

Privacy Impact Assessment Form

v 1.21

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

8c	Briefly explain why security authorization is not required	N/A Because this not a system.										
9	Indicate the following reason(s) for updating this PIA. Choose from the following options.	<table border="0"><tr><td><input checked="" type="checkbox"/> PIA Validation (PIA Refresh/Annual Review)</td><td><input type="checkbox"/> Significant System Management Change</td></tr><tr><td><input type="checkbox"/> Anonymous to Non-Anonymous</td><td><input type="checkbox"/> Alteration in Character of Data</td></tr><tr><td><input type="checkbox"/> New Public Access</td><td><input type="checkbox"/> New Interagency Uses</td></tr><tr><td><input type="checkbox"/> Internal Flow or Collection</td><td><input type="checkbox"/> Conversion</td></tr><tr><td><input type="checkbox"/> Commercial Sources</td><td></td></tr></table> <input type="text" value="Other..."/>	<input checked="" 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	
<input checked="" 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												
10	Describe in further detail any changes to the system that have occurred since the last PIA.	This is a renewal request of currently approved data collection instruments.										
11	Describe the purpose of the system.	The purpose of this information collection is to evaluate how well the National Network of Sexually Transmitted Disease Clinical Prevention Training Centers' (NNPTC) training and technical assistance reaches the Division of Sexually Transmitted Diseases' (DSTD) intended audiences and impacts the knowledge, skills, and practice patterns of providers of Sexually Transmitted Disease (STD) screening, diagnosis, treatment over time. The evaluation will measure trainee satisfaction with NNPTC services and changes in capacity, knowledge, skills, practice patterns and self-efficacy as a result of NNPTC training and technical assistance. This is a renewal request of currently approved instruments. The resulting data will be used to monitor and improve the NNPTC's program delivery through assessment of trainee satisfaction and short-term and long-term outcomes of the DSTD's program.										

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 will be collected online using surveys with closed- and open-ended questions or in-person as necessary at training and technical assistance events. The information will be collected from healthcare professionals who attend training or technical assistance events delivered by the NNPTC. The NNPTC "Health Professional Application for Training" (NNPTC HPAT) is the only instrument that collects categories of information in identifiable format from individual respondents such as: name, organization address, work phone numbers, work email address, organization name, gender, race and ethnicity, and sexual orientation. These identifiable NNPTC HPAT data elements are needed to send information about the training or technical assistance for which they have registered, send electronic invitations to complete evaluation instruments, and identify county of workplace and type of employment setting to analyze reach.

A unique identifier will be generated for all data collection instruments to enable linking data from multiple data collection tools. The identifiable information collected by the National Evaluation Center (NEC) is stored behind firewalls at the NEC in password protected files and are available only to authorized users of the NEC, not CDC.

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

Data gathered under this information collection activity includes electronic (web-based) surveys to be completed by healthcare professionals who attend training or technical assistance events delivered by the NNPTC.

The NNPTC "Health Professional Application for Training" (NNPTC HPAT) is the only instrument that collects categories of information in identifiable format from individual respondents such as: name, organization address, work phone numbers, work email address, organization name, gender, race and ethnicity, and sexual orientation. These identifiable NNPTC HPAT data elements are needed to send information about the training or technical assistance for which they have registered, send electronic invitations to complete evaluation instruments, and identify county of workplace and type of employment setting to analyze reach.

Final datasets will be delivered to CDC in de-identified format. Additionally, data files will be delivered using a secured CDC-approved file transfer mechanism. When reporting data from this study, only aggregate data will be used to report study results.

