


General Information		
<b>PTA / PIA Name:</b>	HRSA - HERD - QTR3 - 2025 - HRSA1446271	<b>PTA / PIA ID:</b> 3845040
<b>Component Name:</b>	HRSA - HRSA Ethics Reporting Database	<b>ATO Boundary Name:</b> HRSA Ethics Reporting Database
<b>Overall Status:</b>	Complete 	<b># of Days - Open:</b> 133
<b>Submitter:</b>		<b>Submit Date:</b> 9/25/2025
<b>Next Assessment Date:</b>	N/A	<b>Expiration Date:</b> 1/1/2100
<b>Office:</b>		<b>OpDiv:</b> HRSA
<b>Security Categorization:</b>	Moderate	
<b>Make PIA available to Public?:</b>	No	<b>PIA Required:</b> Yes
<b>General 01:</b>	Identify the Enterprise Performance Lifecycle Phase of the system.	Operations and Maintenance
<b>General 02:</b>	Is this a FISMA-Reportable system?	Yes
<b>General 03:</b>	Does the system have or is it covered by a Security Authorization to Operate (ATO)?	Yes
<b>General 04:</b>	ATO Date or Planned ATO Date.	6/12/2024
<b>General 05:</b>	Is the system or electronic information collection, agency or contractor operated?	Contractor
<b>History Log:</b>	<a href="#">View History Log</a>	

Privacy Threshold Analysis		
<b>Privacy Threshold Analysis</b>		
<b>PTA 01:</b>	Point of Contact (POC) Name	Rebecca Andam Michael Makinde
<b>PTA 01A:</b>	POC Title and Organization	ISSO, HRSA
<b>PTA 01B:</b>	POC Email Address	RAndam@hrsa.gov
<b>PTA 01C:</b>	POC Phone Number	301-370-9562
<b>PTA 02:</b>	Indicate the following reason(s) for this PTA. Choose from the following options.	PIA Validation (PIA Refresh)
<b>PTA 02A:</b>	Describe in further detail any changes to the system that have occurred since the last PIA.	No changes since last PTA

<b>PTA 03:</b>	Is the data contained in the system owned by the agency or contractor?	Agency
<b>PTA 04:</b>	Please give a brief overview of the purpose of the system by describing what the functions of the system are and how the system carries out those functions in support of HHS.	<p>The Health Resources and Services Administration Ethics Reporting Database (HERD) houses Ethics Program data and documents that have been housed in Excel logs 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.</p>
<b>PTA 05:</b>	List and/or describe all the types of information that are collected, maintained, and/or shared by the system regardless of whether that information is PII and how long that information is stored.	<p>The database collects and stores employee ethics data, such as dates of interaction with program staff and when and how employees met 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.</p> <p>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 however, no PII information is collected from spouse and dependent children nor employment status, foreign activities, and legal documents; 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.</p>
<b>PTA 05A:</b>	Are user credentials used to access the system?	Yes, but the user credentials are maintained in a separate system (e.g., AD, AMS) and not collected or maintained by this system.
<b>PTA 05C:</b>	Please identify the system that maintains the user credentials or controls access to this system.	HRSA OKTA integrated with HRSA AD

<b>PTA 06:</b>	Describe why each type of information is collected, maintained, and/or shared by the system. Specify what information is collected about each category of individual.	<p>The system is a database, searchable by HRSA Ethics Program staff. It houses all HRSA Ethics Program data and documents relative to HRSA 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 actually 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.</p>
<b>PTA 07:</b>	Does the system collect, maintain, use, or share PII?	Yes
<b>PTA 08:</b>	Does the system include a website or online application?	Yes
<b>PTA 08A:</b>	Provide the URL(s).	<p>Production: <a href="https://herd.hrsa.gov">https://herd.hrsa.gov</a></p> <p>QA: <a href="https://herdqa.hrsa.gov">https://herdqa.hrsa.gov</a></p> <p>Dev: <a href="https://herddev.hrsa.gov/">https://herddev.hrsa.gov/</a></p>
<b>PTA 08B:</b>	Are any of the website or online applications accessible by the public (including publicly accessible log in pages)?	No

