

Privacy Impact Assessment Form

v 1.47.4

Status Form Number Form Date

Question

Answer

1 OPDIV:

NIH

2 PIA Unique Identifier:

2a Name:

NIH Office of Clinical Research (OCR) Clinical Research Training Application

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

- Accept
- Reject

5 Identify the operator.

- Agency
- Contractor

6 Point of Contact (POC):

POC Title

Medical Officer

POC Name

Anne Zajicek

POC Organization

Office of the Director (OD)
of Clinical Research (OCR)

POC Email

zajiceka@mail.nih.gov

POC Phone

301-480-9913

- Accept
- Reject

7 Is this a new or existing system?

- New
- Existing

8 Does the system have Security Authorization (SA)?

- Yes
- No

- Accept
- Reject

- Yes
- No

Accept
Reject

8b Planned Date of Security

Authorization



September 1, 2019

Not Applicable

<p>11 Describe the purpose of the system.</p>	<p>The purpose of the system is to provide a redesigned and modernized version of the existing NIH Clinical Research Training Application. This application is a Learning Management system built leveraging Drupal Key features which include:</p> <ul style="list-style-type: none"> - Administrative ability to create and manage courses - Course registration for NIH and non-NIH (public) users - Access to course materials for registered users - Taking an exam and earning a certificate upon achieving a predetermined passing grade - Course and lecture evaluation - Discussion boards, calendars, and dashboards for each course created - Reporting features for user and usage statistics 	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>
<p>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 required questions will identify if this information is PII and ask about the specific data elements.)</p>	<p>Users are required to create an account with a login ID and password to log into the system. Registration is then required to access course materials. The registration form collects the following information:</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>
<p>13 Provide an overview of the system and describe the stored information it will collect, maintain (store), or share, either permanently or temporarily. administrative students taking</p>	<p>The information listed in Question 12 is collected and temporarily to provide login accounts for courses within the system and to allow the OCR</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject <input checked="" type="radio"/></p>
<p>14 Does the system collect, maintain, use or share PII?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p>Accept Reject</p>
<p>15 Indicate the type of PII that the system will collect or maintain.</p>	<p><input checked="" type="checkbox"/> Social Security Number <input type="checkbox"/> Date of Birth Name <input type="checkbox"/> Photographic Identifiers <input type="checkbox"/> Driver's License Number <input type="checkbox"/> Biometric <input checked="" type="checkbox"/> Identifiers <input type="checkbox"/> Mother's Maiden Name <input type="checkbox"/> Vehicle Identifiers 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 Degree ORCiD State/Territory Country Affiliation (NIH/Non-NIH, I/C, Institute/Company/Organization, Department)</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>

<p>16 Indicate the categories of individuals about whom PII is collected, maintained or shared.</p>	<input checked="" type="checkbox"/> Employees <input checked="" type="checkbox"/> Public Citizens <input type="checkbox"/> Business Partners/Contacts (Federal, state, local agencies) <input type="checkbox"/> Vendors/Suppliers/Contractors <input type="checkbox"/> Patients Other <input type="text"/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>17 How many individuals' PII is in the system?</p>	<input type="text" value="5,000-9,999"/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>18 For what primary purpose is the PII used?</p>	<input type="text" value="To provide identification for login accounts, emailing notifications, and placing students' names on passing exam certificates."/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>19 Describe the secondary uses for which the PII will be used (e.g. testing, training or research)</p>	<input type="text" value="To allow the OCR administrative team to analyze and report demographic data and statistics for all course students to provide metrics and help improve future course offerings, for use within OCR."/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>20 Describe the function of the SSN.</p>	<input type="text" value="N/A - SSN is not collected."/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>20a Cite the legal authority to use the SSN.</p>	<input type="text" value="N/A - SSN is not collected."/>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<p>21 Identify legal authorities governing information use and disclosure specific to the system and program.</p>	<input type="text" value="Privacy Act of 1974, as amended (5 U.S.C. Section 552a)"/>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>22 Are records on the system retrieved by one or more PII data elements?</p>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>23 Identify the sources of PII in the system.</p>	<p>Directly from an individual about whom the information pertains</p> <p><input type="checkbox"/> In-Person <input type="checkbox"/></p> <p>Hard Copy: Mail/Fax <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Online <input type="checkbox"/></p> <p><input type="checkbox"/> Other Government Sources <input type="checkbox"/></p> <p><input type="checkbox"/> Within the OPDIV Other HHS OPDIV <input type="checkbox"/></p> <p><input type="checkbox"/> State/Local/Tribal <input type="checkbox"/></p> <p><input type="checkbox"/> Foreign <input type="checkbox"/></p> <p>Other Federal Entities <input checked="" type="checkbox"/></p> <p>Other Non-Government Sources</p> <p>Public <input type="checkbox"/> Members of the Commercial <input type="checkbox"/></p> <p>Data Broker <input type="checkbox"/> Public <input type="checkbox"/></p> <p>Media/Internet <input type="checkbox"/> Private Sector <input type="checkbox"/></p> <p><input type="checkbox"/> Other <input type="checkbox"/></p>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject



23a Identify the OMB information collection approval number and expiration date.	OMB Number 0925-XXXX Application for new OMB Number under review and to be received by October 15, 2019.	
24 Is the PII shared with other organizations?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
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>The following OMB notice is placed at the top of the course registration form: OMB Notice Form approved OMB Number 0925-XXXX Expiration Date XX/XX/XX</p> <p>Public reporting burden for this collection of information is estimated to average (10) minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxx). Do not return the completed form to this address.</p>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
26 Is the submission of PII by individuals voluntary or mandatory?	<input type="radio"/> Voluntary <input checked="" type="radio"/> Mandatory	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
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.	Basic information is needed to create a login account for the system: First Name, Last Name, Email Address, and Username.	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
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.	If notification is required, individuals can be notified via email.	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
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>Individuals may send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxx). Do not return the completed form to this address.</p>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
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.	A process will be in place for OCR administration to monitor the data collection annually.	<input checked="" type="radio"/> Accept <input type="radio"/> Reject

<p>31 Identify who will have access to the PII in the system and the reason why they require access.</p>	<input type="checkbox"/> Users <input checked="" type="checkbox"/> Administrators <input checked="" type="checkbox"/> Developers <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Others	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; padding: 2px;"> Troubleshoot access issues; metrics reporting </div> <div style="border: 1px solid black; width: 100%; padding: 2px;"> Troubleshoot access and system issues </div> <div style="border: 1px solid black; width: 100%; padding: 2px;"> Troubleshoot access and system issues (the development team consists of contractors) </div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>32 Describe the procedures in place to determine which system users (administrators, developers, and contractors, etc.) may access PII. Services</p>	<p>The procedure to determine which system users may access PII is granted through a request to the system owner, along with a proper reason for needing access to the PII. NIH login is required. Following login, the system user's privileges are verified through the use of the NIH Identity, Credential, Access Management Services: Identity Management (IMS), formally known as the Active Directory (AD), and has its own approved PIA on record, including all legal authorities documented.</p>		<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>33 Describe the methods in place to allow those with access to PII to only access the minimum amount of Credential, and information necessary to perform their job. Management Services</p>	<p>The procedure to determine which system users may access PII is granted through a request to the system owner, along with a proper reason for needing access to the PII. NIH login is required. Following login, the system user's privileges are verified through the use of the NIH Identity, Credential, and information necessary to perform their job. Access Management Services: Identity Management (IMS), formally known as the Active Directory (AD), and has its own approved PIA on record, including all legal authorities documented.</p>		<input type="radio"/> Accept <input checked="" type="radio"/> Reject
<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>The NIH Security Awareness Training course is used to satisfy this requirement. According to NIH policy, all personnel who use NIH applications must attend security awareness training every year. There are four categories of mandatory IT training (Information Security, Counterintelligence, Privacy Awareness, and Records Management). Training is completed on the http://irtsectraining.nih.gov site with valid NIH credentials.</p> <p>All NIH personnel, contract personnel, and non-NIH users with authorized access to NIH-owned information system resources are required to complete NIH's on-line security awareness training course. Procedures, deadlines, and instructions are found within the NIH Security Awareness and Training policy document.</p>		<input type="radio"/> Accept <input checked="" type="radio"/> Reject
<p>35 Describe training system users receive (above and beyond general security and privacy awareness training).</p>	<p>Administrative users are provided training in the form of standard operating procedures. These trainings cover navigating the system, Shopping cart workflows and how to review and process publication orders.</p>		<input checked="" type="radio"/> Accept <input type="radio"/> Reject
<p>36 Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?</p>	<p style="text-align: center;">Yes <input type="radio"/> No</p>		<input type="radio"/> Accept <input checked="" type="radio"/> Reject



