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Privacy Impact Assessment Form

v 1.21

Status | Form Number: 0920-17BAN | Form Date: 4/3/2018

	Question	Answer
1	OPDIV:	CDC
2	PIA Unique Identifier:	0920-17BAN
2a	Name:	Strengthening United States Response to Resistant Gonorrhea (
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.	Initiation
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: Team Lead POC Name: Robert D. Kirkcaldy POC Organization: NCHHSTP/DSTDP/ESB POC Email: HGL8@cdc.gov POC Phone: (404) 639-8659
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

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8c	Briefly explain why security authorization is not required	This is an information collection.
10	Describe in further detail any changes to the system that have occurred since the last PIA.	N/A
11	Describe the purpose of the system.	The "Strengthening United States Response to Resistant Gonorrhea (SURRG)" collection will enhance US state and local public health surveillance and program infrastructure, build capacity to support rapid detection and public health response to antibiotic-resistant gonorrhea, and advance the understanding of epidemiological factors contributing to antibiotic-resistant gonorrhea.
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.)	SURRG awardees routinely collect PII for the purpose of monitoring persons seeking STD clinic services, surveillance, and contacting individuals with gonorrhea to ensure successful treatment and conduct partner services. The information being collected will include: date of birth, gender, race/ethnicity, HIV status, sexual behavior, military status, education level, employment status, insurance status and type, and medical information, such as frequency of STD testing. A unique non-identifiable project number is assigned to each case. The key to link data will only be available at the local level.

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13	Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.	The purpose of SURRG is to improve national capacity to detect, monitor, and respond to emerging antibiotic-resistant gonorrhea. SURRG will also provide a robust evidence base for directing public health action. Nine funded jurisdictions will participate. Healthcare providers at ~27 participating clinics (sexually transmitted disease (STD) clinics affiliated with a single public health department (HD) or other participating non-STD clinic sites) will collect specimens for N. gonorrhoeae culture testing from men and women. Cultured bacteria (called "isolates") will undergo antibiotic susceptibility testing within several days at the local public health laboratory. Lab identification of resistance will be rapidly communicated to a designated local HD staff member; an outbreak investigation will be initiated. Local HD staff will interview the person from whom the resistant isolate was collected to ascertain additional epidemiological data and information about recent contacts, and will be re-tested to ensure they were cured of the infection. Recent contacts will be interviewed and tested by local HD staff. The participating HDs will collect and transmit to CDC demographic, clinical, and lab data about persons tested for and diagnosed with gonorrhea. The project will utilize 3 distinct strategies to collect the required information. (1) Facility-based data which will be abstracted by local HD staff in a standardized way from existing electronic medical records for patient visits to participating STD clinics or partnering non-STD clinic sites during which gonorrhea testing occurred. (2) Results of local antibiotic-susceptibility testing of N. gonorrhoeae will be transmitted to the local HD and relevant clinical site. (3) The Persons found to be infected with gonococcal infections with reduced antibiotic susceptibility or other gonorrhea infections of public health significance will be interviewed by HD staff as part of a field investigation to ascertain epidemiological data and to identify recent contacts. Consistent with a public health cluster investigation approach, recent contacts of the patient who may have been exposed to gonorrhea will be interviewed (using a standardized interview, including ascertainment of recent contacts) by HD staff and tested for gonorrhea. The estimated sample size will be 360 completed interviews.
14	Does the system collect, maintain, use or share **PII**?	(●) Yes ( ) No

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15	Indicate the type of PII that the system will collect or maintain.	☐ Social Security Number ☒ Date of Birth ☒ Name ☐ Photographic Identifiers ☐ Driver's License Number ☐ Biometric Identifiers ☐ Mother's Maiden Name ☐ Vehicle Identifiers ☒ E-Mail Address ☒ Mailing Address ☒ Phone Numbers ☒ Medical Records Number ☐ Medical Notes ☐ Financial Account Info ☐ Certificates ☐ Legal Documents ☐ Education Records ☐ Device Identifiers ☒ Military Status ☒ Employment Status ☐ Foreign Activities ☐ Passport Number ☐ Taxpayer ID Social media identifiers (see Q12) STD Surveillance identifiers Other... Other... Other...
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?	500-4,999
18	For what primary purpose is the PII used?	(1) To allow local public health officials (disease investigation specialists) to contact persons with gonorrhea and their contacts (as per routine STD public health practice).
19	Describe the secondary uses for which the PII will be used (e.g. testing, training or research)	(2) To allow local public health officials to connect STD clinic data, field investigation data, and laboratory data to ensure streamlined and efficient access to actionable data during rapid field investigations. This is currently done as part of routine public health practice/STD control. (3) To allow local public health officials to use data collected during surveillance or during routine medical care at STD clinics to complete some field investigation, thus reducing the burden on survey participants by asking redundant questions.
20	Describe the function of the SSN.	N/A. SSNs are not collected
20a	Cite the **legal authority** to use the SSN.	N/A. SSNs are not collected.

