Diseases: Influenza
- o Detailed isolate information is collected along with minimal demographic information such as State, Zip code, County, Sex, Ethnicity, Race and Age.

Division of High-Consequence Pathogens and Pathology (NCEZID\DHCPP)

- Rabies

- o Diseases: Rabies
- o Detailed isolate information is collected along with minimal demographic information such as State, Zip code, County, Sex, Ethnicity, Race and Age.

13 Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.

LEDS is a combination of CDC-developed message handlers and SAS programs that capture, store and analyze laboratory confirmed isolate information obtained through the transmittal and receiving of isolate information from external laboratories. Data from this system is used by CDC for disease surveillance and analysis. There are four programs that participate and receive some or all of their data via this system: Foodborne, Influenza, Rabies and FoodNet.

Detailed isolate information is collected along with minimal demographic information such as State, Zip code, County, Sex, Ethnicity, Race and Age.

14 Does the system collect, maintain, use or share PII?

Yes  
 No

15 Indicate the type of PII that the system will collect or maintain.

<input type="checkbox"/> Social Security Number	<input checked="" type="checkbox"/> Date of Birth
<input type="checkbox"/> Name	<input type="checkbox"/> Photographic Identifiers
<input type="checkbox"/> Driver's License Number	<input type="checkbox"/> Biometric Identifiers
<input type="checkbox"/> Mother's Maiden Name	<input type="checkbox"/> Vehicle Identifiers
<input type="checkbox"/> E-Mail Address	<input type="checkbox"/> Mailing Address
<input type="checkbox"/> Phone Numbers	<input type="checkbox"/> Medical Records Number
<input type="checkbox"/> Medical Notes	<input type="checkbox"/> Financial Account Info
<input type="checkbox"/> Certificates	<input type="checkbox"/> Legal Documents
<input type="checkbox"/> Education Records	<input type="checkbox"/> Device Identifiers
<input type="checkbox"/> Military Status	<input type="checkbox"/> Employment Status
<input type="checkbox"/> Foreign Activities	<input type="checkbox"/> Passport Number
<input type="checkbox"/> Taxpayer ID	<input type="text" value="Ethnicity"/>
<input type="text" value="Race"/>	<input type="text" value="County"/>
<input type="text" value="Gender"/>	<input type="text" value="Zip code"/>

16 Indicate the categories of individuals about whom PII is collected, maintained or shared.

Employees  
 Public Citizens  
 Business Partners/Contacts (Federal, state, local agencies)  
 Vendors/Suppliers/Contractors  
 Patients  
 Other

17 How many individuals' PII is in the system?

18 For what primary purpose is the PII used?

19 Describe the secondary uses for which the PII will be used (e.g. testing, training or research)

20 Describe the function of the SSN.

20a Cite the **legal authority** to use the SSN. n/a

21 Identify **legal authorities** governing information use and disclosure specific to the system and program. Public Health Service Act, Section 306(b) (42 U.S.C. 242k)

22 Are records on the system retrieved by one or more PII data elements?  Yes  No

22a Identify the number and title of the Privacy Act System of Records Notice (SORN) that is being used to cover the system or identify if a SORN is being developed. Published: [ ] Published: [ ] Published: [ ]  In Progress

23 Identify the sources of PII in the system. Directly from an individual about whom the information pertains:  In-Person,  Hard Copy: Mail/Fax,  Email,  Online,  Other. Government Sources:  Within the OPDIV,  Other HHS OPDIV,  State/Local/Tribal,  Foreign,  Other Federal Entities,  Other. Non-Government Sources:  Members of the Public,  Commercial Data Broker,  Public Media/Internet,  Private Sector,  Other.

23a Identify the OMB information collection approval number and expiration date. Not-Applicable

24 Is the PII shared with other organizations?  Yes  No

24a Identify with whom the PII is shared or disclosed and for what purpose.  Within HHS,  Other Federal Agency/Agencies,  State or Local Agency/Agencies,  Private Sector

