



Privacy Impact Assessment for the VA IT System called:

VBA Vocational Rehabilitation and Employment (WINRS or CWI) Application Office of Field Operations

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System Contacts:

System Contacts

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Abstract

The abstract provides the simplest explanation for “what does the system do?” and will be published online to accompany the PIA link.

The stand-alone, Microsoft Access version of the WINRS program was developed in 1997 by Vocational Rehabilitation and Employment Service (VR&E) staff at the Roanoke, Virginia VA Remote Office (RO). The early application simply allowed stations to view their own cases within the local area and provided the same functionality to out-based stations.

Overview

The overview is the most important section of the PIA. A thorough and clear overview gives the reader the appropriate context to understand the responses in the PIA. The overview should contain the following elements:

- *The IT system name and the name of the program office that owns the IT system.*
- *The business purpose of the program, IT system, or technology and how it relates to the program office and agency mission.*
- *Indicate the ownership or control of the IT system or project.*
- *The expected number of individuals whose information is stored in the system and a brief description of the typical client or affected individual.*
- *A general description of the information in the IT system and the purpose for collecting this information.*
- *Any information sharing conducted by the IT system. A general description of the modules and subsystems, where relevant, and their functions.*
- *Whether the system is operated in more than one site, and if so, a description of how use of the system and PII is maintained consistently in all sites and if the same controls are used across sites.*
- *A citation of the legal authority to operate the IT system.*
- *Whether the completion of this PIA will result in circumstances that require changes to business processes*
- *Whether the completion of this PIA could potentially result in technology changes*
- *If the system is in the process of being modified and a SORN exists, will the SORN require amendment or revision and approval? If the system is using cloud technology, does the SORN for the system cover cloud usage or storage?*

The stand-alone, Microsoft Access version of the WINRS program was developed in 1997 by Vocational Rehabilitation and Employment Service (VR&E) staff at the Roanoke, Virginia VA RO. The early application simply allowed stations to view their own cases within the local area and provided the same functionality to out-based stations. The acronym WINRS was derived from the five beta test stations that tested the original program: Waco (Texas), Indianapolis (Indiana), Newark (New Jersey), Roanoke (Virginia) and Seattle (Washington). The current version, now called

Corporate WINRS (acronym is no longer applicable), is a customized case management and payment application. Several acronyms have been used for the application; in this PIA the term WINRS will be used.

The VR&E Service provides benefits and assistance to eligible veterans with compensable service connected disability (SCD). The VR&E Service provides assistance (e.g., comprehensive evaluation of rehabilitation needs, training and employment, independent living) which helps veterans obtain and maintain suitable employment or independence in living.

To use these services, disabled veterans submit an application to VR&E in one of the Regional Office (RO) locations where the application is processed, and the services administered. The applications are processed by the WINRS and the Benefits Delivery Network (BDN) application. Subsistence allowance to the veteran is paid through BDN; other remittances to the veterans and service providers are paid through the VR&E Financial Management System. WINRS is an Intranet application that manages national and local case reviews for Entitlement Determination, Rehabilitation Planning, Rehabilitation, Services Delivery, Outcomes Rehabilitation, Outcomes Discontinued, and Educational/Vocational Counseling

WINRS includes the following functions for VR&E and Finance staff:

- Maintains accurate data as cases move through the Vocational Rehabilitation process.
- Provides an interaction with the BDN.
- Generate Veterans Affairs (VA) forms and letters automatically.
- Provides a voucher processor and FMS interface to control authorizations and payments on behalf of a participant.
- Provides a scheduling tool for scheduling and tracking appointments.
- Maintains a complete case history of all chronological events that have taken place in the case history.

Title 10 U.S.C. chapters 106a, 510,1606 and 1607 and Title 38, U.S.C., section 501(a) and Chapters 11, 13, 15,18, 23, 30, 31, 32, 33, 34, 35, 36, 39, 51,53, and 55 provide the legal authority for operating the CBA C&P Corporate Applications. VA gathers or creates these records in order to enable it to administer statutory benefits programs to Veterans, Service members, reservists, and their spouses, surviving spouses, and dependents, who file claims for a wide variety of Federal Veteran's benefits administered by VA.

There are two basic users of WINRS, veteran (family member) clients and VA RO counselors. The typical clients for WINRS are Chapter 31 eligible. These are Vocational Rehabilitation & Employment (VR&E) individuals. The client requesting or receiving Chapter 31 benefits has been injured in some fashion and the goal is to rehabilitate them back into society as contributing individuals. The second user is a VA RO counselor providing assistance to the veteran. To use these services, disabled veterans submit an application to VR&E in one of the RO locations where the application is processed and the services administered.

The number of persons that receive benefits out of WINRS is gradually increasing. Currently there a few thousand; however, there is a movement of moving more cases to WINRS, from the BDN that handles many Chapter 31 cases. The immediate plan is to move some 730,000 inactive Chapter 31 cases off the BDN and archiving them in the WINRS database.

Section 1. Characterization of the Information

The following questions are intended to define the scope of the information requested and collected as well as the reasons for its collection as part of the program, IT system, or technology being developed.

1.1 What information is collected, used, disseminated, created, or maintained in the system?

Identify and list all Sensitive Personal Information (SPI) that is collected and stored in the system, including Individually Identifiable Information (III), Individually Identifiable Health Information (IIHI), Protected Health Information (PHI), and Privacy- Protected Information. For additional information on these information types and definitions, please see VA Directives and Handbooks in the 6500 series (<https://vawww.va.gov/vapubs/>). If the system creates information (for example, a score, analysis, or report), list the information the system is responsible for creating.

If a requesting system receives information from another system, such as a response to a background check, describe what information is returned to the requesting system.

This question is related to privacy control AP-1, Authority To Collect, and AP-2, Purpose Specification.

The information selected below must match the information provided in question 2.1 as well as the data elements columns in 4.1 and 5.1.

