

Welcome to the PIA for FY 2011!

Congress passed the E-Government Act of 2002 to encourage the use of Web-based Internet applications or other information technology by Government agencies, with the intention of enhancing access to government information and services and increasing the effectiveness, efficiency, and quality of government operations.

To combat public concerns regarding the disclosure of private information, the E-Government Act mandated various measures, including the requirement that Federal agencies conduct a Privacy Impact Assessment (PIA) for projects with information technology systems that collect, maintain, and/or disseminate "personally identifiable information" of the public. Personally identifiable information, or "personal information," is information that may be used to identify a specific person.

The Privacy Act and VA policy require that personally identifiable information only be used for the purpose(s) for which it was collected, unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information, such as use of collected information for marketing.

Directions:

VA 6508 is the directive which outlines the PIA requirement for every System/Application/Program.

If you find that you can't click on checkboxes, make sure that you are: 1) Not in "design mode" and 2) you have enabled macros.

PIA Website: http://vawww.privacy.va.gov/Privacy_Impact_Assessments.asp

Roles and Responsibilities:

Roles and responsibilities for the specific process are clearly defined for all levels of staff in the VA Directive 6508 referenced in the procedure section of this document.

- a. The Privacy Officer is responsible for the overall coordination and review of the PIA to ensure compliance with VA Directive 6508.
- b. Records Officer is responsible for supplying records retention and deletion schedules.
- c. Information Technology (IT) staff responsible for the privacy of the system data will perform a PIA in accordance with VA Directive 6508 and to immediately report all anomalies to the Privacy Service and appropriate management chain.
- d. Information Security Officer (ISO) is responsible for assisting the Privacy Officer and providing information regarding security controls.
- e. The CIO is responsible for ensuring that the systems under his or her jurisdiction undergo a PIA. This responsibility includes identifying the IT systems; coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and reviewing and approving the PIA before submission to the Privacy Service.

Definition of PII (Personally Identifiable Information)

Information in identifiable form that is collected and stored in the system that either directly identifies and individual by name, address, social security number, telephone number, e-mail address, biometric identifiers, photograph, or other unique numbers, codes or characteristics or combined, indirect identify an individual such as a combination of gender, race, birth date, geographical indicators, license number is also considered PII.

Macros Must Be Enabled on This Form

Microsoft Office 2003: To enable macros, go to: 1) Tools > Macros > Security - Set to Medium; 2) Click OK; 3) Close the file and when reopening click on Enable Macros at the prompt.

Microsoft Office 2007: To enable macros, go to: 1) Office Button > Prepare > Excel Options > Trust Center > Trust Center Settings > Macro Settings > Enable

All Macros; 2) Click OK

Final Signatures

Final Signatures are digitally signed or wet signatures on a case by case basis. All signatures should be done when all modifications have been approved by the VA Privacy Service and the reviewer has indicated that the signature is all that is necessary to obtain approval.

Privacy Impact Assessment Uploaded into SMART

Privacy Impact Assessments should be uploaded into C&A section of SMART.

All PIA Validation Letters should be emailed to christina.pettit@va.gov to received full credit for submission.

(FY 2011) PIA: System Identification

Program or System Name: Region 3> VHA> VISN 08> Carribbean HCS (San Juan, PR)
 OMB Unique System / Application / Program Identifier (AKA: UPID #):

Operates as a fully integrated clinical and administrative covered by the Privacy Act & HIPAA, PHI/ePHI, financial medical center. All clinical and most administrative functions VistA Alpha cluster to process clinical, financial, or administrative local Alpha node must be authenticated by access and via electronic mail. Examples of these organizations include throughout the country sending electronic mail, Medical native operating system of the Alpha cluster is VMS. Cache Using the Cache environment, the VA's VistA program e Cache is the only application inhabiting the Alpha cluster

Description of System/ Application/ Program:

Facility Name: VA Carribbean Health Care System

Title:	Name:	Phone:
Privacy Officer:	Samuel Blanchard	787-641-7582 x.11779
Information Security Officer:	Thomas W. Febus	787-641-3676
System Owner/ Chief Information Officer:	Manuel E. Negron	787-641-7582 x.25031
Information Owner:		
Other Titles:		

Person Completing Document:

Other Titles:

Date of Last PIA Approved by VACO Privacy Services: 03/2010

Date Approval To Operate Expires: 08/2011

What specific legal authorities authorize this program or system:

What is the expected number of individuals that will have their PII stored in this system:

Identify what stage the System / Application / Program is at:

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.

