

Privacy Impact Assessment Form

v 1.47.4

Status

Form Number

Form Date

Question

Answer

1 OPDIV:

2 PIA Unique Identifier:

2a Name:

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.

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

11 Describe the purpose of the system.	To estimate Healthcare Associate Illnesses (HAI) prevalence among inpatients of acute healthcare facilities.
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.)	Data collected also includes information on anti-microbial use in hospitals, and reasons for use. Demographic information included is as follows: Age, Race, Ethnicity, Gender, State, infection types, and antibiotic use. No system user data is
13 Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.	The system is a data collection administered in selected acute healthcare facilities within the 10 Emerging Infection Program (EIP) sites (CA, CO, CT, GA, MD, MN, NM, NY, OR, & TN) on the
14 Does the system collect, maintain, use or share PII?	<input type="radio"/> Yes <input checked="" type="radio"/> No

General Comments	
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OPDIV Senior Official for Privacy Signature	
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