Please check any information listed below that your system collects, uses, disseminates, creates, or maintains. If additional SPI is collected, used, disseminated, created, or maintained, please list those in the text box below:

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Name | <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Integration Control |
| <input checked="" type="checkbox"/> Social Security | <input type="checkbox"/> Beneficiary Numbers | <input type="checkbox"/> Number (ICN) |
| <input type="checkbox"/> Number | <input type="checkbox"/> Account numbers | <input type="checkbox"/> Military |
| <input checked="" type="checkbox"/> Date of Birth | <input type="checkbox"/> Certificate/License | <input type="checkbox"/> History/Service |
| <input type="checkbox"/> Mother's Maiden Name | <input type="checkbox"/> numbers | <input type="checkbox"/> Connection |
| <input checked="" type="checkbox"/> Personal Mailing | <input type="checkbox"/> Vehicle License Plate | <input type="checkbox"/> Next of Kin |
| <input type="checkbox"/> Address | <input type="checkbox"/> Number | <input type="checkbox"/> Other Unique |
| <input checked="" type="checkbox"/> Personal Phone | <input type="checkbox"/> Internet Protocol (IP) | <input type="checkbox"/> Identifying Information |
| <input type="checkbox"/> Number(s) | <input type="checkbox"/> Address Numbers | (list below) |
| <input type="checkbox"/> Personal Fax Number | <input checked="" type="checkbox"/> Current Medications | |
| <input checked="" type="checkbox"/> Personal Email | <input checked="" type="checkbox"/> Previous Medical | |
| <input type="checkbox"/> Address | <input type="checkbox"/> Records | |
| <input type="checkbox"/> Emergency Contact | <input type="checkbox"/> Race/Ethnicity | |
| <input type="checkbox"/> Information (Name, Phone | <input type="checkbox"/> Tax Identification | |
| <input type="checkbox"/> Number, etc. of a different | <input type="checkbox"/> Number | |
| <input type="checkbox"/> individual) | <input type="checkbox"/> Medical Record | |
| <input checked="" type="checkbox"/> Financial Account | <input type="checkbox"/> Number | |
| <input type="checkbox"/> Information | <input type="checkbox"/> Gender | |

Additional information collected may include, service number, rank, total amount of active service, branch of service, character of service, pay grade, assigned separation reason, service period, birth

certificates, marriage licenses, whether Veteran was discharged with a disability, reenlisted, received a Purple Heart or other military decoration.

PII Mapping of Components

<Information System Name> consists of <number> key components (databases). Each component has been analyzed to determine if any elements of that component collect PII. The type of PII collected by <Information System Name> and the reasons for the collection of the PII are in the table below.

PII Mapped to Components

Note: Due to the PIA being a public facing document, please do not include the server names in the table.

PII Mapped to Components

Database Name of the information system collecting/storing PII	Does this system collect PII? (Yes/No)	Does this system store PII? (Yes/No)	Type of PII (SSN, DOB, etc.)	Reason for Collection/Storage of PII	Safeguards
Automated input VA forms	Yes	Yes	Name SSN DOB Mailing Address Zip Code Email address Phone number Financial Account Information Current Medications Previous Medical Records	Determine eligibility for Veteran compensation	Limited number of counselors/admin users. All counselors/administrative users undergo mandated annual security and privacy training.
Hard-copy paper forms	Yes	Yes	Name SSN DOB Mailing Address Zip Code	Determine eligibility for Veteran compensation	Limited number of counselors/admin users. All counselors/administrative users undergo mandated annual security and privacy training.

			Email address Phone number Financial Account Information Current Medications Previous Medical Records	
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1.2 What are the sources of the information in the system?

List the individual, entity, or entities providing the specific information identified above. For example, is the information collected directly from the individual as part of an application for a benefit, or is it collected from other sources such as commercial data aggregators?

Describe why information from sources other than the individual is required. For example, if a program’s system is using data from a commercial aggregator of information or data taken from public Web sites, state the fact that this is where the information is coming from and then in question 1.3 indicate why the system is using this source of data.

If the system creates information (for example, a score, analysis, or report), list the system as a source of information.

This question is related to privacy controls DI-1, Data Quality, and IP-1, Consent.

There are two sources of the data collected by WINRS. The first by the first of automated input VA forms. VA counselors at the remote offices (RO) request information from veterans to enter on the forms.

The second source of data collected by WINRS is from hard-copy paper forms. A veteran can enter the required information on paper forms and submit the forms personally via Postal Mail or submitted via Fax Machine.

1.3 How is the information collected?

This question is directed at the means of collection from the sources listed in question 1.2. Information may be collected directly from an individual, received via electronic transmission from another system, or created by the system itself. Specifically, is information collected through technologies or other technology used in the storage or transmission of information in identifiable form?

If the information is collected on a form and is subject to the Paperwork Reduction Act, give the form's OMB control number and the agency form number.

This question is related to privacy controls DI-1, Data Quality, and IP-1, Consent.

The original data is entered by veterans into apps or by VA counselors who enter the data for veterans. There are many VA forms used by Veterans to apply for and/or make adjustments to pending benefits, which are the only means of collecting the Veteran information. The information on these forms is entered by the veteran or counselor onto automated screens provided by applications and is stored into the corporate database. The information is collected primarily on defined forms and entered to specific fields of the corporate database records in support of solutions that provide electronic "eFolders" for claims processing through imaging, document management technologies and integration with output capabilities of several other VA systems.

VA Form 28-1900, Application for Vocational Rehabilitation Benefits; Form 21-4142, Authorization and Consent to Release Information to the Department of Veterans Affairs (VA) are specifically used by veterans to request rehabilitation or education benefits.

All VBA benefit forms are located at <http://www.va.gov/vaforms/>. The URL of the associated privacy statement is: <http://www.va.gov/privacy/>. VBA forms can be downloaded from this site, filled in and printed to be delivered in paper form. All collected information is used to determine eligibility for benefits, process ratings and to provide payments via the Department of Treasury.

The VBA toll free number for veterans is 1-800-827-1000. Clients are referred to and transferred to the Regional Office of Jurisdiction, where they can provide a service representative with required information. All collected information is used to determine eligibility for benefits, process ratings and to provide payments via the Department of Treasury. VBA employees may also contact a Veteran directly to obtain clarifying information for a claim for benefits.

The information is also obtained from <https://www.ebenefits.va.gov>.