Is there an authorized change control process which documents any changes to existing applications or systems?

If No, please explain:

Has a PIA been completed within the last three years?

Date of Report (MM/YYYY):

Please check the appropriate boxes and continue to the next TAB and complete the remaining question

- 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?

If there is no Personally Identifiable Information on your system , please complete TAB 7 & TAB 12. (See

)> VISTA - VMS
029-0-01-11-01-1180-00

Information source. It processes clinical information
all records, and all other data necessary to run a tertiary
operations within the physical confines of the VISN8 utilize the
administrative data. All external organizations which access a
verify codes or by domain transmission scripts for
the VBA Regional Office, Form, HINQ, all VA facilities
all Cost Recovery vendors and transcription vendors. The
language is a programming language that runs on top of VMS.
exists with all attendant menus, parameters, and data.
etc. This is more detailed in the system SSP.

Email:

Samuel.Blanchard2@va.gov

Thomas.Febus@va.gov

Manuel.Negron@va.gov

[Samuel Blanchard / Thomas W. Febus / Manuel Negron](#)

Title 38 of US Code
65,000
Operations/Maintenance

31

Yes

Yes

05/2011

s on this form.

Contractors, or others performing work for
name, unique identifier, symbol, or

e Comment for Definition of PII)

(FY 2011) PIA: System of Records

Is the data maintained under one or more approved System(s) of Records? If the answer above no, please skip to row 15.

Yes

For each applicable System(s) of Records, list:

1. All System of Record Identifier(s) (number):

79VA19

2. Name of the System of Records:

Veterans Health Information Systems and Technology
Achievement (VISTA) Records-VA

3. Location where the specific applicable System of Records Notice may be accessed (include the URL):

http://www.rms.va.gov/SOR_Records.asp

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?

Yes

Is PII collected by verbal methods?

Yes

Is PII collected by automated methods?

Yes

Is a Privacy notice provided?

Yes

Proximity and Timing: Is the privacy notice provided at the time of data collection?

Yes

Purpose: Does the privacy notice describe the principal purpose(s) for which the information will be used?

Yes

Authority: Does the privacy notice specify the effects of providing information on a voluntary basis?

Yes

Disclosures: Does the privacy notice specify routine use(s) that may be made of the information?

Yes

(FY 2011) 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 message conveyed to them?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Family Relation (spouse, children, parents, grandparents, etc)	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Service Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Medical Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Criminal Record Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Guardian Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Education Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Benefit Information	Paper & Electronic	It is necessary for the continuum of care	Verbal & Written
Other (Explain)			

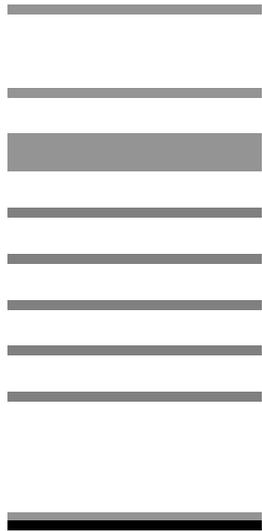
Data Type	Is Data Type Stored on your system?	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?

Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Yes	Veteran	Mandatory
Family Relation (spouse, children, parents, grandparents, etc)	Yes	Veteran	Voluntary
Service Information	Yes	Veteran	Voluntary
Medical Information	Yes	Veteran	Mandatory
Criminal Record Information	Yes	Veteran	Mandatory
Guardian Information	Yes	Veteran	Mandatory
Education Information	Yes	Other (Explain)	Voluntary
Benefit Information	Yes	Veteran	Mandatory
Other (Explain)			
Other (Explain)			
Other (Explain)			

How is a privacy notice provided?

Verbal & Written

**Additional
Comments**



(FY 2011) 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					
Other Veteran Organization					
Other Federal Government Agency					
State Government Agency					
Local Government Agency					
Research Entity					
Other Project / System					
Other Project / System					
Other Project / System					

(FY 2011) PIA: Access to Records

Does the system gather information from another system?	No
Please enter the name of the system:	
Per responses in Tab 4, does the system gather information from an individual?	Yes
If information is gathered from an individual, is the information provided:	<input checked="" type="checkbox"/> Through a Written Request <input checked="" type="checkbox"/> Submitted in Person <input checked="" type="checkbox"/> Online via Electronic Form
Is there a contingency plan in place to process information when the system is down?	Yes

(FY 2011) PIA: Secondary Use

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

(FY 2011) PIA: Program Level Questions

Does this PIA form 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: There are security keys in place to limit the data to the required elements

How is data checked for completeness?