<p>Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific records retention schedules.</p>	<p>6.5 Public Customer Service Records This schedule covers records an agency creates or receives while providing customer service to the public. Federal agencies that provide direct services to the public operate customer call centers or service centers to assist external customers. They may provide customer support through telephone discussions (toll free numbers), dialogue (via chat), and email.</p> <p>Item 020: Customer/client records. Distribution lists used by an agency to deliver specific goods or services. Records include:</p> <ul style="list-style-type: none"> • contact information for customers or clients • subscription databases for distributing information such as publications and data sets produced by the agency • files and databases related to constituent and community outreach or relations • sign-up, request, and opt-out forms <p>Record Type: Temporary</p> <p>Disposition Instructions: Delete when superseded, obsolete, or when customer requests the agency to remove the records.</p> <p>Disposition Authority: DAA-GRS-2017-0002-0002</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>
<p>Describe, briefly but with specificity, how the PII will be secured in the system using administrative, report. All technical, and physical controls.</p>	<p>Administrative Controls: Access requests are managed, validated, and audited by the OCR Support Team and scheduled audits are performed to ensure accounts are validated and/or revoked if needed. Access Disclosure Agreements are required for all users. Technical Controls: Access to the system is controlled by NIH log-in which authenticates the user prior to granting access. Access level and permissions are controlled by the system and user, role, organizational unit, and status of the servers have been configured to remove all unused applications and system files and all local account access except when necessary to manage the system and maintain integrity of data. Physical Controls: The servers reside in the Center for Information Technology (CIT) Computer Room where policies and procedures are in place to restrict access to the machines. This includes guards at the front door and entrance to the machine room.</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>
<p>39 Identify the publicly-available URL:</p>	<p>ocrtraining.cit.nih.gov (expected URL; pending configuration of production site)</p>	<p><input checked="" type="radio"/> Accept <input type="radio"/> Reject</p>
<p>40 Does the website have a posted privacy notice?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p>Accept Reject</p>
<p>40a Is the privacy policy available in a machine-readable format?</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	



Reviewer Questions

Answer

Reviewer Questions		Answer	
7	Are the individuals whose PII is in the system provided appropriate participation?	<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
		<input type="radio"/> No	<input type="radio"/> Reject
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
8	Does the PIA raise any concerns about the security of the PII?	<input type="radio"/> No	<input type="radio"/> Reject
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
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"/> Accept
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
10	Is the PII appropriately limited for use internally and with third parties?	<input type="radio"/> Yes	<input type="radio"/> Accept
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
11	Does the PIA demonstrate compliance with all Web privacy requirements?	<input type="radio"/> Yes	<input type="radio"/> Accept
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept
12	Were any changes made to the system because of the completion of this PIA?	<input type="radio"/> Yes	<input type="radio"/> Accept
Reviewer	<input type="text"/>		
Notes		<input type="radio"/> Yes	<input checked="" type="radio"/> Accept

Reviewer Notes

General Comments

OPDIV Senior Official for Privacy Signature	HHS Senior Agency Official for Privacy
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Third-Party Website Assessment PIA Form

Status	Form Number	Read Only	Form Date	Read Only
Question	Answer			
1 OPDIV:	Read Only - OPDIV			