1.4 How will the information be checked for accuracy? How often will it be checked?

Discuss whether and how often information stored in the system is checked for accuracy. Is information in the system checked against any other source of information (within or outside your organization) before the information is used to make decisions about an individual? For example, is there a computer matching agreement in place with another government agency? For systems that receive data from internal data sources or VA IT systems, describe the system checks to ensure that data corruption has not occurred during transmission.

If the system checks for accuracy by accessing a commercial aggregator of information, describe this process and the levels of accuracy required by the contract.

This question is related to privacy controls DI-1, Data Quality, and DI-2, Data Integrity and Integrity Board.

Original submission of data is verified for completeness by the Regional Office Case Managers. There are also internal program controls, edits, and checks to ensure that the data submitted is complete. Forms are visually examined. Automated edits and audits determine that a) a data element is present, and b) that the value is consistent with the data requested, and c) consistent with the record being created/updated.

1.5 What specific legal authorities, arrangements, and agreements defined the collection of information?

List the full legal authority for operating the system, specifically the authority to collect the information listed in question 1.1. Provide the authorities in a manner understandable to any potential reader, i.e., do not simply provide a legal citation; use statute names or regulations in addition to citations. Legal authorities include Federal laws, regulations, statutes, and Executive Orders.

This question is related to privacy control AP-1, Authority to Collect

Title 10 U.S.C. chapters 106a, 510,1606 and 1607 and Title 38, U.S.C. Section 501(a) and Chapters 11, 13, 15,18, 23, 30, 31, 32, 33, 34, 35, 36, 39, 51,53, and 55 provide the legal authority for operating the WINRS components. VA gathers or creates these records in order to enable it to administer statutory benefits programs to Veterans, Service members, reservists, and their spouses, surviving spouses, and dependents, who file claims for a wide variety of Federal Veteran's benefits administered by VA.

1.6 PRIVACY IMPACT ASSESSMENT: Characterization of the information

Consider the specific data elements collected and discuss the potential privacy risks and what steps, if any are currently being taken to mitigate those identified risks.

Consider the following Fair Information Practice Principles (FIPPs) when assessing the risk to individual privacy:

Principle of Purpose Specification: Explain how the collection ties with the purpose of the underlying mission of the organization and its enabling authority.

Principle of Minimization: Is the information directly relevant and necessary to accomplish the specific purposes of the program?

Principle of Individual Participation: Does the program, to the extent possible and practical, collect information directly from the individual?

Principle of Data Quality and Integrity: Are there policies and procedures for VA to ensure that personally identifiable information is accurate, complete, and current?

This question is related to privacy control AR-1, Governance and Privacy Program, and AR-2, Privacy Impact and Risk Assessment.

Follow the format below when entering your risk assessment:

Privacy Risk: Sensitive Personal Information including personal contact information, service information and benefit information may be released to unauthorized individuals.

Mitigation: The WINRS application adheres to the information security requirements instituted by the VA Office of Information Technology (OIT).

- All employees with access to Veteran's information are required to complete the VA Privacy and Information Security Awareness training and Rules of Behavior annually.
- VA Regional Loan Center (RLC) staff, and VBA VACO Monitoring Unit staff also conduct audits of the lenders loan files (which included auditing funding fee information) as part of ongoing lender and RLC quality audits.

Section 2. Uses of the Information

The following questions are intended to clearly delineate the use of information and the accuracy of the data being used.

2.1 Describe how the information in the system will be used in support of the program's business purpose.

Identify and list each use (both internal and external to VA) of the information collected or maintained.

This question is related to privacy control AP-2, Purpose Specification.

The information collected from the veteran is used to determine the level of benefit received by the veteran. Benefits include compensation, rehabilitation support, and education. Additionally, diagnostic codes and percent of disability determine eligibility for specially adapted housing; determine appropriate modifications under specially adapted housing program. The collected information is used to identify and track a veteran (or a family member such as a surviving spouse), correspond with a veteran, coordinate compensation, education, rehab medical support, or generate historical reports.

The following information is collected:

Name:

Social Security Number:

Date of Birth

Mailing Address

Zip Code

Phone numbers

Email Address

Financial Account Information

Current Medications

Previous Medical Records

2.2 What types of tools are used to analyze data and what type of data may be produced?

Many systems sift through large amounts of information in response to a user inquiry or programmed functions. Systems may help identify areas that were previously not obvious and need additional research by agents, analysts, or other employees. Some systems perform complex analytical tasks resulting in, among other types of data, matching, relational analysis, scoring, reporting, or pattern analysis. Describe any type of analysis the system conducts and the data that is created from the analysis.

If the system creates or makes available new or previously unutilized information about an individual, explain what will be done with the newly derived information. Will it be placed in the individual's existing record? Will a new record be created? Will any action be taken against or for the individual identified because of the newly derived data? If a new record is created, will the newly created information be accessible to Government employees who make determinations about the individual? If so, explain fully under which circumstances and by whom that information will be used.

This question is related to privacy controls DI-1, Data Quality, DI-2, Data Integrity and Integrity Board, and SE-1, Inventory of Personally Identifiable Information

Data are checked for completeness by system audits, manual verifications and annual questionnaires through automated Veteran letters. These letters ask specific questions for verification based on the existing entitlement or benefit the Veteran is receiving. Also, data are updated with each Veteran correspondence. Data are updated as a result of returned mail, or returned direct deposits, or through contact with the Veteran, beneficiary, or power of attorney. All data are matched against supporting claims documentation submitted by the Veteran, widow, or dependent. Certain data such as SSN is verified with the Social Security Administration. Prior to any award or entitlement authorization(s) by the VBA, the Veteran record is manually reviewed, and data validated to ensure correct entitlement has been approved.

2.3 How is the information in the system secured?

2.3a What measures are in place to protect data in transit and at rest?

2.3b If the system is collecting, processing, or retaining Social Security Numbers, are there additional protections in place to protect SSNs?

2.3c How is PII/PHI safeguarded in accordance with OMB Memorandum M-06-15?

This question is related to security and privacy controls SC-9, Transmission Confidentiality, and SC-28, Protection of Information at Rest

CWINRS uses corporate database and uses the VBA specified Tuxedo services to communicate with the corporate database.