Answer: Updates are made on a consistent basis to ensure the data is complete

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

Answer: Verification is made on the data to ensure that information is current and not out of date

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

Answer: The system verifies the new data and cross references to any existing data

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

Answer:

(FY 2011) PIA: Retention & Disposal

What is the data retention period?

Answer: Paper records and information stored on electronic storage media are maintained and disposed of in accordance with records disposition authority approved by the Archivist of the United States.

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

Answer: Healthcare, record tracking, and employee record

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

Answer: Paper records and information stored on electronic storage media are maintained and disposed of in accordance with records disposition authority approved by the Archivist of the United States. In addition we manage this through a local SOP on Media Disposal which addresses the process in place to destroy all type of media. Documents are shredded locally by a designated group of staff that compose this team and electronic media disposal is conducted by IRM in conjunction with the ISO.

Where are these procedures documented?

Answer: Paper records and information stored on electronic storage media are maintained and disposed of in accordance with records disposition authority approved by the Archivist of the United States and local Center Memorandum on Media Disposal.

How are data retention procedures enforced?

Answer: Paper records and information stored on electronic storage media are maintained and disposed of in accordance with records disposition

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

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

Answer: Yes

(FY 2011) 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 2011) 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: All artifacts for C&A are maintained up to date and are tested at least on an annual basis with continues monitoring thru the whole year. System gets C&A every 3 years to maintain the system's ATO.

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

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

Answer: (Other Risks)

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Access Control | <input checked="" type="checkbox"/> Contingency Planning | <input type="checkbox"/> Personnel Security |
| <input type="checkbox"/> Audit and Accountability | <input type="checkbox"/> Identification and Authentication | <input type="checkbox"/> Physical and Environmental Protection |
| <input checked="" type="checkbox"/> Awareness and Training | <input checked="" type="checkbox"/> Incident Response | <input checked="" type="checkbox"/> Risk Management |
| <input type="checkbox"/> Certification and Accreditation Security Assessments | | |
| <input checked="" type="checkbox"/> Configuration Management | <input type="checkbox"/> Media Protection | |

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: Contingency Plans got updated and mitigating factors are been put into place for example changing the A/C units at our comm center.

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)

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | 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. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | 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)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of integrity could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of integrity could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of integrity 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)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of confidentiality could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of confidentiality could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of confidentiality 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?

The minimum security requirements for our high impact system cover seventeen security-related areas with regard to protecting the confidentiality, integrity, and availability of VA information systems and the information processed, stored, and transmitted by those systems. The security-related areas include: access control; awareness and training; audit and accountability; certification, accreditation, and security assessments; configuration management; contingency planning; identification and authentication; incident response; maintenance; media protection; physical and environmental protection; planning; personnel security; risk assessment; systems and services acquisition; system and communications protection; and system and information integrity. Our facility employs all security controls in the respective high impact security control baseline unless specific exceptions have been allowed based on the tailoring guidance provided in NIST Special Publication 800-53 and specific VA directives.

Please add additional controls:

(FY 2011) PIA: Additional Comments

Add any additional comments or information that may have been left out for any question. Please indicate the question you are responding to and then add your comments.

(FY 2011) PIA: VBA Minor Applications

Which of these are sub-components of your system? None applies to our VISTA System.