<b>PTA 09:</b>	Describe the purpose of the website, 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.	The purpose of HERD application is to gather, document, and monitor employee activities, which may potentially pose a conflict of interest by the Division of Workforce Relations under Office of Human Resources. .  Access to HERD is role based and the access is granted by the system owner after coordination with business owner about the role to be assigned to the users and the website logins are managed by Okta authentication
<b>PTA 10:</b>	Does the website have a posted privacy notice?	Yes
<b>PTA 11:</b>	Does the website contain links to non-federal government websites external to HHS?	No
<b>PTA 12:</b>	Does the website use web measurement and customization technology?	No
<b>PTA 13:</b>	Does the website have any information or pages directed at children under the age of thirteen?	No
<b>PTA 14:</b>	Does the system have a mobile application?	No
<b>PTA 20:</b>	Are any third-party websites or applications (TPWA) associated with the system?	No
<b>PTA 21:</b>	Does this system use artificial intelligence (AI) tools or technologies?	No

### Privacy Impact Assessment

#### Privacy Impact Assessment

<b>PIA 22:</b>	Indicate the type(s) of personally identifiable information (PII) that the system will collect, maintain, or share.	Identifying Numbers  Financial Account Information (e.g., account numbers, credit card numbers)  Biographical Information Name Employment Status/History Foreign Activities Legal Documents  Contact Information Email Address (Personal) Mailing Address (Personal) Phone Numbers (Personal) Email Address (Business) Mailing Address (Business) Phone Numbers (Business)  Other Other
<b>PIA 22A:</b>	Identify the "other" type(s) of personally identifiable information (PII) not mentioned in the above list.	position, supervisor name and contact information, salary and grade

<b>PIA 23:</b>	Indicate the categories of individuals about whom PII is collected, maintained, or shared.	Employees/HHS Direct Contractors
<b>PIA 24:</b>	Indicate the approximate number of individuals whose PII is maintained in the system.	500 – 4,999
<b>PIA 25:</b>	For what primary purpose is the PII used?	Primarily, the PII is being used for employee identification, ethics analysis, filing compliance, and data collection
<b>PIA 26:</b>	Describe any secondary uses for which the PII will be used (e.g., testing, training, or research).	NA. PII is not used for testing, training or research
<b>PIA 28:</b>	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.
<b>PIA 29:</b>	Are records in the system retrieved by one or more PII data elements?	Yes
<b>PIA 29A:</b>	Please specify which PII data elements are used to retrieve records.	Name and Email Address
<b>PIA 29B:</b>	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
<b>PIA 30:</b>	Identify the sources of PII in the system.	Directly from an individual about whom the information pertains  In-person  Email  Online  Other  Government Sources  Within the OPDIV  Other Federal Entities  Non-Government Sources  Members of the Public
<b>PIA 30A:</b>	Identify the “other” sources of PII in the system not mentioned in the above list.	NA
<b>PIA 31:</b>	Is there an Office of Management and Budget (OMB) information collection approval number?	Yes
<b>PIA 31A:</b>	Provide the information collection approval number(s) and expiration date(s).	OMB No. 3209-0006 expiration date 8/31/2027
<b>PIA 32:</b>	Is the PII in the system shared directly with other organizations outside the system’s Operating Division?	Yes
<b>PIA 32A:</b>	Identify with whom the PII is shared or disclosed.	Within HHS

<b>PIA 32B:</b>	For each disclosure, name the organizations/systems the system shares PII with and the purpose(s) of the disclosure.	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.
<b>PIA 32C:</b>	List any agreements in place that authorize the information sharing or disclosure (e.g., Computer Matching Agreement (CMA), Memorandum of Understanding (MOU), or Information Sharing Agreement (ISA)).	No PII information is being shared outside of HHS, therefore no MOU or ISA is required.
<b>PIA 32D:</b>	Describe process and procedures for logging/tracking/accounting for the sharing and/or disclosing of PII. If no process or procedures are in place, please explain why not.	No system control limits are required since all staff in HRSA Ethics Program need access to all parts of database in order to perform key job functions as ethics officials, these include review and analysis of ethics reports and requests.
<b>PIA 33:</b>	Is the submission of PII by individuals voluntary or mandatory as defined in the Privacy Act?	Voluntary
<b>PIA 34:</b>	Describe the method in place to notify and obtain consent from individuals whose PII will be collected. If no prior notice is given or consent cannot be obtained, explain why.	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.
<b>PIA 35:</b>	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). If they cannot be notified or have their consent obtained, explain why.	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.
<b>PIA 36:</b>	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.
<b>PIA 37:</b>	Describe the process in place for periodic reviews of the system to ensure the integrity, availability, accuracy, and relevancy of the PII in the system. Please address each element in your response. If no processes are in place, explain why not.	Ethics staff periodically review PII found in the system and makes necessary updates to ensure PII is accurate and up-to-date. Ethics staff ensures 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 are removed from the system.
<b>PIA 38:</b>	Identify who will have access to the PII in the system.	Users Administrators Developers