Users are required to go through the Common Security Login mechanism to access the application and the data. This is another VBA provided security measure.

SSN are encrypted while in transit only.

2.4 PRIVACY IMPACT ASSESSMENT: Use of the information. How is access to the PII determined? Are criteria, procedures, controls, and responsibilities regarding access documented? Does access require manager approval? Is access to the PII being monitored, tracked, or recorded? Who is responsible for assuring safeguards for the PII?

Describe any types of controls that may be in place to ensure that information is handled in accordance with the uses described above. Example: Describe if training for users of the project covers how to appropriately use information. Describe the disciplinary programs or system controls (i.e. denial of access) that are in place if an individual is inappropriately using the information.

Consider the following FIPPs below to assist in providing a response:

Principle of Transparency: Is the PIA and SORN, if applicable, clear about the uses of the information?

Principle of Use Limitation: Is the use of information contained in the system relevant to the mission of the project?

This question is related to privacy control AR-4, Privacy Monitoring and Auditing, AR-5, Privacy Awareness and Training, and SE-2, Privacy Incident response.

Add answer here:

The System of Records Notice (SORN) for the WINRS application:

- 58VA21/22/2886 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA

The SORN defines the information collected from veterans, use of the information, and how the information is accessed and stored. The information collected is used for determining a veteran's benefits, such as compensation or education.

The security controls for the WINRS application cover 17 security 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 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. The WINRS application team has implemented the required security controls based on the tailoring guidance of NIST Special Publication 800-53 and VA directives or handbooks. VA Records Management Policy and the VA Rules of Behavior in Talent Management System (TMS) govern how veterans' information is used, stored, and protected.

Section 3. Retention of Information

The following questions are intended to outline how long information will be retained after the initial collection.

3.1 What information is retained?

Identify and list all information collected from question 1.1 that is retained by the system. This question is related to privacy controls DM-1, Minimization of Personally Identifiable Information, and DM-2, Data Retention and Disposal

Name
Social Security Number
Date of Birth
Mother's Maiden Name
Mailing Address
Zip Code
Phone Numbers
Email Address
Financial Account Information
Current Medications
Previous Medical Records

3.2 How long is information retained?

In some cases VA may choose to retain files in active status and archive them after a certain period of time. State active file retention periods, as well as archived records, in number of years, for the information and record types. For example, financial data held within your system may have a different retention period than medical records or education records held within your system, please be sure to list each of these retention periods. If the system is using cloud technology, will it be following the NARA approved retention length and schedule?

The VA records officer should be consulted early in the development process to ensure that appropriate retention and destruction schedules are implemented. This question is related to privacy control DM-2, Data Retention and Disposal.

Compensation, pension, and vocational rehabilitation claims folders are retained at the servicing regional office until they are inactive for three years, after which they are transferred to the Records Management Center (RMC) for the life of the Veteran. Official legal documents (e.g., birth certificates, marriage licenses) are returned to the claimant after copies are made for the claimant's file. At the death of the veteran, these records are sent to the Federal Records Center (FRC), and maintained by the National Archives and Records Administration (NARA) in accordance with

NARA policy. Some claims folders are electronically imaged; in which case, the electronic folder is maintained in the same manner as the claims folder. Once a file is electronically imaged and accepted by VBA, its paper contents (with the exception of documents that are the official property of the Department of Defense, and official legal documents), are destroyed in accordance with Records Control Schedule VB-1 Part 1 Section XIII, as authorized by NARA. Documents that are the property of the Department of Defense are either stored at the RMC, or transferred to NARA and maintained in accordance with NARA policy. Vocational Rehabilitation counseling records are maintained until the exhaustion of a Veteran's maximum entitlement or upon the exceeding of a Veteran's delimiting date of eligibility (generally, ten or twelve years from discharge or release from active duty), whichever occurs first, and then destroyed. Automated storage media containing temporary working information are retained until a claim is decided, and then destroyed. All other automated storage media are retained and disposed of in accordance with disposition authorization approved by NARA. Education electronic folders are retained at the servicing Regional Processing Office. Education folders may be destroyed in accordance with the times set forth in the Veterans Benefits Administration Records Management, Records Control Schedule VB-1, Part 1, Section VII, as authorized by NARA. Employee productivity records are maintained for two years after which they are destroyed by shredding or burning.

3.3 Has the retention schedule been approved by the VA records office and the National Archives and Records Administration (NARA)? If so please indicate the name of the records retention schedule.

An approved records schedule must be obtained for any IT system that allows the retrieval of a record via a personal identifier. The VA records officer will assist in providing a proposed schedule. The schedule must be formally offered to NARA for official approval. Once NARA approves the proposed schedule, the VA records officer will notify the system owner. This question is related to privacy control DM-2, Data Retention and Disposal.

The VA procedures for eliminating data are available from the VBA Records Control Schedule, VB1. The retention schedule has been approved by the National Archives and Records Administration (NARA).

- VBA Records Management, Records Control Schedule VB-1, Part 1, Section VII as authorized by NARA

3.4 What are the procedures for the elimination of SPI?

Explain how records are destroyed or eliminated at the end of the retention period. Please give the details of the process. For example, are paper records shredded on site, or by a shredding company and accompanied by a certificate of destruction, etc? This question is related to privacy control DM-2, Data Retention and Disposal

Records/digital information will be eliminated following the sanitization procedures in VA 6300 Records and Information Management and VA 6500.1 Electronic Media Sanitization. Paper records are destroyed on-site weekly. Paper records are shredded using an approved National Security Agency (NSA) High Security Crosscut Shredder from the NSA High Security Crosscut Shredder List.

3.5 Does the system, where feasible, use techniques to minimize the risk to privacy by using PII for research, testing, or training?