2 TPWA Unique Identifier (UID): Read Only - TPWA UID



3	TPWA Name: Name	Read Only - TPWA		
			Yes	
4	Is this a new TPWA?		No	
4a	Please provide the reason for revision			
	Will the use of a third-party Website or application		Yes	Accept
5	create a new or modify an existing HHS/OPDIV System of Records Notice (SORN) under the Privacy Act?		No	Reject
		SORN Number:		
5a	Indicate the SORN number (or identify plans to put one in place.)	If not published:		
	Will the use of a third-party Website or application		Yes	Accept
			No	Reject
6	create an information collection subject to OMB clearance under the Paperwork Reduction Act (PRA)?	OMB Approval Number		
		Expiration Date		
	Indicate the OMB approval number and approval 6a number expiration date (or describe the plans to obtain OMB clearance.)	Explanation	Yes	Accept
			No	Reject
7	Does the third-party Website or application contain Federal Records?	POC Title		
		POC Name		
8	Point of Contact (POC):	POC		Accept
		Organization		Reject
		POC Email		
		POC Phone		
9	Describe the specific purpose for the OPDIV use of the third-party Website or application:			Accept
	Have the third-party privacy policies been reviewed			Reject
			Yes	Accept
10	to evaluate any risks and to determine whether the Website or application is appropriate for OPDIV use? Describe alternative means by which the public can		No	Reject
				Accept
11	obtain comparable information or services if they choose not to use the third-party Website or application:			Reject
			Yes	Accept
12	Does the third-party Website or application have appropriate branding to distinguish the OPDIV activities from those of nongovernmental actors?		No	Reject
				Accept
				Reject
13	How does the public navigate to the third party Website or application from the OPDIV?			

13a Please describe how the public navigate to the third- party website or application:

[Redacted]

[Redacted]

[Redacted]
[Redacted]

[Redacted]
[Redacted]
[Redacted]

[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

13b	If the public navigate to the third-party website or application via an external hyperlink, is there an alert to notify the public that they are being directed to a nongovernmental Website?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
14	Has the OPDIV Privacy Policy been updated to describe the use of a third-party Website or application?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
14a	Provide a hyperlink to the OPDIV Privacy Policy:	<input type="text"/>	
15	Is an OPDIV Privacy Notice posted on the third-party Website or application?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
15a	Confirm that the Privacy Notice contains all of the following elements: (i) An explanation that the Website or application is not government-owned or government-operated; (ii) An indication of whether and how the OPDIV will maintain, use, or share PII that becomes available; (iii) An explanation that by using the third-party Website or application to communicate with the OPDIV, individuals may be providing nongovernmental third-parties with access to PII; (iv) A link to the official OPDIV Website; and (v) A link to the OPDIV Privacy Policy	<input type="radio"/> Yes <input type="radio"/> No	
15b	Is the OPDIV's Privacy Notice prominently displayed at all locations on the third-party Website or application where the public might make PII available?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/>
16	Is PII collected by the OPDIV from the third-party Website or application?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
17	Will the third-party Website or application make PII available to the OPDIV?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
18	Describe the PII that will be collected by the OPDIV from the third-party Website or application and/or the PII which the public could make available to the OPDIV through the use of the third-party Website or application and the intended or expected use of the PII:	<input type="text"/>	
19	Describe the type of PII from the third-party Website or application that will be shared, with whom the PII will be shared, and the purpose of the information sharing:	<input type="text"/>	
19a	If PII is shared, how are the risks of sharing PII mitigated?	<input checked="" type="radio"/>	
20	Will the PII from the third-party Website or application be maintained by the OPDIV?	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Accept <input type="radio"/> Reject
20a	If PII will be maintained, indicate how long the PII will be maintained:	<input type="text"/>	
21	Describe how PII that is used or maintained will be secured:	<input checked="" type="radio"/> Accept <input type="radio"/> Reject	



22 What other privacy risks exist and how will they be mitigated?

Accept
 Reject

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

1 Are the responses accurate and complete?

Yes Accept
 No Reject

Reviewer Notes

2 Is the TPWA compliant with all M-10-23 requirements, including appropriate branding and alerts?

Yes Accept
 No Reject

Reviewer Notes

3 Has the OPDIV posted an updated privacy notice on the TPWA and does it contain the five required elements?

Yes Accept
 No Reject

Reviewer Notes

4 Does the PIA clearly identify PII made available and/or collected by the TPWA?

Yes Accept
 No Reject

Reviewer Notes

5 Is the handling of PII appropriate?

Yes Accept
 No Reject

Reviewer Notes

General Comments

OPDIV Senior Official for Privacy Signature

HHS Senior Agency Official for Privacy