

Privacy Impact Assessment Form

v 1.21

Status Form Number Form Date

Question

Answer

1 OPDIV:

CDC

2 PIA Unique Identifier:

TBD

2a Name:

Knowledge Attitudes and Practices (KAPs)

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	Not applicable.
9	Indicate the following reason(s) for updating this PIA. Choose from the following options.	<input 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 OMB submission
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.	Knowledge Attitudes and Practices (KAPs) project is formative research focus group project that will be conducted among Hispanic/Latina women of reproductive age to examine folic acid and fortified food awareness, food and supplement use practices, as well as messaging and channels to reach Hispanic/Latina women. The result of this project will inform future intervention activities to prevent neural tube defects among Hispanic/Latina women of reproductive age.
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 KAPs data collection will include information from Hispanic/Latina women of reproductive age including the following data elements; first and last name, email address, race, ethnicity, country of origin and phone number (for the sole purpose of screening potential participants and contacting focus group respondents). Respondents will be contacted via text/phone, or email (whichever method they prefer) to complete an online screener, informed consent, and receive reminders with information on their focus group location/date/time.</p> <p>A link to the online screener and online consent form will be shared with each respondent. The screener will also inform participants of the nature of the study and the voluntary nature of participation. Study data will be collected and maintained until data collection for the project ends.</p> <p>Non-direct contractor is administering the project using a UserID and password for privilege and/or standard users to access the network prior to being able to access the KAPs forms. Staff information (name, email address, and phone number) to be used to issue their user credentials (username and password) for system authentication purposes.</p>

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

KAPs is a focus group study with Hispanic/Latina women of reproductive age to understand their folic acid knowledge and use. Temporary data will be collected by a contractor and will only be retained until the end of the contract, after disaggregating and summarizing the results of the study for CDC.

PII will be collected from the Hispanic/Latina women using an online platform (i.e., Qualtrics) that contains a screening form for potential participants of either an in-person or virtual focus group. The screening form will collect the following: first name, last name, email address, ethnicity, race, country of origin and phone number (for the sole purpose of contacting respondents). In addition, an informed consent form will be provided to those who have agreed to participate in a focus group and will be administered as either a paper-based or digital form (i.e., using Microsoft Forms). The consent form will collect first name, last name, and email address (for the sole purpose of confirming those individuals who agree to participate in the focus group and to send an incentive upon completing the focus group).

A link to the online screener and online consent form will be shared with each respondent. Study data will be collected and maintained until data collection for the project ends. Non-direct contractor is administering the project using a UserID and password for privilege and/or standard users to access the network prior to being able to access the KAPs forms. Staff information (name, email address, and phone number) to be used to issue their user credentials (username and password) for system authentication purposes.

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

Yes
 No

15 Indicate the type of PII that the system will collect or maintain.

<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="Country of origin"/>
<input type="text" value="Ethnicity"/>	<input type="text" value="Other..."/>
<input type="text" value="Race"/>	<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 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"/>
18	For what primary purpose is the PII used? <input type="text" value="PII will be used to screen people for eligibility to join a focus group and to contact all eligible focus group participants. First and last names, email addresses, ethnicity, race, country of origin, and phone numbers will be collected when screening potential participants for focus group eligibility. Subsequently, those who are eligible to participate in a focus group will be contacted using their email address and/or phone number to follow up with participants in an effort to invite them to be scheduled for a focus group. Email addresses and phone numbers will also be used to send reminder/follow-up emails about when to attend the focus group and acquire their name (signature) on a consent form before participating in the focus group. Upon completing a focus group, email addresses will be used to send an electronic gift card."/>
19	Describe the secondary uses for which the PII will be used (e.g. testing, training or research) <input type="text" value="None"/>
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 (42="" 241)"="" and="" investigation,\"="" research="" type="text" u.s.c.="" value="Public Health Service Act, Section 301, \"/>
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. Published: <input type="text" value="09-20-0136, Epidemiologic Studies and Surveilla"/> Published: <input type="text"/> Published: <input type="text"/> <input type="checkbox"/> 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.

Approval pending

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)).

No agreement is in place because the information will not be shared with anyone outside of the project staff from the contract agency.