Organizations often use PII for testing new applications or information systems prior to deployment. Organizations also use PII for research purposes and for training. These uses of PII increase the risks associated with the unauthorized disclosure or misuse of the information. Please explain what controls have been implemented to protect PII used for testing, training and research. Have policies and procedures been developed to minimize the use of PII for testing, training, and research? This question is related to privacy control DM-3, Minimization of PII Used in Testing, Training and Research

VA Handbook 6500 mandates that Systems under development should not process “live data” or do any real processing in which true business decisions will be based. Test data that is de-identified should be used to test systems and develop systems that have not yet undergone security A&A. Furthermore, systems that are in development (pilot, proof-of-concept, or prototype) should not be attached to VA networks without first being assessed and authorized. Additionally, VA wide Directive 6511 describes the responsibilities, requirements and procedures for eliminating PII or information exempt from release under FOIA from presentations that may be seen by non-VA parties. This Directive includes guidance for conducting privacy reviews of presentations, and the criteria for when presenters must self-certify that their presentations are devoid of PII or information exempt from release under FOIA.

3.6 PRIVACY IMPACT ASSESSMENT: Retention of information

Discuss the risks associated with the length of time data is retained and what steps, if any, are currently being taken to mitigate those identified risks.

While we understand that establishing retention periods for records is a formal process, there are policy considerations behind how long a project keeps information. The longer a project retains information, the longer it needs to secure the information and assure its accuracy and integrity. The proposed schedule should match the requirements of the Privacy Act to keep the minimum amount of PII for the minimum amount of time, while meeting the Federal Records Act. The schedule should align with the stated purpose and mission of the system.

Consider the following FIPPs below to assist in providing a response:

Principle of Minimization: Does the project retain only the information necessary for its purpose? Is the PII retained only for as long as necessary and relevant to fulfill the specified purposes?

Principle of Data Quality and Integrity: Has the PIA described policies and procedures for how PII that is no longer relevant and necessary is purged?

This question is related to privacy controls DM-1, Minimization of Personally Identifiable Information, and DM-2, Data Retention and Disposal.

Follow the format below:

Privacy Risk: As described herein, support systems retain information until that work in progress is completed and data is committed to master systems and records. The master systems retain data on a permanent basis (beyond the actual death of the veteran). If a master system is to be deactivated, critical information is migrated to the new system and the old system along with associated data is archived according to the application disposition worksheet. As such, SPI, PII or PHI may be held for long after the original record was required to be disposed. This extension of retention periods increases the risk that SPI may be breached or otherwise put at risk.

Mitigation: Redaction of some information is required by law and protects the privacy interest of any individual who may have SPI, PII or PHI which may appear in the data and files collected.

Section 4. Internal Sharing/Receiving/Transmitting and Disclosure

The following questions are intended to define the scope of information sharing/receiving/transmitting within VA.

4.1 With which internal organizations is information shared/received/transmitted? What information is shared/received/transmitted, and for what purpose? How is the information transmitted?

NOTE: Question 3.9 (second table) on Privacy Threshold Analysis should be used to answer this question.

Identify and list the names of any program offices, contractor-supported IT systems, and any other organization or IT system within VA with which information is shared.

State the purpose for the internal sharing. If you have specific authority to share the information, provide a citation to the authority.

For each interface with a system outside your program office, state what specific data elements (PII/PHI) are shared with the specific program office, contractor-supported IT system, and any other organization or IT system within VA.

Describe how the information is transmitted. For example, is the information transmitted electronically, by paper, or by some other means? Is the information shared in bulk, on a case-by-case basis, or does the sharing partner have direct access to the information? This question is related to privacy controls AP-2, Purpose Specification, AR-3, Privacy Requirements for Contractors and Service Providers, AR-8, Accounting of Disclosures, TR-1, Privacy Notice, and UL-1, Internal Use.

Data Shared with Internal Organizations

List the Program Office or IT System information is shared/received with	List the purpose of the information being shared /received with the specified program office or IT system	List the specific PII/PHI data elements that are processed (shared/received/transmitted) with the Program Office or IT system	Describe the method of transmittal
VBA counselors at remote offices.	Determine eligibility for Veteran compensation.	Name, Social Security Number, Date of Birth, Mailing Address, Zip Code, Phone Numbers, Email Address, Financial Account Information, Health Insurance Beneficiary Numbers, Current Medications, Previous Medical Records	Electronic transmission methods in accordance with VA policy.
Benefits Delivery Network (BND)	BDN is used by VWINRS to query other benefit information to verify benefits status	Name, Social Security Number, Date of Birth, Mailing Address, Zip Code, Phone Numbers, Email Address, Financial Account Information, Health Insurance Beneficiary Numbers, Current Medications, Previous Medical Records	Electronic Transmission
Financial Management System (FMS)	Payment system for entitled veteran, veterans, and service providers	Name, Social Security Number, Date of Birth, Mailing Address, Zip Code, Phone Numbers, Email Address, Financial Account Information, Health Insurance Beneficiary Numbers, Current	Electronic Transmission

<i>List the Program Office or IT System information is shared/received with</i>	<i>List the purpose of the information being shared /received with the specified program office or IT system</i>	<i>List the specific PII/PHI data elements that are processed (shared/received/transmitted) with the Program Office or IT system</i>	<i>Describe the method of transmittal</i>
		Medications, Previous Medical Records	
Corporate Data Warehouse (CDW)	CDW is used by CWINRS to query other benefit information to verify benefits status	Name, Social Security Number, Date of Birth, Mailing Address, Zip Code, Phone Numbers, Email Address, Financial Account Information, Health Insurance Beneficiary Numbers, Current Medications, Previous Medical Records	Electronic Transmission

4.2 PRIVACY IMPACT ASSESSMENT: Internal sharing and disclosure

*Discuss the privacy risks associated with the sharing of information within the Department and what steps, if any, are currently being taken to mitigate those identified risks.
This question is related to privacy control UL-1, Internal Use.*

Follow the format below:

Privacy Risk: There is a risk that WINRS data may be shared with unauthorized users or authorized users may share it with other unauthorized individuals.

Mitigation: The VA provides Windows and Oracle access controls along with the following security controls: Audit and Accountability, Awareness Training, Security Assessment and Authorization, Incident Response, Personnel Security, and Identification and Authentication.

- All personnel with access to Veteran’s information are required to complete the VA Privacy and Information Security Awareness training and Rules of Behavior annually.
- The WINRS adheres to all information security requirements instituted by the VA Office of Information Technology (OIT).
- Information is shared in accordance with VA Handbook 6500.

Section 5. External Sharing/Receiving and Disclosure

The following questions are intended to define the content, scope, and authority for information sharing external to VA, which includes Federal, State, and local governments, and the private sector.