Access Manager	Automated Sales Reporting (ASR)	Automated Folder Processing System (AFPS)
Actuarial	BCMA Contingency Machines	Automated Medical Information Exchange II (AIME II)
Appraisal System	Benefits Delivery Network (BDN)	Automated Medical Information System (AMIS)290
ASSISTS	Centralized Property Tracking System	Automated Standardized Performace Elements Nationwide (ASPEN)
Awards	Common Security User Manager (CSUM)	Centralized Accounts Receivable System (CARS)
Awards	Compensation and Pension (C&P)	Committee on Waivers and Compromises (COWC)
Baker System	Control of Veterans Records (COVERS)	Compensation and Pension (C&P) Record Interchange (CAPRI)
Bbraun (CP Hemo)	Control of Veterans Records (COVERS)	Compensation & Pension Training Website
BDN Payment History	Control of Veterans Records (COVERS)	Corporate Waco, Indianapolis, Newark, Roanoke, Seattle (Corporate WINRS)
BIRLS	Courseware Delivery System (CDS)	Distribution of Operational Resources (DOOR)
C&P Payment System	Dental Records Manager	Educational Assistance for Members of the Selected Reserve Program CH 1606
C&P Training Website	Education Training Website	Electronic Performance Support System (EPSS)
CONDO PUD Builder	Electronic Appraisal System	Enterprise Wireless Messaging System (Blackberry)
Corporate Database	Electronic Card System (ECS)	Financial Management Information System (FMI)
Data Warehouse	Electronic Payroll Deduction (EPD)	Hearing Officer Letters and Reports System (HOLAR)
EndoSoft	Eligibility Verification Report (EVR)	Inquiry Routing Information System (IRIS)
FOCAS	Fiduciary Beneficiary System (FBS)	Modern Awards Process Development (MAP-D)
Inforce	Fiduciary STAR Case Review	Personnel and Accounting Integrated Data and Fee Basis (PAID)
INS - BIRLS	Financial and Accounting System (FAS)	Personal Computer Generated Letters (PCGL)
Insurance Online	Insurance Unclaimed Liabilities	Personnel Information Exchange System (PIES)
Insurance Self Service	Inventory Management System (IMS)	Personnel Information Exchange System (PIES)
LGY Home Loans	LGY Centralized Fax System	Post Vietnam Era educational Program (VEAP) CH 32
LGY Processing	Loan Service and Claims	Purchase Order Management System (POMS)
Mobilization	Loan Guaranty Training Website	Reinstatement Entitelment Program for Survivors (REAPS)
Montgomery GI Bill	Master Veterans Record (MVR)	Reserve Educational Assistance Program CH 1607
MUSE	Mental Health Asisstant	Service Member Records Tracking System
Omicell	National Silent Monitoring (NSM)	Survivors and Dependents Education Assistance CH 35
Priv Plus	Powerscribe Dictation System	Systematic Technical Accuracy Review (STAR)
RAI/MDS	Rating Board Automation 2000 (RBA2000)	Training and Performance Support System (TPSS)
Right Now Web	Rating Board Automation 2000 (RBA2000)	VA Online Certification of Enrollment (VA-ONCE)
SAHSHA	Rating Board Automation 2000 (RBA2000)	VA Reserve Educational Assistance Program
Script Pro	Records Locator System	Veterans Appeals Control and Locator System (VACOLS)
SHARE	Review of Quality (ROQ)	Veterans Assistance Discharge System (VADS)
SHARE	Search Participant Profile (SPP)	Veterans Exam Request Info System (VERIS)
SHARE	Spinal Bifida Program Ch 18	Veterans Service Representative (VSR) Advisor
Sidexis	State Benefits Reference System	Vocational Rehabilitation & Employment (VR&E) CH 31
Synquest	State of Case/Supplemental (SOC/SSOC)	Waco Indianapolis, Newark, Roanoke, Seattle (WINRS)

VBA Data Warehouse
VBA Training Academy
Veterans Canteen Web
VIC
VR&E Training Website
Web LGY

Telecare Record Manager
VBA Enterprise Messaging System
Veterans On-Line Applications (VONAPP)
Veterans Service Network (VETSNET)
Web Electronic Lender Identification

Web Automated Folder Processing System (WAFPS)
Web Automated Reference Material System (WARMS)
Web Automated Verification of Enrollment
Web-Enabled Approval Management System (WEAMS)
Web Service Medical Records (WebSMR)
Work Study Management System (WSMS)

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

(FY 2011) PIA: VISTA Minor Applications

Which of these are sub-components of your system?

