(FY 09) PIA: System Identification

Program or System Name:	Region 1>VHA>VISN18>Northern Arizona HCS(Prescott)>PBX
OMB Unique System / Application / Program Identifier (AKA: UPID #):	029-00-02-00-01-1120-00
Description of System / Application / Program:	The NAVAHCS' Public Branch Exchange (PBX) is identified by VA OI&T as an information system that meets criteria for as an information system that meets criteria for certification & Accreditation activities. The PBX was certified in Fiscal Year 2005 as an accredited system for use by VA staff in the conduct of official VA business and deemed essential for business activities. This analysis is conducted at least annually or in the event that significant change occurs with the system.
Facility Name:	Northern Arizona VA Health Care System

		928-445-4860	
Privacy Officer:	Brenda Kohler	ext 6088	brenda.kohler@va.gov
Information Security Officer:	Mike Caldwell	928-776-6096	mike.caldwell@va.gov
Chief Information Officer:	Roni Moore	928-776-6016	roni.moore@va.gov
Person Completing Document:	Ronald J. Searcy	928-776-6062	ronald.searcy@va.gov
Other Titles:			

Other Titles:	
Other Titles:	
Date of Last PIA Approved by VACO Privacy Services: (MM/YYYY)	06/2005
Date Approval To Operate Expires:	06/2008

What specific legal authorities authorize this program or system:	OI&T certification and accreditation of the local PBX dated 8/28/08 signed by Eric Raffin, Director Region 1
What is the expected number of individuals that will have their PII stored in this system:	N/A
Identify what stage the System / Application / Program is at:	Operations/Maintenance
The approximate date (MM/YYYY) the system will be operational (if in the Design or Development stage), or the approximate number of years the system/application/program has been in operation.	11 years
Is there an authorized change control process which documents any changes to existing applications or systems?	Yes

If No, please explain:

Date of Report (MM/YYYY): 04/2009

If answers 'Yes' to one or more of the following, please check the appropriate box, continue to the next tab, and complete the remaining questions on this form. If none have been checked then skip to Signatures tab, obtain the appropriate signatures, and submit this document.

- [x] Has a PIA NOT been completed within the last three years?
- [x] Have any changes been made to the system since the last PIA?
- [ ] Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA?
- [ ] Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?
- [ ] Does this system/application/program collect, store or disseminate PII/PHI data?
- [ ] Does this system/application/program collect, store or disseminate the SSN?

(FY 09) PIA: System of Records

Is the data maintained under one or more approved System(s) of Records?	Yes
if the answer above is no, please skip to row 16.	
For each applicable System(s) of Records, list:	
1. All System of Record Identifier(s) (number):	Nortel 81C Name & extension; T-Metrics Server (name & extension)
2. Name of the System of Records:	PBX 81C ; T-Metrics Server for Operators
3. Location where the specific applicable System of Records Notice may be accessed (include the URL):	PBX 81C console; T-Metrics Server used by station operators
Have you read, and will the application, system, or program comply with, all data management practices in the System of Records Notice(s)?	Yes
Does the System of Records Notice require modification or updating?	No
	(Please Select Yes/No)
Is PII collected by paper methods?	No
Is PII collected by verbal methods?	No
Is PII collected by automated methods?	No
Is a Privacy notice provided?	No
Proximity and Timing: Is the privacy notice provided at the time of data collection?	No
Purpose: Does the privacy notice describe the principal purpose(s) for which the information will be used?	No
Authority: Does the privacy notice specify the effects of providing information on a voluntary basis?	No
Disclosures: Does the privacy notice specify routine use(s) that may be made of the information?	No

(FY 09) PIA: Notice

Please fill in each column for the data types selected.

Data Type	Collection Method	What will the subjects be told about the information collection?	How is this messaged conveyed to them?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Verbal		
Family Relation (spouse, children, parents, grandparents, etc)	Verbal		
Service Information	Verbal		
Medical Information			
Criminal Record Information			
Guardian Information			
Education Information			
Benefit Information			
Other (Explain)			

Data Type	Is Data Type Stored on your system?	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Yes	VA Files / Databases (Identify file)	Mandatory

Family Relation (spouse, children, parents, grandparents, etc)	No
Service Information	No
Medical Information	No
Criminal Record Information	No
Guardian Information	No
Education Information	No
Benefit Information	No
Other (Explain)	
Other (Explain)	
Other (Explain)	

(FY 09) PIA: Data Sharing

Organization	Name of Agency/Organization	Do they access this system?	Identify the type of Data Sharing and its purpose.	Is PII or PHI Shared?	What is the procedure you reference for the release of information?
Internal Sharing: VA Organization		Yes			
Other Veteran Organization		No			
Other Federal Government Agency		No			
State Government Agency		No			
Local Government Agency		No			
Research Entity		No			
Other Project / System					
Other Project / System					
Other Project / System					

(FY09) PIA: Access to Records

Does the system gather information from another system?	No
Please enter the name of the system:	
Does the system gather information from an individual?	No
If information is gathered from an individual, is the information provided:	☐ Through a Written Request ☑ Submitted in Person ☐ Online via Electronic Form
Is there a contingency plan in place to process information when the system is down?	No

(FY09) PIA: Secondary Use

Will PII data be included with any secondary use request?	No
if yes, please check all that apply:	☐ Drug/Alcohol Counseling ☐ Mental Health ☐ HIV ☐ Research ☐ Sickle Cell ☐ Other (Please Explain)
Describe process for authorizing access to this data. Answer: N/A	

(FY 09) PIA: Program Level Questions

Does this PIA contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public? No

If Yes, Please Specify:

Explain how collected data are limited to required elements:

Answer: Facility Phone Operators only need employee & patient names with extension number.