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="gender"/></td> </tr> <tr> <td><input type="text" value="Business Contact Information"/></td> <td><input type="text" value="sexual orientation"/></td> </tr> <tr> <td><input type="text" value="Race & Ethnicity"/></td> <td><input type="text" value="county of workplace"/></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="gender"/>	<input type="text" value="Business Contact Information"/>	<input type="text" value="sexual orientation"/>	<input type="text" value="Race & Ethnicity"/>	<input type="text" value="county of workplace"/>
<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="gender"/>																												
<input type="text" value="Business Contact Information"/>	<input type="text" value="sexual orientation"/>																												
<input type="text" value="Race & Ethnicity"/>	<input type="text" value="county of workplace"/>																												
<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"/>																						
<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"/>																													
<p>17 How many individuals' PII is in the system?</p>	<input type="text" value="10,000-49,999"/>																												
<p>18 For what primary purpose is the PII used?</p>	<p>Business related contact data elements are needed to send information about the training or technical assistance for which participant have registered to send electronic invitations to complete evaluation instruments, and identify county of workplace and type of employment setting to analyze reach.</p> <p>The NNPTC HPAT data transmitted to CDC will include no identifying information.</p>																												
<p>19 Describe the secondary uses for which the PII will be used (e.g. testing, training or research)</p>	<p>Data on race and ethnicity and sexual orientation are collected on the NNPTC HPAT because STDs disproportionately impact African Americans and Latino/as, and Men who have Sex with Men (MSM). As such, it is important to make sure the NNPTC is training diverse providers who work with diverse populations.</p>																												
<p>20 Describe the function of the SSN.</p>	<input type="text" value="N/A No social security numbers are being collected."/>																												
<p>20a Cite the legal authority to use the SSN.</p>	<input type="text" value="N/A"/>																												

21 Identify **legal authorities** governing information use and disclosure specific to the system and program.

Public Health Service Act, Section 301, "Research and Investigation," (42 U.S.C. 241); and Sections 304, 306 and 308(d) which discuss authority to maintain data and provide assurances of confidentiality for health research and related activities (42 U.S.C. 242 b, k, and m(d)).

22 Are records on the system retrieved by one or more PII data elements? Yes 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:

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

<p>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)).</p>		
<p>24c Describe the procedures for accounting for disclosures</p>	<p>NA</p>	
<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>Training participants are provided opportunities to review the registration form and surveys prior to completion. The instruments include guided prompts to only answer questions of their choice.</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>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>Training participants have the option to not answer any of the post-training survey questions. Registration information is required prior to attending trainings and receiving credit.</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>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>The identifiable data are collected to send information about the training or technical assistance for which participants have registered, send electronic invitations to complete evaluation instruments, and identify county of workplace and type of employment setting to analyze reach. There will be no changes in use to data already collected, any prospective changes will be communicated prior to data collection and prospective individuals will be notified in advance.</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>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>Individuals (training participants) with concerns can contact the NEC administrators at: Denver Prevention Training Center/Public Health Institute at Denver Health Phone: 303-704-3837 Phone: 303-602-3638</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>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>NEC will develop and update a data management plan that includes how they will collect, store, and destroy non-sensitive contact information.</p>	

<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 type="checkbox"/> Administrators <input type="checkbox"/> Developers <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Others	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text" value="To contact willing participants for scheduling data collection"/> <input type="text"/>
<p>32 Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.</p>	<p>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>Only NEC administrators will have access to PII, as needed.</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>CDC will not receive or maintain any PII. From the CDC perspective this project does not collect PII as no PII will ever be accessible to CDC staff.</p> <p>Access to PII is restricted solely to the NEC administrators</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>All team members who have CDC network access will complete CDC's annual security awareness training.</p>	
<p>35 Describe training system users receive (above and beyond general security and privacy awareness training).</p>	<p>All team members have completed CDC and Collaborative Institutional Training Initiative (CITI) ethics trainings.</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>The NEC (NPTC3) is required to maintain all information in accordance with Executive Order 13556 -- Controlled Unclassified Information, National Archives and Records Administration (NARA) records retention policies and schedules and HHS policies and are informed that they are not to dispose of any records unless authorized by HHS.</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>Technical Controls: PII collected by the National Evaluation Center (NEC) is stored behind firewalls at the NEC in password protected files</p> <p>Physical Controls: PII collected are available only to authorized users of the NEC. As noted above, no PII is provided to the DSTDP.</p> <p>Administrative Controls: The business identifying information (i.e., respondents' name, business email address, business address, and business phone number) will be maintained in a secure file that is separate from the response data and only NEC project staff will have access to it.</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"/>