- | | | | |
|---------------|----------------------|-------------------------------|---------------------------------------|
| X ASISTS | X Beneficiary Travel | X Accounts Receivable | X Adverse Reaction Tracking |
| X Bed Control | X Care Management | ADP Planning (PlanMan) | X Authorization/ Subscription |
| X CAPRI | Care Tracker | X Bad Code Med Admin | X Auto Replenishment/ Ward Stock |
| X CMOP | X Clinical Reminders | X Clinical Case Registries | X Automated Info Collection Sys |
| X Dental | X CPT/ HCPCS Codes | X Clinical Procedures | X Automated Lab Instruments |
| X Dietetics | X DRG Grouper | X Consult/ Request Tracking | X Automated Med Info Exchange |
| X Fee Basis | X DSS Extracts | X Controlled Substances | X Capacity Management - RUM |
| GRECC | X Education Tracking | X Credentials Tracking | X Capacity Management Tools |
| X HINQ | X Engineering | X Discharge Summary | X Clinical Info Resource Network |
| X IFCAP | X Event Capture | X Drug Accountability | X Clinical Monitoring System |
| X Imaging | X Extensible Editor | X EEO Complaint Tracking | X Enrollment Application System |
| X Kernal | X Health Summary | X Electronic Signature | X Equipment/ Turn-in Request |
| X Kids | X Incident Reporting | X Event Driven Reporting | X Gen. Med.Rec. - Generator |
| X Lab Service | X Intake/ Output | X External Peer Review | X Health Data and Informatics |
| X Letterman | X Integrated Billing | X Functional Independence | X ICR - Immunology Case Registry |
| X Library | Lexicon Utility | X Gen. Med. Rec. - I/O | X Income Verification Match |
| X Mailman | X List Manager | X Gen. Med. Rec. - Vitals | X Incomplete Records Tracking |
| X Medicine | X Mental Health | X Generic Code Sheet | X Interim Mangement Support |
| MICOM | X MyHealthEVet | X Health Level Seven | X Master Patient Index VistA |
| X NDBI | X National Drug File | X Hospital Based Home Care | Missing Patient Reg (Original) A4EL |
| NOIS | X Nursing Service | X Inpatient Medications | X Order Entry/ Results Reporting |
| X Oncology | X Occurrence Screen | X Integrated Patient Funds | X PCE Patient Care Encounter |
| X PAID | X Patch Module | X MCCR National Database | X Pharmacy Benefits Mangement |
| X Prosthetics | X Patient Feedback | X Minimal Patient Dataset | X Pharmacy Data Management |
| X QUASER | X Police & Security | X National Laboratory Test | X Pharmacy National Database |
| X RPC Broker | X Problem List | X Network Health Exchange | X Pharmacy Prescription Practice |
| X SAGG | X Progress Notes | X Outpatient Pharmacy | X Quality Assurance Integration |
| X Scheduling | X Record Tracking | X Patient Data Exchange | X Quality Improvement Checklist |
| X Social Work | X Registration | X Patient Representative | X Radiology/ Nuclear Medicine |
| X Surgery | X Run Time Library | X PCE Patient/ HIS Subset | X Release of Information - DSSI |
| X Toolkit | X Survey Generator | X Security Suite Utility Pack | X Remote Order/ Entry System |
| X Unwinder | X Utilization Review | X Shift Change Handoff Tool | Utility Management Rollup |
| X VA Fileman | X Visit Tracking | X Spinal Cord Dysfunction | CA Verified Components - DSSI |
| X VBECS | X VistALink Security | X Text Integration Utilities | X Vendor - Document Storage Sys |
| X VDEF | X Women's Health | VHS & RA Tracking System | X Visual Impairment Service Team ANRV |
| X VistALink | | X Voluntary Timekeeping | Voluntary Timekeeping National |

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name	BCU Barcode Medication Administration Contingency Plan
Description	National release
Comments	
Is PII collected by this minor application?	YES
Does this minor application store PII?	NO
If yes, where?	
Who has access to this data?	Clinical staff

Name	
Description	
Comments	
Is PII collected by this minor application?	
Does this minor application store PII?	
If yes, where?	
Who has access to this data?	

Name	
Description	
Comments	
Is PII collected by this minor application?	
Does this minor application store PII?	
If yes, where?	
Who has access to this data?	

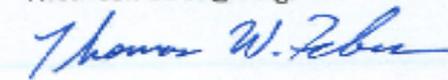
(FY 2011) PIA: Minor Applications

Which of these are sub-components of your system?

1184 Web	ENDSOFT	RAFT
A4P	Enterprise Terminology Server & VHA Enterprise Terminology Services	RALS

(FY 2011) PIA: Final Signatures

Facility Name: Region 3> VHA> VISN 08> Carribbean HCS (San Juan, PR)> VISTA - VMS

Title:	Name:	Phone:	Email:
Privacy Officer:	Samuel Blanchard	787-641-7582 x.11779	Samuel.Blanchard2@va.gov
Digital Signature Block			
Information Security Officer:	Thomas W. Febus	787-641-3676	Thomas.Febus@va.gov
Digital Signature Block			
System Owner/ Chief Information Officer:	Manuel E. Negrón	787-641-7582 x.25031	MANUEL.NEGRON@VA.GOV
Digital Signature Block			
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Date of Report:	5/1/11		
OMB Unique Project Identifier	029-0-01-11-01-1180-00		
Project Name	Region 3> VHA> VISN 08> Carribbean HCS (San Juan, PR)> VISTA - VMS		