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21	Identify **legal authorities** governing information use and disclosure specific to the system and program.	Public Health Service Act, Section 301, "Research and Investigation," (42 U.S.C. 241); and Sections 304, 306 and 308(d) which discuss authority to maintain data and provide assurances of confidentiality for health research and related activities (42 U.S.C. 242 b, k, and m(d)).
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.	This is a new Information Collection Request.
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

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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)).	Not applicable	
24c	Describe the procedures for accounting for disclosures	Not applicable	
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.	Personal information is routinely collected during the course of clinical healthcare encounters. Personal information pertaining to reportable/notifiable diseases (such as gonorrhea) and contacts of persons with gonorrhea is also legally allowed to be collected by local and state health departments as part of surveillance and public health activities and does not require consent.	
26	Is the submission of PII by individuals voluntary or mandatory?	(•) Voluntary ( ) Mandatory	
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.	Opting out of collection of PII would be determined by healthcare setting policy and local or state statutes regarding collection of data on reportable diseases.	
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.	PII will only be stored and maintained within data systems of local and state health departments. Local and state statutes will determine the process for notifying individuals when major changes to local or state data systems occur. Healthcare providers who store PII will have determined necessary policies.	
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.	These processes are under the domain of local and state health departments and clinical providers, and may vary by jurisdiction.	
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.	These processes are under the domain of local and state health departments and clinical providers, and may vary by jurisdiction.	
31	Identify who will have access to the PII in the system and the reason why they require access.	[X] Users [ ] Administrators [ ] Developers [ ] Contractors [ ] Others	Local and/or state health department officials who are responsible for

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32	Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	Only local and/or state health department officials who are responsible for collecting, managing, using, and analyzing the data for surveillance and disease control activities will have access to data. States and independently funded project areas which receive STD prevention funding must attest annually that they uphold NCHHSTP Data Confidentiality and Security Standards.
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.	Only local and/or state health department officials who are responsible for collecting, managing, using, and analyzing the data for surveillance and disease control activities will have access to data. States and independently funded project areas which receive STD prevention funding must attest annually that they uphold NCHHSTP Data Confidentiality and Security Standards.
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.	States and independently funded project areas which receive STD prevention funding must attest annually that they uphold NCHHSTP Data Confidentiality and Security Standards and that those with access to the data have received sufficient training.
35	Describe training system users receive (above and beyond general security and privacy awareness training).	Details of training is under the auspices of each state and project area.
36	Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?	(●) Yes ( ) No
37	Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific records retention schedules.	CDC uses the CDC Records Control Schedule for determining retention and destruction of PII, specifically, section 04-4-40 Surveillance Report of STD Activity, which prescribes that records be retained and destroyed when no longer needed for administrative or research purposes or when 30 years old, whichever comes first.
38	Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.	Importantly, CDC will not receive or store PII. Local and state administrative, technical, and physical controls are determined by each local and state health department and government. As grantees of federal STD Prevention Funding, state and project areas must operate in accordance with current NCHHSTP Confidentiality and Security Guidelines. CDC data will be stored on an ITSO supported server housed in the Application Hosting Branch (AHB). This facility is protected by Guards at the front gate entrance to the campus, additional protections include Personal Identification Verification (PIV) card access to the building and rooms where the servers are located. Guards are also located inside the campus and buildings to control ingress and egress. Access to the server is controlled using individual access controls and only authorized users will have access to the data.

REVIEWER QUESTIONS: The following section contains Reviewer Questions which are not to be filled out unless the user is an OPDIV Senior Officer for Privacy.

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

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	Reviewer Questions	Answer
Reviewer Notes		
12	Were any changes made to the system because of the completion of this PIA?	◯ Yes ◯ No
Reviewer Notes		
General Comments		
OPDIV Senior Official for Privacy Signature	Beverly E. Walker -S Digitally signed by Beverly E. Walker -S Date: 2018.06.14 17:03:42 -04'00'	HHS Senior Agency Official for Privacy