How is data checked for completeness?

Answer: When number is dialed, you connect to correct party.

What steps or procedures are taken to ensure the data remains current and not out of date?

Answer: Facility Operators are informed of changes daily.

How is new data verified for relevance, authenticity and accuracy?

Answer: Data is verified by Telecomm department.

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 09) PIA: Retention & Disposal

What is the data retention period?

Answer: Employee extensions are kept until employee leaves facility, patient phone number is kept until patient is discharged.

Explain why the information is needed for the indicated retention period?

Answer: If an employee is called from outside facility, operators can transfer caller to employee, outside calls need to be transferred to patient's phone also.

What are the procedures for eliminating data at the end of the retention period?

Answer: The extension numbers are reissued to new employees . When patients are discharged the phone number is reissued to new patient coming into the hospital.

Where are these procedures documented?

Answer: It is standard practice to reissue phone extension numbers to new incoming employees. The same practice applies to patient phones because of limited phone extension numbers at the facility.

How are data retention procedures enforced?
Answer: The facility has a limited number of phone extension numbers which precludes forgetting to reissue an extension number.

Has the retention schedule been approved by the National Archives and Records Administration (NARA)

No

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 09) PIA: Children's Online Privacy Protection Act (COPPA)

Will information be collected through the internet from children under age 13? No

If Yes, How will parental or guardian approval be obtained?

Answer:

(FY 09) PIA: Security

Is the system/application/program following IT security Requirements and procedures required by federal law and policy to ensure that information is appropriately secured.	Yes
Has the system/application/program conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls..	Yes
Is security monitoring conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?	Yes
Is security testing conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?	Yes
Are performance evaluations conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?	Yes
If 'No' to any of the 3 questions above, please describe why: Answer:	
Is adequate physical security in place to protect against unauthorized access?	Yes
If 'No' please describe why: Answer:	
Explain how the project meets IT security requirements and procedures required by federal law. Answer:	

Explain what security risks were identified in the security assessment? *(Check all that apply)*

- ☐ Air Conditioning Failure
- ☐ Chemical/Biological Contamination
- ☐ Blackmail
- ☐ Bomb Threats
- ☐ Cold/Frost/Snow
- ☐ Communications Loss
- ☐ Computer Intrusion
- ☐ Data Destruction
- ☐ Data Disclosure
- ☐ Data Integrity Loss
- ☐ Denial of Service Attacks
- ☐ Earthquakes
- ☐ Eavesdropping/Interception
- ☐ Fire (False Alarm, Major, and Minor)
- ☐ Flooding/Water Damage
- ☐ Hardware Failure
- ☐ Malicious Code
- ☐ Computer Misuse
- ☐ Power Loss
- ☐ Sabotage/Terrorism
- ☐ Storms/Hurricanes
- ☐ Substance Abuse
- ☐ Theft of Assets
- ☐ Theft of Data
- ☐ Vandalism/Rioting
- ☐ Errors (Configuration and Data Entry)
- ☑ Burglary/Break In/Robbery
- ☐ Identity Theft
- ☐ Fraud/Embezzlement

Answer: (Other Risks)

Explain what security controls are being used to mitigate these risks. *(Check all that apply)*

- ☐ Risk Management
- ☐ Access Control
- ☐ Awareness and Training
- ☐ Contingency Planning
- ☐ Physical and Environmental Protection
- ☐ Personnel Security
- ☐ Audit and Accountability
- ☐ Configuration Management
- ☐ Identification and Authentication
- ☐ Incident Response
- ☐ Media Protection

☐ Personnel Security

☐ Certification and Accreditation Security Assessments

Answer: (Other Controls)

PIA: PIA Assessment

Identify what choices were made regarding the project/system or collection of information as a result of performing the PIA.
Answer:

Availability Assessment: If the data being collected is not available to process for any reason what will the potential impact be upon the system or organization?
(Choose One)

	☐	The potential impact is **high** if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals.
	☐	The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.
x	☐	The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

Integrity Assessment: If the data being collected has been corrupted for any reason what will the potential impact be upon the system or organization?
(Choose One)

	☐	The potential impact is **high** if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals.
	☐	The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.
x	☐	The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

Confidentiality Assessment: If the data being collected has been shared with unauthorized individuals what will the potential impact be upon the system or organization? **(Choose One)**

- [ ] The potential impact is **high** if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals.
- [ ] The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.
- [x] The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

The controls are being considered for the project based on the selections from the previous assessments?

FALSE

Please add additional controls:

FY 09: Additional Comments

Add any additional comments on this tab for any question in the form you want to comment on. Please indicate the question you are responding to and then add your comments.

(FY 09) PIA: Final Signatures

Facility Name: 0

Title:	Name:	Phone:	Email:
Privacy Officer:	Brenda Kohler	928-445-4860 ext 6088	brenda.kohler@va.gov
Digital Signature Block			
Information Security Officer:	Mike Caldwell	928-776-6096	mike.caldwell@va.gov
Digital Signature Block			
Chief Information Officer:	Roni Moore	928-776-6016	roni.moore@va.gov

X

Roni Moore
FCIO

Person Completing Document:	Ronald J. Searcy	928-776-6062	ronald.searcy@va.gov
Digital Signature Block			
System / Application / Program Manager:	0	0	0
Digital Signature Block			

Date of Report: 4/1/2009

OMB Unique Project Identifier 029-00-02-00-01-1120-00

Project Name	Region 1>VHA>VISN 18>Northern Arizona HCS (Prescott)>PBX