## Privacy Impact Assessment (PIA): HRSA - HERD - QTR2 - 2022 - HRSA800630

Signed Date: 5/25/2022

## Acronyms

**ATO - Authorization to Operate** 

CAC - Common Access Card

FISMA - Federal Information Security Management Act

**ISA - Information Sharing Agreement** 

**HHS - Department of Health and Human Services** 

**MOU - Memorandum of Understanding** 

NARA - National Archives and Record Administration

**OMB - Office of Management and Budget** 

PIA - Privacy Impact Assessment

PII - Personally Identifiable Information

**POC - Point of Contact** 

PTA - Privacy Threshold Assessment

**SORN - System of Records Notice** 

SSN - Social Security Number

**URL - Uniform Resource Locator** 

General Information			
		PIA ID:	1444463
PIA Name:	HRSA - HERD - QTR2 - 2022 - HRSA800630	Title:	HRSA - HRSA Ethics Reporting Database
OpDiv:	HRSA		
Legacy PIA ID:			

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	PIA	
PTA - 1A:	Identify the Enterprise Performance Lifecycle Phase of the system	Operations and Maintenance
PTA - 1B:	Is this a FISMA-Reportable system?	Yes
PTA - 2:	Does the system include a website or online application?	No
PTA - 2A:	Are any of the URLs listed accessible by the general public (to include publicly accessible log in and internet websites/online applications)?	

## **URL Details**

Type of URL	List Of URL		
No Records Found			
PTA - 3:	Is the system or electronic collection, agency or contractor operated?	Agency	
PTA - 3A:	Is the data contained in the system owned by the agency or contractor?	Agency	
PTA - 5:	Does the system have or is it covered by a Security Authorization to Operate (ATO)?	Yes	
PTA - 5A:	If yes, Date of Authorization	6/7/2019	
PTA - 5B:	If no, Planned Date of ATO		
PTA - 8:	Please give a brief overview and purpose of the system by describing what the functions of the system are and how the system carries out those functions?	The Health Resources and Services Administration Ethics Reporting Database (HERD) houses Ethics Program data and	

and a shared drive. The database allows for storage of ethics forms, reports, and advice all in one place and allows HRSA Ethics Program staff to run reports on employee compliance with HRSA Ethics Program requirements. The reports also provide information on HRSA's compliance with the Departmental Ethics Program requirements. The Ethics Program is a preventative program that requires certain agency employees to file financial disclosure and outside activity reports, as well as request prior approval for certain types of outside activities. The forms used for these purposes, as well as correspondence regarding them and ethics rules/regulations inquiries, are stored in this database. Many of the program requirements have regulatory deadlines and employee and staff actions must be monitored to ensure those deadlines are being met. The reporting capabilities of this system allow for that monitoring activity. List and/or describe all the types of information that are collected The database collects and stores employee PTA - 9: (into), maintained, and/or shared in the system regardless of ethics data, such as dates of interaction with whether that information is PII and how long that information is program staff and when and how employees met stored. compliance requirements of the HRSA Ethics Program. The system houses documents submitted by employees for review/approval, as well as advice provided by the HRSA Ethics Program staff to agency employees. Forms and reports stored in the system or with links in the system to them include the (Office of Government Ethics) OGE Form 278 Public Financial Disclosure Report, 450 Confidential Financial Disclosure Report, HHS 520 Request for Approval of Outside Activity, HHS 521 Annual Report of Outside Activity and 18 USC 208(b)(3) conflict of interest waivers and recusals notifications. These documents collect employee information including name; position; address; phone number; e-mail; supervisor name and contact information; salary and grade information; descriptions of financial holdings of employee, spouse, and dependent children; sources of income; outside financial relationships; other outside relationships with non-Federal entities and individuals; and advice based on ethics statutes and regulations that have been provided to employees by HRSA Ethics staff. Are user credentials used to access the system? PTA -9A: Yes Please identify the type of user credentials used to access the PTA - 9B: **HHS User Credentials** system. HHS/OpDiv PIV Card Describe why all types of information is collected (into), maintained, The system is a database, searchable by HRSA PTA - 10: and/or shared with another system. This description should specify Ethics Program staff. It houses all HRSA Ethics what information is collected about each category of individual Program data and documents relative to HRSA

