

Privacy Impact Assessment Form

v 1.21

Status Form Number Form Date

Question

Answer

1 OPDIV:

CDC

2 PIA Unique Identifier:

TBD

2a Name:

Canine Leptospirosis Surveillance in Puerto Rico

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.

Development

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

8c	Briefly explain why security authorization is not required	Not applicable.
9	Indicate the following reason(s) for updating this PIA. Choose from the following options.	<input checked="" type="checkbox"/> PIA Validation (PIA Refresh/Annual Review) <input type="checkbox"/> Significant System Management Change <input type="checkbox"/> Anonymous to Non-Anonymous <input type="checkbox"/> Alteration in Character of Data <input type="checkbox"/> New Public Access <input type="checkbox"/> New Interagency Uses <input type="checkbox"/> Internal Flow or Collection <input type="checkbox"/> Conversion <input type="checkbox"/> Commercial Sources Other...
10	Describe in further detail any changes to the system that have occurred since the last PIA.	Not applicable.
11	Describe the purpose of the system.	The purpose of this information collection is to determine the incidence and distribution of canine leptospirosis in Puerto Rico; assess risk factors that lead to infection; characterize circulating Leptospira serovars and species; assess applicability of vaccines currently in use based on serovar determination; and assess potential rodent, livestock and wildlife reservoirs of leptospirosis based on infecting serovars found in dogs.
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.)	The dog owner's name and mailing address and the information on the veterinary office , name of the facility, address, phone number, and doctor's name are collected as part of the study. Additionally, data elements concerning the dogs health and environmental factors are collected.
13	Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.	<p>Whenever possible, Centers for Disease Control and Prevention (CDC) Bacterial and Special Pathogens Branch (BSPB) staff will employ electronic technology to collect and process data in order to reduce respondent burden, and aid in data processing and reporting efficiency.</p> <p>Due to the nature of data collection and resources available at the sites, most of the collection will be conducted using paper forms. Veterinarians and their staff may find it easier to complete a paper copy of the data collection forms when abstracting information from medical records or while interviewing the owner for risk factors and symptoms. Some sites may have limited resources and lack a computer, fax machine, or Internet service. As such, they have the option of sending completed forms by fax or email, or by mail when sending specimen shipments to study coordinators at CDC or the Puerto Rico Department of Health (PRDH). Data will be entered into an electronic database at CDC to make data management and analysis more efficient.</p> <p>The system only has CDC users who are authenticated via Active Directory which has a separate PIA.</p>
14	Does the system collect, maintain, use or share PII?	<input checked="" type="radio"/> Yes <input type="radio"/> No

15	Indicate the type of PII that the system will collect or maintain. <input type="checkbox"/> Social Security Number <input checked="" type="checkbox"/> Name <input type="checkbox"/> Driver's License Number <input type="checkbox"/> Mother's Maiden Name <input type="checkbox"/> E-Mail Address <input checked="" type="checkbox"/> Phone Numbers <input type="checkbox"/> Medical Notes <input type="checkbox"/> Certificates <input type="checkbox"/> Education Records <input type="checkbox"/> Military Status <input type="checkbox"/> Foreign Activities <input type="checkbox"/> Taxpayer ID <input type="checkbox"/> Date of Birth <input type="checkbox"/> Photographic Identifiers <input type="checkbox"/> Biometric Identifiers <input type="checkbox"/> Vehicle Identifiers <input checked="" type="checkbox"/> Mailing Address <input type="checkbox"/> Medical Records Number <input type="checkbox"/> Financial Account Info <input type="checkbox"/> Legal Documents <input type="checkbox"/> Device Identifiers <input type="checkbox"/> Employment Status <input type="checkbox"/> Passport Number <input type="text" value="Other..."/> <input type="text" value="Other..."/> <input type="text" value="Other..."/>
16	Indicate the categories of individuals about whom PII is collected, maintained or shared. <input type="checkbox"/> Employees <input checked="" type="checkbox"/> Public Citizens <input checked="" type="checkbox"/> Business Partners/Contacts (Federal, state, local agencies) <input type="checkbox"/> Vendors/Suppliers/Contractors <input type="checkbox"/> Patients Other <input type="text"/>
17	How many individuals' PII is in the system? <input type="text" value="100-499"/>
18	For what primary purpose is the PII used? <input type="text" value="The primary purpose of the PII is to provide study supplies to pet owners so they can complete the questionnaire and send back specimens."/>
19	Describe the secondary uses for which the PII will be used (e.g. testing, training or research) <input type="text" value="The secondary use of PII is to track the location of incidents by keeping track of the veterinary facility where dogs are treated."/>
20	Describe the function of the SSN. <input type="text" value="Not applicable."/>
20a	Cite the legal authority to use the SSN. <input type="text" value="Not applicable."/>
21	Identify legal authorities governing information use and disclosure specific to the system and program. <input type="text" value="Section 301, Public Health Service Act"/>
22	Are records on the system retrieved by one or more PII data elements? <input checked="" type="radio"/> Yes <input type="radio"/> 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.