24c Describe the procedures for accounting for disclosures

CDC does not plan to disclose a record outside for any reason other than the Freedom of Information Act (FOIA). CDC will not have access to PII that the contractor will collect. All data will be shared in aggregate form.

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.

Participants will be provided through an informed consent form (paper and online) and a screener (paper and online). These documents will include a Privacy Act Statement disclosing that personal information will be collected.

26 Is the submission of PII by individuals voluntary or mandatory?

Voluntary

Mandatory

<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>Individuals will be given the opportunity to opt-in to the collection by signing an informed consent form and may choose to not answer a question during the focus group. The opt-out process is not participating.</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>No major changes are expected to the online data collection. The online data collection forms will only be used to screen individuals for eligibility to participate in a focus group and obtain consent from those who are confirmed participants. There will not be ongoing use of the PII-related data collected.</p> <p>Alternatively, note that CDC publishes project reporting requirements and announces major changes in Federal Register Notices.</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>Since all PII will be collected and handled by the entity, individuals will have access to a contact person, email address and phone number with the project to handle concerns or answer questions. Participants may choose to call 202-794-8199 and reference the KAPs Women's Health Study if there are any concerns . Any concerns will be considered, investigated, and resolved through processes that are in place with the contract agency.</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>The information collected will be gathered at the inception for screening, with only a subset of information collected again on the informed consent form (i.e., first and last names, email address). Participants who are screened and deemed eligible (using demographic information collected) to join a focus group, will then be contacted using their email addresses and phone numbers to schedule a time to participate in a focus group. Scheduled participants will also receive email and text reminders leading up to their scheduled focus group date. Upon completing a focus group, email addresses will be used to mail an electronic gift card to all participants. No additional processes will be in place for periodic review. Once PII is used for its intended purpose (i.e., screen and contact confirmed participants) and participants are successfully reached to join the study, no additional reviews of PII will be needed. PII will be destroyed by the contractor at the end of the contract on September 28, 2024.</p>	
<p>31 Identify who will have access to the PII in the system and the reason why they require access.</p>	<p><input type="checkbox"/> Users</p> <p><input type="checkbox"/> Administrators</p> <p><input type="checkbox"/> Developers</p> <p><input checked="" type="checkbox"/> Contractors</p> <p><input type="checkbox"/> Others</p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Research staff and analysts will use the data to follow up with participants</p> <p><input type="text"/></p>

<p>32 Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.</p>	<p>The project director and program manager is responsible for ensuring that personnel have controlled access only to what is relevant to their specific work on the project. The project director oversees the personnel supporting the data collection, assigns roles and responsibilities, and routinely reviews and assesses personnel's need-to-know status. The program manager will ensure specific access rights are implemented.</p>
<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>Only staff who will be involved in collecting screening forms and informed consent will have access to the online platforms that are used to collect PII. This includes the project manager and project director at the contracting agency.</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>The contractors that process these data files complete training annually (e.g., 2023 Cybersecurity Training) in standards and procedures to maintain the security and confidentiality of PII. Audits are conducted throughout the year to ensure adherence to these standards.</p>
<p>35 Describe training system users receive (above and beyond general security and privacy awareness training).</p>	<p>None</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>Contractors (i.e., the entity) will transfer de-identified records to CDC before the end of the award through their password protected SharePoint site. Contractors will destroy PII at the end of the contract on September 28, 2024. CDC will not have access to the systems that the entity will be using and is therefore limited in its ability to validate the destruction of the PII by the contractor. Within CDC, any program records that summarize the results of this data collection will be retained, stored, and disposed of in accordance with CDC's records control schedule for Scientific and Research Project Records, N1-442-09-01.</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>PII data will be encrypted and stored on the contractor's secured server.</p> <ul style="list-style-type: none"> • Administrative Controls: Administrative controls include a security plan, contingency plan, file back-up, least privilege, and training to ensure the necessary protections for the PII are in place • Technical Controls: PII data is encrypted and stored in a secure database. Technical controls are in place to manage user identity, identity proofing, authentication, and authorization. • Physical Controls: Computer facilities at all sites have restricted access and are protected from potential fire and water damage.

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.	
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"/>