

Privacy Impact Assessment Form

v 1.21

Status Form Number Form Date

Question

Answer

1 OPDIV:

ATSDR

2 PIA Unique Identifier:

TBD

2a Name:

APPLETREE Performance Measures (PMs)

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.

Planning

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	APPLETREE will use multiple CDC authorized systems as part of the electronic 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.	<p>The purpose of the data collection is to monitor progress of the APPLETREE program toward program goals and objectives, and for program quality improvement. The APPLETREE program identifies pathways of exposure to hazardous substances at hazardous waste sites and releases; identifies, implements, and coordinates public health interventions to reduce exposures to hazardous substances; and provides training at the state level to promote and achieve the safe siting of child care facilities in the United States.</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 about the specific data elements.)	<p>The type of data the system will collect and maintain is:</p> <ul style="list-style-type: none"> Recipient Contacts (name, work phone, work email) Site information (site name, site type, event venue, street address, city, state, zip code, etc.) Qualitative Performance Metrics (success stories, project accomplishments, progress summaries, future direction narratives, etc.) Quantitative Performance Metrics (proportion of activities completed, proportion of site-specific assessments completed, number of internal/external capacity building opportunities, estimated number of people protected from hazardous exposures, etc.) Education Activities (date, education type, activity descriptions, number trained, aggregate training evaluation data, etc.) Technical Assistance (date, primary contaminant, exposure pathways, assistance summaries, request/response, organizational partners, number of people exposed, number of people assessed, number of people potentially exposed, etc.) Recommendations (recommendation summary, recommendation category, potential health concern, date adopted, types of stakeholders, implementation progress summary, actions taken, etc.) <p>Internal users are authenticated via CDC's active directory and state users are authenticated via user name and password.</p>

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

The type of data the system will collect and maintain is:

- Recipient Contacts (name, work phone, work email)
- Site information (site name, site type, event venue, street address, city, state, zip code, etc.)
- Qualitative Performance Metrics (success stories, project accomplishments, progress summaries, future direction narratives, etc.)
- Quantitative Performance Metrics (proportion of activities completed, proportion of site-specific assessments completed, number of internal/external capacity building opportunities, estimated number of people protected from hazardous exposures, etc.)
- Education Activities (date, education type, activity descriptions, number trained, aggregate training evaluation data, etc.)
- Technical Assistance (date, primary contaminant, exposure pathways, assistance summaries, request/response, organizational partners, number of people exposed, number of people assessed, number of people potentially exposed, etc.)
- Recommendations (recommendation summary, recommendation category, potential health concern, date adopted, types of stakeholders, implementation progress summary, actions taken, etc.)

APPLETREE recipients perform health assessments for environmental exposure at sites. They report Site Information to account for the level of effort expended at each site in a given budget period. This information is directly tied to their performance and success measures. In addition to the standard work products required at sites (Public Health Assessments, Health Consultations, Exposure Investigations, etc.), recipients are often asked to provide Technical Assistance for additional purposes, and report these activities to give ATSDR a full 360 degree understanding of the recipient's effort, performance, and success.

ATSDR uses the recipient contact information to identify the POC who is submitting the Project Managers in case there are any questions about the information they are submitting.

Site information, qualitative/quantitative performance metrics, education activities, and technical assistance are collected from the recipients to evaluate their progress in accomplishing the goals of the program.

Recommendation information is provided to ATSDR by the recipients and is used to track progress towards community adoption of health assessment recommendations.

User name and password is used to authenticate state/local recipients that are required to report data to ATSDR for the APPLETREE program.

The data will not be shared outside CDC.