<b>PIA 39:</b>	Provide the reason why each of the groups identified in 38 needs access to PII.	Users Reasoning: System Users require access to PII data in order review and analysis employees compliance. Administrators Reasoning: System Administrators require access to PII for audit purposes as well as system maintenance. Developers Reasoning: Access is required for system maintenance.
<b>PIA 40:</b>	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 based on their job title and role.
<b>PIA 41:</b>	Describe the technical methods in place to allow those with access to PII to access only 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 in order to perform key job functions as ethics officials, these include review and analysis of ethics reports and requests.
<b>PIA 42:</b>	Identify the general security and privacy awareness training provided to system users (system owners, managers, operators, contractors and/or program managers) 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.
<b>PIA 43:</b>	Describe the training system users receive above and beyond general security and privacy awareness training.	NA
<b>PIA 44:</b>	Describe the process and guidelines in place for the retention and destruction of PII. Cite specific National Archives and Records Administration (NARA) records retention schedule(s) and include the retention period(s).	The process and guidelines in place with regard to the retention and destruction of PII follow the National Archives and Records Administration (NARA) General Records GRS 2.8, item 010 (DAA-GRS-2016-0006-0001), requiring all records to automatically be deleted after 6 years.
<b>PIA 45:</b>	Describe how the PII will be secured in the system using administrative, technical, and physical controls. Please address each element in your response.	<p>HERD relies on network security controls 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.</p> <p>Boundary entry points are controlled by firewall rules and protected by Intrusion Detection Servers to prevent unauthorized access.</p> <p>System security compliance is maintained by patching regularly. Client server communication is encrypted by SSL. Data at rest is encrypted. System access and usage is frequently audited.</p>

### Review and Comments

#### OpDiv Privacy Analyst Review

<b>Privacy Analyst Review Decision:</b>	Approved	<b>Privacy Analyst Review Date:</b>	9/26/2025
<b>Privacy Analyst Review Comments:</b>		<b># of Days - PA Review:</b>	1

### SOP Review

SOP Review Decision:

Approved

SOP Review Date:

10/6/2025

SOP Review Comments:

# of Days - SOP Review:

10

### Agency Privacy Analyst Review

Agency Privacy Analyst Review Decision:

Approved

Agency Privacy Analyst Review Date:

11/14/2025

Agency Privacy Analyst Review Comments:

Reviewer: Nestor Villafuerte

11/14/2025 All comments have been addressed. This PIA is ready for SAOP review and approval.

Reviewer: Shanai Shobowale

9/25/2025 Please see comments and update accordingly.

PTA-5: What PII elements are collected from the spouse and dependent children?

Please include the following in your response "employment status, foreign activities, and legal documents.

PIA-22: Need to select "Other" and in the textbox include "position, supervisor name and contact information, salary and grade."

PIA-31A: Please include OMB number expiration date which is 8/31/2027 per reginfo.gov.

PIA-44: GRS 25 no longer exist and was superseded by GRS 2.8, item 010 (DAA-GRS-2016-0006-0001) . Please update your response to reflect GRS 2.8 and it's disposition.

# of Days - APA Review:

39

### SAOP Review

SAOP Review Decision:

Approved

SAOP Review Date:

11/20/2025

SAOP Review Comments:

# of Days - SAOP Review:

6

### SAOP Signature

Date

User

Type

Name

Original Value

New Value

11/20/2025 11:23 AM

BAUR, VANESSA

Signature

SAOP (Email PIN)

Content Signed

### Supporting Document(s)

Name

Size

Type

Upload Date

Downloads

No Records Found

Comments				
Question Name	Submitter	Date	Comment	Attachment
PIA 44	BLAND, CRYSTAL	9/25/2025	Added "GRS 2.8, item 010 (DAA-GRS-2016-0006-0001) "	
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