5.1 With which external organizations (outside VA) is information shared/received? What information is shared/received, and for what purpose? How is the information transmitted and what measures are taken to ensure it is secure?

Is the sharing of information outside the agency compatible with the original collection? If so, is it covered by an appropriate routine use in a SORN? If not, please describe under what legal mechanism the IT system is allowed to share the information in identifiable form or personally identifiable information outside of VA.

NOTE: Question 3.10 on Privacy Threshold Analysis should be used to answer this question.

Identify and list the names of any Federal, State, or local government agency or private sector organization with which information is shared.

For each interface with a system outside VA, state what specific data elements (PII/PHI) are shared with each specific partner.

What legal mechanisms, authoritative agreements, documentation, or policies are in place detailing the extent of the sharing and the duties of each party? For example, is the sharing of data compatible with your SORN? Then list the SORN and the applicable routine use from the SORN. Is there a Memorandum of Understanding (MOU), Computer Matching Agreement (CMA), or law that mandates the sharing of this information?

Describe how the information is transmitted to entities external to VA and what security measures have been taken to protect it during transmission.

This question is related to privacy control UL-2, Information Sharing with Third Parties

Data Shared with External Organizations

<i>List External Program Office or IT System information is shared/received with</i>	<i>List the purpose of information being shared / received / transmitted with the specified program office or IT system</i>	<i>List the specific PII/PHI data elements that are processed (shared/received/transmitted)with the Program or IT system</i>	<i>List the legal authority, binding agreement, SORN routine use, etc. that permit external sharing (can be more than one)</i>	<i>List the method of transmission and the measures in place to secure data</i>
N/A	N/A	N/A	N/A	N/A

5.2 PRIVACY IMPACT ASSESSMENT: External sharing and disclosure

Discuss the privacy risks associated with the sharing of information outside the Department and what steps, if any, are currently being taken to mitigate those identified risks.

Discuss whether access controls have been implemented and whether audit logs are regularly reviewed to ensure appropriate sharing outside of the Department. For example, is there a Memorandum Of Understanding (MOU), contract, or agreement in place with outside agencies or foreign governments.

Discuss how the sharing of information outside of the Department is compatible with the stated purpose and use of the original collection.

This question is related to privacy control AR-2, Privacy Impact and Risk Assessment, AR-3, Privacy Requirements for Contractors and Service Providers, and AR-4, Privacy Monitoring and Auditing

Follow the format below:

Privacy Risk: N/A

Mitigation: N/A

Section 6. Notice

The following questions are directed at providing notice to the individual of the scope of information collected, the right to consent to uses of the information, and the right to decline to provide information.

6.1 Was notice provided to the individual before collection of the information? If yes, please provide a copy of the notice as an appendix. (A notice may include a posted privacy policy, a Privacy Act notice on forms, or a system of records notice published in the Federal Register.) If notice was not provided, why not?

This question is directed at the notice provided before collection of the information. This refers to whether the person is aware that his or her information is going to be collected. A notice may include a posted privacy policy, a Privacy Act statement on forms, or a SORN published in the Federal Register. If notice was provided in the Federal Register, provide the citation.

If notice was not provided, explain why. If it was provided, attach a copy of the current notice.

Describe how the notice provided for the collection of information is adequate to inform those affected by the system that their information has been collected and is being used appropriately. Provide information on any notice provided on forms or on Web sites associated with the collection.

This question is related to privacy control TR-1, Privacy Notice, and TR-2, System of Records Notices and Privacy Act Statements, and TR-3, Dissemination of Privacy Program Information.

The Department of Veterans Affairs provides public notice that the system does exist. This notice is

provided in 2 ways:

1. The System of Record Notice (SORN):

a. 58VA21/22/2886 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA

2. This Privacy Impact Assessment (PIA) also serves as notice of the WINRS As required by the eGovernment Act of 2002, Pub.L. 107–347 §208(b)(1)(B)(iii), the Department of Veterans Affairs “after completion of the [PIA] under clause (ii), make the privacy impact assessment publicly available through the website of the agency, publication in the Federal Register, or other means.”

6.2 Do individuals have the opportunity and right to decline to provide information? If so, is a penalty or denial of service attached?

This question is directed at whether the person from or about whom information is collected can decline to provide the information and if so, whether a penalty or denial of service is attached.

This question is related to privacy control IP-1, Consent, IP-2, Individual Access, and IP-3, Redress

Individuals have the right to decline providing information to VA personnel. However, failure to provide information may result in denial of access to the health care system. Veterans and their family or guardian (spouse, children, parents, grandparents, etc.) may not decline or request their information not be included as part to determine eligibility and entitlement for VA compensation and pension benefits and also designate a guardian to manage the VA compensation and pension benefits.

6.3 Do individuals have the right to consent to particular uses of the information? If so, how does the individual exercise the right?

This question is directed at whether an individual may provide consent for specific uses or the consent is given to cover all uses (current or potential) of his or her information. If specific consent is required, how would the individual consent to each use?

This question is related to privacy control IP-1, Consent

While individuals may have the ability to consent to various uses of their information at the VA, they are not required to consent to the use of their information as part to determine eligibility and entitlement for VA compensation and pension benefits proceeding. 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.

6.4 PRIVACY IMPACT ASSESSMENT: Notice

Describe the potential risks associated with potentially insufficient notice and what steps, if any, are currently being taken to mitigate those identified risks.

Consider the following FIPPs below to assist in providing a response:

Principle of Transparency: Has sufficient notice been provided to the individual?

Principle of Use Limitation: Is the information used only for the purpose for which notice was provided either directly to the individual or through a public notice? What procedures are in place to ensure that information is used only for the purpose articulated in the notice?

This question is related to privacy control TR-1, Privacy Notice, AR-2, Privacy Impact and Risk Assessment, and UL-1, Internal Use

Follow the format below:

Privacy Risk: There is a risk that members of the public may not know that the WINRS application exists within the Department of Veterans Affairs.

Mitigation: The VA mitigates this risk by providing the public with two forms of notice that the system exists, as discussed in detail in question 6.1, including the Privacy Act statement and a System of Record Notice.

