

Privacy Impact Assessment Form

v 1.21

Status Form Number Form Date

Question

Answer

1 OPDIV:

CDC

2 PIA Unique Identifier:

TBD

2a Name:

Public Health Law Fellowship Program Information Collection

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.

Operations and Maintenance

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	The evaluations will be administered through Redcap, a CDC system with a moderate-level security authorization.
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 purpose of the information collection is to evaluate the Public Health Law Program (PHLP) fellowship throughout its life cycle. This PHLP fellowship program ("Fellowship") supports CDC's broad mission to build and develop the nation's public health workforce and increase diversity in the workforce.
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 types of information to be collected, maintained, and shared include a wide array of data related to the evaluation of the Fellowship. The types of information collected on the fellows include: sname, email address, self-assessed knowledge of public health law; college or university; voluntary demographic data (race, gender, disability identification); satisfaction level with the fellowship program; and post-graduation employment/plans. Information will also be collected from additional interested parties such as host institutions about the benefits and challenges of working with fellows. Outreach efforts for fellows and hosts will also be evaluated.
13	Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.	<p>The purpose of the information collection is to evaluate the Public Health Law Program (PHLP) fellowship throughout its life cycle. This PHLP fellowship program ("Fellowship") supports CDC's broad mission to build and develop the nation's public health workforce.</p> <p>In order to understand the value of the fellowship, both to the individual fellows and the the broader field of the public health workforce, we need to ask fellows and other interested parties about the knowledge the fellows gained throughout the program. We need to know the fellows' employment plans after graduation to make sure the fellowship is contributing to the public health workforce. Names and email addresses will be collected.</p> <p>Our funding requires us to support equity and build a diverse workforce. Therefore, we need to measure our outreach efforts and ask fellows some demographic questions about their race, gender, and disability status to identify any possible differences in experience and make sure we have attracted diverse candidates.</p> <p>We intend to retain identifiable information temporarily, and deidentified information permanently.</p>
14	Does the system collect, maintain, use or share PII?	<input checked="" type="radio"/> Yes <input type="radio"/> 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 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 checked="" 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="Race"/></td> </tr> <tr> <td><input type="text" value="Occupation information"/></td> <td><input type="text" value="Gender"/></td> </tr> <tr> <td><input type="text" value=""/></td> <td><input type="text" value="Disability status"/></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 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 checked="" type="checkbox"/> Employment Status	<input type="checkbox"/> Foreign Activities	<input type="checkbox"/> Passport Number	<input type="checkbox"/> Taxpayer ID	<input type="text" value="Race"/>	<input type="text" value="Occupation information"/>	<input type="text" value="Gender"/>	<input type="text" value=""/>	<input type="text" value="Disability status"/>
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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 checked="" 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" value="Fellows who have matriculated in the Public Health Law Fellowship program, preceptors of fellows in the"/></td> </tr> </table>	<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" value="Fellows who have matriculated in the Public Health Law Fellowship program, preceptors of fellows in the"/>																						
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<p>17 How many individuals' PII is in the system?</p>	<input type="text" value="100-499"/>																												
<p>18 For what primary purpose is the PII used?</p>	<input type="text" value="The primary purpose for collecting PII is to evaluate the Fellowship to ensure equitable and robust experiences for fellows and hosts"/>																												
<p>19 Describe the secondary uses for which the PII will be used (e.g. testing, training or research)</p>	<input type="text" value="The secondary purpose for collecting PII is to evaluate outreach efforts and ensure equitable and diverse recruitment of fellows and hosts"/>																												
<p>20 Describe the function of the SSN.</p>	<input type="text" value="N/A"/>																												
<p>20a Cite the legal authority to use the SSN.</p>	<input type="text" value="N/A"/>																												
<p>21 Identify legal authorities governing information use and disclosure specific to the system and program.</p>	<input type="text" value="5 USC 301, Departmental regulations"/>																												
<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.

The OMB information collection approval for this information collection is still in process.