documents that have been housed in Excel logs

		employees and their compliance with the agency ethics program. The system has reporting capabilities for ethics program compliance monitoring. Forms and reports stored in the system or with links in the system to them include the OGE Form 278 Public Financial Disclosure Report, 450 Confidential Financial Disclosure Report, HHS 520 Request for Approval of Outside Activity, HHS 521 Annual Report of Outside Activity and 18 USC 208(b)(3) conflict of interest waivers and recusals notifications. These documents collect employee information including name; position; address; phone number; e-mail; supervisor name and contact information; salary and grade information; descriptions of financial holdings of employee, spouse, and dependent children; sources of income; outside financial relationships; other outside relationships with non-Federal entities and individuals; and advice based on ethics statutes and regulations that have been provided to employees by HRSA Ethics staff. The documents stored in the system are maintained as individual ethics folders for each HRSA employee. Most of the financial disclosure reports are stored in systems maintained by the HHS Office of General Counsel and the Office of Government Ethics. The HERD maintains links to those other systems so the HRSA Ethics staff can quickly retrieve the ethics forms in those system while working all within the HERD. The HERD collects data for those systems for compliance reporting purposes. Agency employee ethics records are required to be maintained for six years before being destroyed. HERD also purges documents that are no longer required to be maintained by the (National Archives and Records Administration) NARA records schedule governing Executive Branch Ethics records.
PTA - 10A:	Are records in the system retrieved by one or more PII data elements?	No
PTA - 10B:	Please specify which PII data elements are used.	
PTA - 11:	Does the system collect, maintain, use or share PII?	Yes
	PIA	
PIA - 1:	Indicate the type of PII that the system will collect or maintain	Name
		E-Mail Address
		Phone numbers
		Foreign Activities
		Mailing Address
		Financial Account Info
		Legal Documents
		Employment Status
PIA - 2:	Indicate the categories of individuals about whom PII is collected, maintained or shared	Employees/ HHS Direct Contractors
PIA - 3:	Indicate the approximate number of individuals whose PII is	

PIA - 4:	For what primary purpose is the PII used?	Primarily, the PII is being used for employee identification, ethics analysis, filing compliance, and data collection
PIA - 5:	Describe any secondary uses for which the PII will be used (e.g., testing, training or research)	Secondarily, the PII will not be used for training and research purposes.
PIA - 7:	Identify legal authorities, governing information use and disclosure specific to the system and program	The legal authority governing information use and disclosure specific to the system and program is 5 CFR 2638: Office of Government Ethics and Executive Agency Ethics Program Responsibilities.
PIA - 8:	Provide the number, title, and URL of the Privacy Act System of Records Notice (SORN) that is being used to cover the system or indicate whether a new or revised SORN is in development.	OGE/GOVT-1 - Executive Branch Personnel Public Financial Disclosure Reports and Other Name-Retrieved Ethics Program Records.
		OGE/GOVT-2 - Executive Branch Confidential Financial Disclosure Reports
PIA - 9:	Identify the sources of PII in the system	Directly from an individual about whom the information pertains
		In-person
		Hard Copy Mail/Fax
		Phone
		Email
		Online
		Other
		Government Sources
		Within the OPDIV
		Other Federal Entities
		Non-Government Sources
		Members of the Public
PIA - 9A:	Identify the OMB information collection approval number or explain why it is not applicable.	OMB No. 3209-0006
PIA - 9B:	Identify the OMB information collection expiration date.	11/30/2021
PIA - 10:	Is the PII shared with other organizations outside the system's Operating Division?	Yes
PIA - 10A:	Identify with whom the PII is shared or disclosed and for what purpose	Within HHS
PIA - 10A (Justification):	Explain why (and the purpose) PII is shared with each entity or individual.	The PII is shared and disclosed with the Office of General Counsel (OGC), for compliance and auditing purposes; with the Office of the Inspector General (OIG), for potential investigations; with the Health Resources and Services Administration (HRSA) Office of Human Resources, for on-boarding pre - clearance purposes and for possible administrative actions due to potential violations of ethics rules; and with the Ethics Program Operating Division (OPDIV) when an employee is in service at that OPDIV.
PIA - 10B:	List any agreements in place that authorizes the information	No PII information is being shared outside of

	sharing or disclosure (e.g., Computer Matching Agreement, Memorandum of Understanding (MOU), or Information Sharing Agreement (ISA)).	HHS, therefore no MOU or ISA is required.
PIA - 10C:	Describe process and procedures for logging/tracking/accounting for the sharing and/or disclosing of PII	No system control limits are required since all staff in HRSA Ethics Program need access to all parts of database to perform key job functions as ethics officials, these include review and analysis of ethics reports and requests.
PIA - 11:	Describe the process in place to notify individuals that their personal information will be collected. If no prior notice is given, explain the reason	The Office of Government Ethics (OGE) collects data directly from the individual using Electronic Financial Disclosure System (EFDS). All forms

that the HERD application collects contain a privacy act statement designed to inform individuals of the collection and use of their information.