Section 7. Access, Redress, and Correction

The following questions are directed at an individual's ability to ensure the accuracy of the information collected about him or her.

7.1 What are the procedures that allow individuals to gain access to their information?

Cite any procedures or regulations your program has in place that allow access to information. These procedures, at a minimum, should include the agency's FOIA/Privacy Act practices, but may also include additional access provisions. For example, if your program has a customer satisfaction unit, that information, along with phone and email contact information, should be listed in this section in addition to the agency's procedures. See 5 CFR 294 and the VA FOIA Web page at <http://www.foia.va.gov/> to obtain information about FOIA points of contact and information about agency FOIA processes.

If the system is exempt from the access provisions of the Privacy Act, please explain the basis for the exemption or cite the source where this explanation may be found, for example, a Final Rule published in the Code of Federal Regulations (CFR).

If the system is not a Privacy Act system, please explain what procedures and regulations are in place that covers an individual gaining access to his or her information.

This question is related to privacy control IP-2, Individual Access, and AR-8, Accounting of Disclosures.

Individuals wishing to obtain more information about access, redress and record correction of Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records should contact the Department of Veteran’s Affairs regional as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA”

58VA21/22/28 86 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA (11/21/2021). This SORN can be found online at: https://www.oprm.va.gov/docs/Current_SORN_List_12_3_2021.pdf

7.2 What are the procedures for correcting inaccurate or erroneous information?

Describe the procedures and provide contact information for the appropriate person to whom such issues should be addressed. If the correction procedures are the same as those given in question 7.1, state as much.

This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

Individuals wishing to obtain more information about access, redress and record correction of Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records should contact the Department of Veteran’s Affairs regional office as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA” 58VA21/22/28 86 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA (11/21/2021). This SORN can be found online at:

https://www.oprm.va.gov/docs/Current_SORN_List_12_3_2021.pdf

7.3 How are individuals notified of the procedures for correcting their information?

How are individuals made aware of the procedures for correcting his or her information? This may be through notice at collection or other similar means. This question is meant to address the risk that

even if procedures exist to correct information, if an individual is not made fully aware of the existence of those procedures, then the benefits of the procedures are significantly weakened. This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

Individuals seeking information regarding access to and contesting of VA records may write, call or visit the nearest VA regional office. Address locations are listed in VA Appendix 1, as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA” 58VA21/22/28 86 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA (11/21/2021). This SORN can be found online at: https://www.oprm.va.gov/docs/Current_SORN_List_12_3_2021.pdf

7.4 If no formal redress is provided, what alternatives are available to the individual?

Redress is the process by which an individual gains access to his or her records and seeks corrections or amendments to those records. Redress may be provided through the Privacy Act and Freedom of Information Act (FOIA), and also by other processes specific to a program, system, or group of systems.

This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

Example: Some projects allow users to directly access and correct/update their information online. This helps ensure data accuracy.

Individuals seeking information regarding access to and contesting of VA records may write, call or visit the nearest VA regional office. Address locations are listed in VA Appendix 1, as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA” 58VA21/22/28 86 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA (11/21/2021). This SORN can be found online at: https://www.oprm.va.gov/docs/Current_SORN_List_12_3_2021.pdf

7.5 PRIVACY IMPACT ASSESSMENT: Access, redress, and correction

Discuss what risks there currently are related to the Department’s access, redress, and correction policies and procedures for this system and what, if any, steps have been taken to mitigate those risks. For example, if a project does not allow individual access, the risk of inaccurate data needs to be discussed in light of the purpose of the project. For example, providing access to ongoing law enforcement activities could negatively impact the program’s effectiveness because the individuals involved might change their behavior.

Consider the following FIPPs below to assist in providing a response:

Principle of Individual Participation: Is the individual provided with the ability to find out whether a project maintains a record relating to him?

Principle of Individual Participation: If access and/or correction is denied, then is the individual provided notice as to why the denial was made and how to challenge such a denial?

Principle of Individual Participation: Is there a mechanism by which an individual is able to prevent information about him obtained for one purpose from being used for other purposes without his knowledge?

This question is related to privacy control IP-3, Redress.

Follow the format below:

Privacy Risk: There is a risk that individuals may seek to access or redress records about them held by the VA Office and become frustrated with the results of their attempt.

Mitigation: By publishing this PIA and the applicable SORN, the VA makes the public aware of the unique status of applications and evidence files, such as those stored on the Virtual VA platform. Furthermore, this document and the SORN provide the point of contact for members of the public who have questions or concerns about applications and evidence files.

Section 8. Technical Access and Security

The following questions are intended to describe technical safeguards and security measures.

8.1 What procedures are in place to determine which users may access the system, and are they documented?

Describe the process by which an individual receives access to the system.

Identify users from other agencies who may have access to the system and under what roles these individuals have access to the system. Who establishes the criteria for what PII can be shared?

Describe the different roles in general terms that have been created to provide access to the system. For example, certain users may have "read-only" access while others may be permitted to make certain amendments or changes to the information.

This question is related to privacy control AR-7, Privacy-Enhanced System Design and Development.

Per VA Directive and Handbook 6330, every 5 years the Office of Information Technology (OIT) develops, disseminates, and reviews/updates a formal, documented policy that addresses purpose, scope, roles, responsibilities, management commitment, coordination among organizational entities, and compliance; along with formal, documented procedures to facilitate the implementation of the control policy and associated controls.

OIT documents and monitors individual information system security training activities including basic security awareness training and specific information system security training; and retains individual training records for 7 years. This documentation and monitoring is performed through the use of TMS. Users of VA/VBA information systems gain access through an EO LAN control domain. The EO LAN personnel use Group Policy Objects (GPO) to manage accounts. A GPO is a set of rules which control the working environment of user accounts and computer accounts. The GPO provides the centralized management and configuration of operating systems, applications and users' settings in an Active Directory environment. The GPO restricts certain actions that may pose potential security risks.

8.2 Will VA contractors have access to the system and the PII? If yes, what involvement will contractors have with the design and maintenance of the system? Has a contractor confidentiality agreement, Business Associate Agreement (BAA), or a Non-Disclosure Agreement (NDA) been developed for contractors who work on the system?