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

- Yes
- No

<p>15 Indicate the type of PII that the system will collect or maintain.</p>	<table border="0"> <tr> <td><input type="checkbox"/> Social Security Number</td> <td><input type="checkbox"/> Date of Birth</td> </tr> <tr> <td><input checked="" type="checkbox"/> Name</td> <td><input type="checkbox"/> Photographic Identifiers</td> </tr> <tr> <td><input type="checkbox"/> Driver's License Number</td> <td><input type="checkbox"/> Biometric Identifiers</td> </tr> <tr> <td><input type="checkbox"/> Mother's Maiden Name</td> <td><input type="checkbox"/> Vehicle Identifiers</td> </tr> <tr> <td><input checked="" type="checkbox"/> E-Mail Address</td> <td><input type="checkbox"/> Mailing Address</td> </tr> <tr> <td><input checked="" type="checkbox"/> Phone Numbers</td> <td><input type="checkbox"/> Medical Records Number</td> </tr> <tr> <td><input type="checkbox"/> Medical Notes</td> <td><input type="checkbox"/> Financial Account Info</td> </tr> <tr> <td><input type="checkbox"/> Certificates</td> <td><input type="checkbox"/> Legal Documents</td> </tr> <tr> <td><input type="checkbox"/> Education Records</td> <td><input type="checkbox"/> Device Identifiers</td> </tr> <tr> <td><input type="checkbox"/> Military Status</td> <td><input type="checkbox"/> Employment Status</td> </tr> <tr> <td><input type="checkbox"/> Foreign Activities</td> <td><input type="checkbox"/> Passport Number</td> </tr> <tr> <td><input type="checkbox"/> Taxpayer ID</td> <td><input type="text" value="Other..."/></td> </tr> <tr> <td><input type="text" value="username and password"/></td> <td><input type="text" value="Other..."/></td> </tr> <tr> <td><input type="text" value="Other..."/></td> <td><input type="text" value="Other..."/></td> </tr> </table>	<input type="checkbox"/> Social Security Number	<input type="checkbox"/> Date of Birth	<input checked="" 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 checked="" type="checkbox"/> E-Mail Address	<input type="checkbox"/> Mailing Address	<input checked="" 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="Other..."/>	<input type="text" value="username and password"/>	<input type="text" value="Other..."/>	<input type="text" value="Other..."/>	<input type="text" value="Other..."/>
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<input checked="" type="checkbox"/> Phone Numbers	<input type="checkbox"/> Medical Records Number																												
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<p>16 Indicate the categories of individuals about whom PII is collected, maintained or shared.</p>	<table border="0"> <tr> <td><input type="checkbox"/> Employees</td> </tr> <tr> <td><input type="checkbox"/> Public Citizens</td> </tr> <tr> <td><input checked="" type="checkbox"/> Business Partners/Contacts (Federal, state, local agencies)</td> </tr> <tr> <td><input type="checkbox"/> Vendors/Suppliers/Contractors</td> </tr> <tr> <td><input type="checkbox"/> Patients</td> </tr> <tr> <td>Other <input type="text"/></td> </tr> </table>	<input type="checkbox"/> Employees	<input 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"/>																						
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<p>17 How many individuals' PII is in the system?</p>	<input type="text" value="<100"/>																												
<p>18 For what primary purpose is the PII used?</p>	<input type="text" value="PII is primarily used to capture the name and contact information of the recipient point of contacts who are submitting the forms."/>																												
<p>19 Describe the secondary uses for which the PII will be used (e.g. testing, training or research)</p>	<input type="text" value="Not applicable"/>																												
<p>20 Describe the function of the SSN.</p>	<input type="text" value="Not applicable"/>																												
<p>20a Cite the legal authority to use the SSN.</p>	<input type="text" value="Not applicable"/>																												
<p>21 Identify legal authorities governing information use and disclosure specific to the system and program.</p>	<input type="text" value="Sections 104(i)(15) of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) of 1980, as amended by the Superfund Amendments and Reauthorization Act (SARA) of 1986 [42 U.S.C. 9604(i)(15)]"/>																												
<p>22 Are records on the system retrieved by one or more PII data elements?</p>	<p style="text-align: right;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p>																												

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.

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.	Notice is given at the APPLETREE kick-off meeting where recipient point of contacts (POCs) will be asked to provide their contact information.
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.	Recipients who wish to opt out may choose not to deliver the their contact information in the information collection forms in "APPLETREE Performance Measures" OMB Control No. 0923-0057, Expiration Date 07/31/2020.
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.	ATSDR will contact individuals whose PII is in the system via email, telephone, and/or mail when major changes to the occur that affect their PII.
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 that have a concern that their PII has been inappropriately used, obtained, or disclosed, or that their PII is inaccurate should contact the cooperative agreement program manager using the information provided to them in the kick off meeting for this project.</p> <p>The individual may be directed to contact the project data manager to identify the record and specify the information being contested, the corrective action sought, and the reasons for requesting the correction, along with supporting information to show how the record is inaccurate, incomplete, untimely, or irrelevant. If an incident has occurred, the program or data manager will report the potential incident to the CDC Security Incident Response Team and the Privacy Officer.</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.	The PII in the system will be reviewed annually to ensure the data's integrity, availability, accuracy and relevancy during meetings with recipients. PII will be reviewed, updated or deleted at this time as necessary.
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 checked="" type="checkbox"/> Administrators <input type="checkbox"/> Developers <input type="checkbox"/> Contractors <input type="checkbox"/> Others Users will use the PII to contact POCs at the state and local level about this Administrators may use the PII to troubleshoot issues with the systems
32	Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	The project manager will determine which users should have access to the PII. It will be on a need to know basis.
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.	Any user with access to PII will have access to all of the PII in the system.

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.

Study staff will all go through annual CDC security awareness training.

35 Describe training system users receive (above and beyond general security and privacy awareness training).

No additional training will be provided.

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.

The process and guidelines in place with regard to the retention and destruction of PII for this activity will be governed by ATSDR records control schedule 1-5 "Copies of Extramural Records (Contracts, Cooperative Agreements, Grants, MOUs, and IAGs) That Are Needed for Cost Recovery or Site-Specific Activities" (<http://intranet.cdc.gov/ocoo/docs/services/ATSDR-retention-schedules.docx>).

Records will be maintained in an inactive file after the project has ended, transferred to a federal records center 1 year after cutoff, and destroyed when 40-years old, or when all cost recovery activity has ended, whichever comes first.

38 Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.

PII will be secured using the following administrative controls: Rules of Behavior, non-disclosure agreements, and data use agreements.

PII will be secured using the following technical controls: whole disk encryption, e-Auth Level 1, smart cards, and access control lists in multiple authorized CDC IT systems.

PII will be secured using the following physical controls: controlled physical access, guards, key card access, and locked rooms.

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 questions on the PIA answered correctly, accurately, and completely?	<input type="radio"/> Yes <input type="radio"/> No
	Reviewer Notes	<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
	Reviewer Notes	<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

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