<p>24b Describe any agreements in place that authorizes the information sharing or disclosure (e.g. Computer Matching Agreement, Memorandum of Understanding (MOU), or Information Sharing Agreement (ISA)).</p>		
<p>24c Describe the procedures for accounting for disclosures</p>		
<p>25 Describe the process in place to notify individuals that their personal information will be collected. If no prior notice is given, explain the reason.</p>	<p>No prior notice is given. All information is obtained at the State Health Department level. CDC does not interact with any individual and therefore all responsibility for patient notification resides with the State.</p>	
<p>26 Is the submission of PII by individuals voluntary or mandatory?</p>	<p><input checked="" type="radio"/> Voluntary <input type="radio"/> Mandatory</p>	
<p>27 Describe the method for individuals to opt-out of the collection or use of their PII. If there is no option to object to the information collection, provide a reason.</p>	<p>No option exists. All information is obtained at the State Health Department level. CDC does not interact with any individual and therefore all responsibility for patient notification resides with the State. The LEDS system receives data after patient has voluntarily shared Data with the state Department of Health with the express knowledge that such data may be shared with other relevant entities/organizations.</p>	
<p>28 Describe the process to 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 original collection). Alternatively, describe why they cannot be notified or have their consent obtained.</p>	<p>State health department has the notification responsibilities as they are the collectors and originators of the data. Changes are received into LEDS System secondarily.</p>	
<p>29 Describe the process in place to resolve an individual's concerns when they believe their PII has been inappropriately obtained, used, or disclosed, or that the PII is inaccurate. If no process exists, explain why not.</p>	<p>The Security Steward and Information System Security Officer (ISSO) are notified and analyze the incident. If the incident proves that PII was disclosed, CSIRT and the CPO are notified within one hour. At CDC's direction, the corresponding State health departments will be engaged to notify affected individuals since they are the collectors/originators of the data.</p>	
<p>30 Describe the process in place for periodic reviews of PII contained in the system to ensure the data's integrity, availability, accuracy and relevancy. If no processes are in place, explain why not.</p>	<p>OCISO requires annual security control assessment of the systems confidentiality, integrity, and availability. In addition, data cleaning and error reporting routines run on every State Health Laboratory record received to ensure the data's accuracy and relevance. At the end of each calendar year, final reviews and corrections (if necessary) are conducted before the calendar year data file is finally "Closed Out" and made available for analysis and publication by the program in papers and journals.</p>	

31	Identify who will have access to the PII in the system and the reason why they require access.	<input type="checkbox"/> Users	
		<input checked="" type="checkbox"/> Administrators	Full Access to properly manage data
		<input checked="" type="checkbox"/> Developers	Read/Write Access in order to help maintain data and its accuracy
		<input type="checkbox"/> Contractors	
		<input checked="" type="checkbox"/> Others	SME; Read Access Level to help interpret meaning of data
32	Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	Role-based Access Control (RBAC)	
33	Describe the methods in place to allow those with access to PII to only access the minimum amount of information necessary to perform their job.	The Least Privilege model is used	
34	Identify training and awareness provided to personnel (system owners, managers, operators, contractors and/or program managers) using the system to make them aware of their responsibilities for protecting the information being collected and maintained.	Annual CDC Security and Privacy Awareness Training (SAT)	
35	Describe training system users receive (above and beyond general security and privacy awareness training).	Role-based Training to use the database is given to individuals with access privileges.	
36	Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
37	Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific records retention schedules.	Final reports and substantive reporting materials are maintained permanently (CDC RCS, B-321, 4). Other input/output records and system data that may be required for follow-up are disposed of after 10 years. Disposal methods include erasing computer tapes, burning or shredding paper materials or transferring records to the Federal Records Center when no longer needed for evaluation and analysis. In addition, electronic media is subject to ITSO zero-wipe pass methodology.	
38	Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.	Operational Controls include physical facilities management policies, data center and media protection procedures, security & privacy incident response procedures; and mandatory annual security & privacy awareness training; and Technical Controls include application level role based access controls; servers audit and accountability requirements; encryption of PII at rest and in transit; and adherence to organizationally defined minimum security controls.	
<p><b>REVIEWER QUESTIONS:</b> The following section contains Reviewer Questions which are not to be filled out unless the user is an OPDIV Senior Officer for Privacy.</p>			
Reviewer Questions		Answer	

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1	Are the questions on the PIA answered correctly, accurately, and completely?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
2	Does the PIA appropriately communicate the purpose of PII in the system and is the purpose justified by appropriate legal authorities?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
3	Do system owners demonstrate appropriate understanding of the impact of the PII in the system and provide sufficient oversight to employees and contractors?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
4	Does the PIA appropriately describe the PII quality and integrity of the data?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
5	Is this a candidate for PII minimization?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
6	Does the PIA accurately identify data retention procedures and records retention schedules?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
7	Are the individuals whose PII is in the system provided appropriate participation?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
8	Does the PIA raise any concerns about the security of the PII?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
9	Is applicability of the Privacy Act captured correctly and is a SORN published or does it need to be?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
10	Is the PII appropriately limited for use internally and with third parties?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
11	Does the PIA demonstrate compliance with all Web privacy requirements?	<input type="radio"/> Yes <input type="radio"/> No



Reviewer Questions		Answer	
<i>Reviewer Notes</i>	<input type="text"/>		
12	Were any changes made to the system because of the completion of this PIA?	<input type="radio"/> Yes <input type="radio"/> No	
<i>Reviewer Notes</i>	<input type="text"/>		
General Comments	<input type="text"/>		
OPDIV Senior Official for Privacy Signature	<input type="text"/>	HHS Senior Agency Official for Privacy	<input type="text"/>