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

<p>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>	<p>Survey instructions will note that some questions may, when combined, lead to identification of individuals in limited circumstances. Instructions will explain that all questions are voluntary and that these questions are asked to evaluate the fellowship. The instructions will also alert participants that they may choose not to answer any question and explain that PII will not be shared with outside entities; however, aggregated responses that are non-identifiable may be shared.</p>	
<p>26 Is the submission of PII by individuals voluntary or mandatory?</p>	<p><input checked="" type="radio"/> Voluntary <input type="radio"/> Mandatory</p>	
<p>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.</p>	<p>The collection is best characterized as "opt-in," so participants will be asked to provide information but are never required to do so. All PII questions contain a "prefer not to respond" answer choice. Additionally, no questions are required.</p>	
<p>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.</p>	<p>Individuals will be emailed the first survey (welcome or pre-survey) via a non-public web link. These email addresses are not part of data collection and are not associated with individual responses. However, the Fellowship will already have these email addresses as part of administrating the fellowship and can provide change updates and request consent via these email addresses. Consent cannot be obtained from individuals who no longer use the email addresses we have on file.</p>	
<p>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>	<p>Collected information would only identifiable in limited circumstances. If a respondent believes they have responded to questions so uniquely as to make that information identifiable, they can request the information be removed. If we are able to identify which record belongs to that respondent, we will remove the record. Individuals with concerns that their PII has been inappropriately obtained, used, or disclosed, or that the PII is inaccurate, can address their concerns to the Evaluation Lead of the Public Health Law Fellowship, Organization: Public Health Law Program, CSTLTS, CDC.</p>	
<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.</p>	<p>Fellowship leadership/evaluation team will review data collection and retention at the start of each cohort. Participants will be provided with Fellowship contact information to allow them to inform the Fellowship if their contact information changes</p>	
<p>31 Identify who will have access to the PII in the system and the reason why they require access.</p>	<p><input checked="" type="checkbox"/> Users <input checked="" type="checkbox"/> Administrators <input type="checkbox"/> Developers <input type="checkbox"/> Contractors <input type="checkbox"/> Others</p>	<p>Fellowship leadership/evaluation team Fellowship leadership/evaluation team </p>

32 Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	REDCap, which is the system where the data will be stored, permits user groups that allow administrators to set permissions for viewing PII. Only fellowship leadership/evaluation team will have permissions to view PII.	
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.	REDCap permits user groups that allow administrators to set permissions for viewing PII. When adding new users to REDCap, program leadership/evaluation team will decide prior to granting access the correct level of permissions for that user and will grant access to PII only when necessary. Only program leadership/evaluation team will have permissions to view PII.	
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.	All personnel with access to PII will be coached on their responsibilities for protecting the information collected and/or maintained.	
35 Describe training system users receive (above and beyond general security and privacy awareness training).	All personnel with access to PII will be coached in granting or restricting REDCap access, permissions, and related data functions.	
36 Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
37 Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific records retention schedules.	<p>Records may be transferred to a Federal Records Center for storage when no longer needed for evaluation or analysis. Disposal methods include the paper recycling process, burning or shredding hard copy records, and erasing computer files.</p> <p>The records retention schedule is CDC 3-6, Instructional and Problem-Solving Records, (Training Program Records) (GRS 1, Item29a1) Documents created to identify and analyze training problems such as principles and techniques of problem analysis, system design, and evaluation of training needs. Authorized Disposition: Destroy when 5 years old or 5 years after completion of a specific training program.</p>	
38 Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.	<p>Administrative: All users with access to PII will be coached on data privacy and appropriate access prior to being granted user access to PII data. Only designated personnel will be granted access.</p> <p>Technical: PII will be collected behind CDC's Secure Access Management System (SAMS) server(s) in REDCap Main. No users aside from designated fellowship leadership/evaluators will be granted access to the data records. All data collection involving PII will be collected exclusively online via SAMS in REDCap.</p> <p>Physical: All PII will be electronically collected. There are no physical controls because no PII will be generated in a physical form.</p>	

Reviewer Questions		Answer
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 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 Questions		Answer
<i>Reviewer Notes</i>	<input type="text"/>	
11	Does the PIA demonstrate compliance with all Web privacy requirements?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<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
<i>Reviewer Notes</i>	<input type="text"/>	
General Comments	<input type="text"/>	
OPDIV Senior Official for Privacy Signature	<input type="text"/>	HHS Senior Agency Official for Privacy <input type="text"/>