All documents and reports being uploaded into the system contain the Privacy Act notice, the method by which individuals are being informed their personal information is being collected. Privacy Act Statement: Title I of the Ethics in Government Act of 1978 (5 U.S.C. App.), Executive Order 12674 (as modified by Executive Order 12731), and 5 CFR Part 2634, Subpart I, of the Office of Government Ethics regulations require the reporting of this information. The primary use of the information on this form is for review by Government officials of your agency, to determine compliance with applicable Federal conflict of interest laws and regulations. Additional disclosures of the information on this report may be made: (1) to a Federal, State, or local law enforcement agency if the disclosing agency becomes aware of a violation or potential violation of law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (3) to a source when necessary to obtain information relevant to a conflict of interest investigation or decision; (4) to the National Archives and Records Administration or the General Services Administration in records management inspections; (5) to the Office of Management and Budget during legislative coordination on private relief legislation; (6) to the Department of Justice or in certain legal proceedings when the disclosing agency, and employee of the disclosing agency, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and

the use of such records is deemed relevant and necessary to the litigation; (7) to reviewing officials in a new office, department or agency when an employee transfers from one covered position to another, (8) to a Member of Congress or a congressional office in response to an inquiry made on behalf of an individual who is the subject of the record, and (9) to contractors and other non-Government employees working for the Federal Government to accomplish a function related to an OGE Government wide system of records. This confidential report will not be disclosed to any requesting person unless authorized by law. See also the OGE/GOVT-2 executive branch wide Privacy Act system of records.

PIA - 12: Is the submission of PII by individuals voluntary or mandatory?

PIA - 13: 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

Voluntary

There is no option to object to the collection of information on the forms stored in this system as it is required by regulation.

PIA - 14:	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	Individuals are informed when they submit the information that this information will be stored in the system and that it will be used for legitimate purposes to avoid conflict of interest. No other notification or consent beyond this is required.
PIA - 15:	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	There is no process, as individuals are notified at the time, they submit the information stored in this system that it will be used for legitimate purposes, and it will not be disclosed unless authorized by law.
PIA - 16:	Describe the process in place for periodic reviews of PII contained in the system to ensure the data's integrity, availability, accuracy, and relevancy. Please address each element in your response. If no processes are in place, explain why not	Ethics staff will periodically review PII found in the system and will make necessary updates to ensure PII is accurate and up to date. Ethics staff will ensure PII is not improperly or inadvertently modified or destroyed, available when needed, and sufficiently accurate for the purposes needed. Any outdated, unnecessary, irrelevant, incoherent, and inaccurate PII will be removed from the system.
PIA - 17:	Identify who will have access to the PII in the system and the	Users
	reason why they require access	Administrators
		Developers
		Contractors
	Provide the reason of access for each of the groups identified in PIA	A -17
	Users Reasoning: System Users require access to PII data in orde Administrators Reasoning: System Administrators require access to maintenance. Developers Reasoning: Access is required for system	PII for audit purposes as well as system
PIA - 17A:		
PIA - 17B:	Select the type of contractor	Third-Party Contractor (Contractors other than HHS Direct Contractors)
PIA - 18:	Describe the administrative procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII	A user submits a request for system access to the system administrator. The administrator makes a determination as to what PII data the user has access to base on their job title and role.
PIA - 19:	Describe the technical methods in place to allow those with access to PII to only access the minimum amount of information necessary to perform their job	No system control limits are required since all staff in HRSA Ethics Program need access to all parts of database to perform key job functions as ethics officials, these include review and analysis of ethics reports and requests.
PIA - 20:	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 that will use the system would have taken the IT Security Awareness and Records Management Training.
PIA - 21:	Describe training system users receive (above and beyond general security and privacy awareness training).	N/A
PIA - 23:	Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific NARA records retention schedule(s) and include the retention period(s)	The process and guidelines in place about the retention and destruction of PII follow the National Archives and Records Administration (NARA) General Records Schedule 25, requiring all records to automatically be deleted after 6 years.
PIA - 24:	Describe how the PII will be secured in the system using	HERD relies on network security controls

	administrative, technical, and physical controls. Please address each element in your response	provided by the contractor and HRSA managed through GSS (General Support System). The HERD implements firewalls, network, and host base intrusion detection to secure its facilities. Boundary entry points are controlled by firewall rules and protected by Intrusion Detection Servers to prevent unauthorized access.
PIA - 25:	Describe the purpose of the web site, who has access to it, and how users access the web site (via public URL, log in, etc.). Please address each element in your response	
PIA - 26:	Does the website have a posted privacy notice?	
PIA - 27:	Does the website use web measurement and customization technology?	
PIA - 27A:	Select the type of website measurement and customization technologies is in use and if it is used to collect PII	
PIA - 28:	Does the website have any information or pages directed at children under the age of thirteen?	
PIA - 28B:	Is there a unique privacy policy for the website and does the unique privacy policy address the process for obtaining parental consent if any information is collected?	
PIA - 29:	Does the website contain links to non-federal government websites external to HHS?	