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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.

0920-1170 Exp. 3/31/2019

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

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)).

24c Describe the procedures for accounting for disclosures

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.	The dog owners are asked to sign the Owner Consent Form prior to obtaining blood and urine samples from the dog. The consent form explains how the information will be collected and protected.	
26 Is the submission of PII by individuals voluntary or mandatory?	<input checked="" type="radio"/> Voluntary <input type="radio"/> 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.	Individuals can opt out by not signing the consent form and not allowing CDC or PRDH to collect samples from their dog.	
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.	The Principal Investigator for this study can use the information in the system to notify and obtain consent from the individuals whose PII is in the system.	
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.	Individuals can contact the individual listed on the SORN, 09-20-0136, "Epidemiologic Studies and Surveillance of Disease Problems.", if they believe their PII has been inappropriately obtained, used or disclosed, or that the PII is inaccurate.	
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.	The conduct of this study requires that a shipment of supplies be made each quarter for a year to complete the study. This logistical effort will allow the Principal Investigator to ensure the data integrity, availability, accuracy, and relevancy.	
31 Identify who will have access to the PII in the system and the reason why they require access.	<input checked="" type="checkbox"/> Users <input type="checkbox"/> Administrators <input type="checkbox"/> Developers <input type="checkbox"/> Contractors <input type="checkbox"/> Others	Only study staff will have access to the PII in order to ship supplies to study
32 Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	For Electronic Access: The program first evaluates whether the individual has a need for access to the system. If the individual's manager determines that access to the system is required for the individual to perform their regular duties, they will make a request to the system administrator who will establish an account for the user to access the system. For Physical Access: The program first evaluates whether the individual has a need for access to the system. If the individual's manager determines that access to the system is required for the individual to perform their regular duties, they will be given access to the PII to perform those duties.	

<p>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.</p>	<p>Least privilege, role-based access methods are used to allow those with access to PII to only access the minimum amount of information necessary to perform their job. The system administrator is responsible for setting up the user access to the system based on CDC user id and assigned permissions.</p>
<p>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.</p>	<p>Users are required to take CDC Security and Privacy Awareness Training annually.</p>
<p>35 Describe training system users receive (above and beyond general security and privacy awareness training).</p>	<p>Users with significant security responsibilities also are required to take CDC or HHS Role-Based Training annually.</p>
<p>36 Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>37 Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific records retention schedules.</p>	<p>Records are maintained and destroyed according to CDC General Records Schedule (GRS) 20.6. Records are maintained in agency for five years. Disposal methods include shredding paper materials or transferring records to the Federal Records Center when no longer needed for evaluation and analysis. Records are destroyed by paper shredding process when five years old unless needed for further study. Stool samples will be destroyed when five years old unless needed for further study.</p>
<p>38 Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.</p>	<p>Administrative: Access to the application is approved by the individual's supervisor indicating that the user has a need to know the information on the system.</p> <p>Technical: CDC user id is encrypted while stored in the system.</p> <p>Physical: The server is protected by gate guards; and individual user credentials are required for each nonpublic access point. Closed circuit TV is also used by security guards to limit access to authorized individuals.</p>

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.

Reviewer Questions	Answer
<p>1 Are the questions on the PIA answered correctly, accurately, and completely?</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>
<p>Reviewer Notes <input type="text"/></p>	
<p>2 Does the PIA appropriately communicate the purpose of PII in the system and is the purpose justified by appropriate legal authorities?</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>
<p>Reviewer Notes <input type="text"/></p>	
<p>3 Do system owners demonstrate appropriate understanding of the impact of the PII in the system and provide sufficient oversight to employees and contractors?</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>

Reviewer Questions		Answer
Reviewer Notes	<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
Reviewer Notes	<input type="text"/>	
5	Is this a candidate for PII minimization?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<input type="text"/>	
6	Does the PIA accurately identify data retention procedures and records retention schedules?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<input type="text"/>	
7	Are the individuals whose PII is in the system provided appropriate participation?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<input type="text"/>	
8	Does the PIA raise any concerns about the security of the PII?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<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
Reviewer Notes	<input type="text"/>	
10	Is the PII appropriately limited for use internally and with third parties?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<input type="text"/>	
11	Does the PIA demonstrate compliance with all Web privacy requirements?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes	<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
Reviewer Notes	<input type="text"/>	
General Comments	<input type="text"/>	

OPDIV Senior Official
for Privacy Signature

HHS Senior
Agency Official
for Privacy