

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Initial Privacy Assessment

Indian Housing Block Grant Program Reporting Information Collection

February 1, 2016

INITIAL PRIVACY ASSESSMENT (IPA)

The Initial Privacy Assessment (IPA) is use to determine whether a Privacy Impact Assessment (PIA) is required under the E-Government Act of 2002. The IPA is also used to determine if a System of Records Notice (SORN) is required under the Privacy Act of 1974.

The IPA is an administrative form created by the Privacy Branch to efficiently and effectively identify the use of Personally Identifiable Information (PII) across the Department. The IPA focuses on three areas of inquiry:

- Business data and business processes within each HUD program.
- Potential connections with individuals including the use of PII any use of social security numbers must be specifically identified.

HUD's program and support offices should ensure that its respective IPA is completed and sent to the Privacy Branch for approval. If SSNs are to be used, the IPA specifically identifies the justification and authority for using SSNs. Upon receipt of the IPA, the Privacy Branch determines the applicability of other privacy compliance requirements including the PIA and SORN. The IPA is complete when the Privacy Branch signs it and sends the final copy back to the identified point of contact.

Please complete this form and send it to the HUD Privacy Branch staff.

Janice Noble Acting, Branch Chief Privacy Branch U.S. Department of Housing and Urban Development

Privacy@hud.gov

If a PIA or SORN is required, a copy of the Privacy Impact Assessment and System of Records Notice form is available on the HUD Privacy Branch website,

http://hudatwork.hud.gov/HUD/cio/po/i/privacy, on HUD@Work or directly from the HUD

Privacy Branch via email: <u>privacy@hud.gov</u> to complete and return.

INITIAL PRIVACY ASSESSMENT (IPA) SUMMARY INFORMATION

Date Submitted for Review: February 1, 2016

Name of System or Project: Indian Housing Block Grant Program Information Collection

System Name in CSAM: N/A

Name of Program Office: Office of Native American Programs (ONAP)

Name of Project Manager or System Owner: Randall Akers, ONAP Acting Deputy Assistant Secretary

Email for Project Manager or System Owner: Randall.R.Akers@hud.gov

Phone Number for Project Manager or System Owner: 202-402-3326

Type of Project:

- □ Information Technology and/or System
- □ A Notice of Proposed Rule Making or a Final Rule:
- ⊠ Form or other Information Collection:
- □ Other: <Please describe the type of project including paper based Privacy Act system of records.>

SPECIFIC QUESTIONS

1. **Describe the project and its purpose:**

The Native American Housing Assistance and Self Determination Act provides funding to Federally recognized Native American tribes and Alaska Native villages for eligible low income housing activities. The statute requires recipients (tribes and tribally designated housing entities) to submit specific information that is necessary for the implementation of low income housing programs using Indian Housing Block Grant funds (IHBG). Recipients of IHBG funds submit Indian Housing Plan/Annual Performance Reports, Formula Response Forms, and Formula Challenge Forms. Recipients of IHBG funds submit an Indian Housing Plan/Annual Performance Report annually using a Word, Excel, or EPIC version of the form that requests exactly the same information. The automated capabilities of the Excel EPIC versions improve the quality of the submission and simplify the completion of the form, while reducing paperwork burden.

HUD's Office of Native American Programs collects data submitted by tribes and tribally designated housing entities for the purposes of program evaluation and planning, enforcement, and reporting to Congress.

2. Status of Project:

 \Box This is a new development effort.

 \boxtimes This is an existing project.

Date first developed: 1998

Date last updated: Ongoing

The IHBG program provides funding to eligible tribes and tribally designated housing entities annually. This is an ongoing program.

3. From whom do you collect, process, or retain information on: (Please check all that apply)

□ HUD Employees

⊠ Contractors working on behalf of HUD

□ The Public

□ The System does not contain any such information.

4. Do you use or collect Social Security Numbers (SSNs)? (This includes truncated SSNs)

🛛 No.

 \Box Yes. Why does the program collect SSNs? Provide the function of the

SSN and the legal authority to do so: N/A

5. What information about individuals could be collected, generated or retained? ONAP does not collect information about individuals.

6. If this project is a technology/system, does it relate solely to infrastructure? [For example, is the system a Local Area Network (LAN) or Wide Area Network (WAN)]?

 \boxtimes No. Please continue to the next question.

□ Yes. Is there a log kept of communication traffic?

 \Box No. Please continue to the next question.

 \Box Yes. What type of data is recorded in the log? (Please choose all that apply.)

□ Header

□ Payload Please describe the data that is logged.

<Please list the data elements in the log.>

7. Does the system connect, receive, or share Personally Identifiable Information with any other HUD systems?

🛛 No.

 \Box Yes. Please list the systems:

Is this external sharing pursuant to new or existing information sharing access agreement (MOU, MOA, LOI, etc.)? No external sharing of PIV.

8. Does the system meet all of the following requirements?

There will be a group of records under the control of an agency that contains a personal identifier (such as a name, date of birth, SSN, Employee Number, fingerprint, etc.) of U.S. citizens and lawful permanent residents;

Contains at least one other item of personal data (such as home address, performance rating, blood type, etc.); and

The data about the subject individual IS retrieved by the name or unique identifier assigned to the individual.

⊠ No.

 \Box Yes.

If yes is there an existing System of Record Notice?

 \Box No.

 \Box Yes.

9. Is there an Authorization to Operate record within OCIO's FISMA tracking system CSAM?

□ Unknown

🗵 No

 $\hfill\square$ Yes. Please indicate the determinations for each of the following:

Confidentiality:	\Box Low \Box Moderate \Box High
Integrity:	\Box Low \Box Moderate \Box High
Availability:	\Box Low \Box Moderate \Box High

PRIVACY DETERMINATION (TO BE COMPLETED BY THE HUD PRIVACY BRANCH)

Date reviewed by the HUD Privacy Branch: <<u>Insert Date.</u>> **Name of the HUD Privacy Branch Reviewer**: <<u>Please enter name of reviewer</u>.>

DESIGNATION

□ **This is NOT a Privacy Sensitive System** – the system contains no Personally Identifiable Information.

□ This IS a Privacy Sensitive System Category of System

- □ IT System
- □ Legacy System
- □ HR System
- 🗆 Rule
- □ Other: _____

Determination

 \Box IPA sufficient at this time

□ Privacy compliance documentation determination in progress

 \Box PIA is not required at this time

 \Box PIA is required

□ System covered by existing PIA:

□ New PIA is required

□ PIA update is required

 \Box SORN not required at this time

 \Box SORN is required

□ System covered by existing SORN:

 \Box New SORN is required

HUD PRIVACY BRANCH COMMENTS:

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DOCUMENT ENDORSMENT

DATE REVIEWED: PRIVACY REVIEWING OFFICIALS NAME:

By signing below you attest that the content captured in this document is accurate and complete and meet the requirements of applicable federal regulations and HUD internal policies.

SYSTEM OWNER

Randall Akers, Acting Deputy Assistant Secretary Office of Native American Programs HUD (Room 4126) 451 7th Street Washington, DC 20410 202-402-3326 randall.r.akers@hud.gov

CHIEF PRIVACY OFFICER

<<**INSERT NAME/TITLE>>** OFFICE OF ADMINISTRATION Date

Date