If so, how frequently are contracts reviewed and by whom? Describe the necessity of the access provided to contractors to the system and whether clearance is required. If Privacy Roles and Responsibilities have been established to restrict certain users to different access levels, please describe the roles and associated access levels. Explain the need for VA contractors to have access to the PII.

This question is related to privacy control AR-3, Privacy Requirements for Contractors and Service Providers.

OI&T provides basic security awareness training to all information system users (including managers, senior executives, and contractors) of VA information systems or VA sensitive information as part of initial training for new users, when required by system changes and annually thereafter.

8.3 Describe what privacy training is provided to users either generally or specifically relevant to the program or system?

VA offers privacy and security training. Each program or system may offer training specific to the program or system that touches on information handling procedures and sensitivity of information. Please describe how individuals who have access to PII are trained to handle it appropriately. This question is related to privacy control AR-5, Privacy Awareness and Training.

Personnel that will be accessing information systems must read and acknowledge their receipt and acceptance of the VA National Rules of Behavior (ROB) or VA Contractor's ROB prior to gaining access to any VA information system or sensitive information. The rules are included as part of the security awareness training which all personnel must complete via the VA's Talent Management System (TMS). After the user's initial acceptance of the Rules, the user must re-

affirm their acceptance annually as part of the security awareness training. Acceptance is obtained via electronic acknowledgment and is tracked through the TMS system.

8.4 Has Authorization and Accreditation (A&A) been completed for the system?

If Yes, provide:

1. *The Security Plan Status,*
2. *The Security Plan Status Date,*
3. *The Authorization Status,*
4. *The Authorization Date,*
5. *The Authorization Termination Date,*
6. *The Risk Review Completion Date,*
7. *The FIPS 199 classification of the system (LOW/MODERATE/HIGH).*

Please note that all systems containing SPI are categorized at a minimum level of “moderate” under Federal Information Processing Standards Publication 199.

*If No or In Process, provide your **Initial Operating Capability (IOC) date.***

The Vocational Rehabilitation and Employment (WINRS or CWI) application was granted a full ATO on January 11, 2021 and is currently undergoing annual continuous monitoring review. The next ATO review is due April 6, 2022.

Section 9 – Technology Usage

The following questions are used to identify the technologies being used by the IT system or project.

9.1 Does the system use cloud technology? If so, what cloud model is being utilized?

If so, Does the system have a FedRAMP provisional or agency authorization? If the system does use cloud technology, but does not have FedRAMP authorization, explain how the Cloud Service Provider (CSP) solution was assessed and what FedRAMP documents and processes were used for the assessment in order to comply with VA Handbook 6517. Types of cloud models include: Software as a Service (SaaS), Infrastructure as a Service (IaaS), Platform as a Service (PaaS), Commercial off the Shelf (COTS).

This question is related to privacy control UL-1, Information Sharing with Third Parties.

Note: For systems utilizing the VA Enterprise Cloud (VAEC), no further responses are required after 9.1.

The system uses the VBA Corporate Database and does not use any cloud technology to store data.

9.2 Does the contract with the Cloud Service Provider, Contractors and VA customers establish who has ownership rights over data including PII? (Provide contract number and supporting information about PII/PHI from the contract)

This question is related to privacy control AR-3, Privacy Requirements for Contractors and Service Providers.

N/A

9.3 Will the CSP collect any ancillary data and if so, who has ownership over the ancillary data?

Per NIST 800-144, cloud providers hold significant details about the accounts of cloud consumers that could be compromised and used in subsequent attacks. Ancillary data also involves information the cloud provider collects or produces about customer-related activity in the cloud. It includes data collected to meter and charge for consumption of resources, logs and audit trails, and other such metadata that is generated and accumulated within the cloud environment.

This question is related to privacy control DI-1, Data Quality.

N/A

9.4 NIST 800-144 states, “Organizations are ultimately accountable for the security and privacy of data held by a cloud provider on their behalf.” Is this principle described in contracts with customers? Why or why not?

What are the roles and responsibilities involved between the organization and cloud provider, particularly with respect to managing risks and ensuring organizational requirements are met?

This question is related to privacy control AR-3, Privacy Requirements for Contractors and Service Providers.

N/A

9.5 If the system is utilizing Robotics Process Automation (RPA), please describe the role of the bots.

Robotic Process Automation is the use of software scripts to perform tasks as an automated process that executes in parallel with or in place of human input. For example, will the automation move or touch PII/PHI information. RPA may also be referred to as “Bots” or Artificial Intelligence (AI).

N/A

Section 10. References

Summary of Privacy Controls by Family

Summary of Privacy Controls by Family

ID	Privacy Controls
AP	Authority and Purpose
AP-1	Authority to Collect
AP-2	Purpose Specification
AR	Accountability, Audit, and Risk Management
AR-1	Governance and Privacy Program
AR-2	Privacy Impact and Risk Assessment
AR-3	Privacy Requirements for Contractors and Service Providers
AR-4	Privacy Monitoring and Auditing
AR-5	Privacy Awareness and Training
AR-7	Privacy-Enhanced System Design and Development
AR-8	Accounting of Disclosures
DI	Data Quality and Integrity
DI-1	Data Quality
DI-2	Data Integrity and Data Integrity Board
DM	Data Minimization and Retention
DM-1	Minimization of Personally Identifiable Information
DM-2	Data Retention and Disposal
DM-3	Minimization of PII Used in Testing, Training, and Research
IP	Individual Participation and Redress
IP-1	Consent
IP-2	Individual Access
IP-3	Redress
IP-4	Complaint Management
SE	Security
SE-1	Inventory of Personally Identifiable Information
SE-2	Privacy Incident Response
TR	Transparency
TR-1	Privacy Notice
TR-2	System of Records Notices and Privacy Act Statements
TR-3	Dissemination of Privacy Program Information
UL	Use Limitation

ID	Privacy Controls
UL-1	Internal Use
UL-2	Information Sharing with Third Parties

Signature of Responsible Officials

The individuals below attest that the information provided in this Privacy Impact Assessment is true and accurate.

Privacy Officer, Rita Grewal

Information Systems Security Officer, Derrick Martinez

Information Systems Owner, Paul Zeien

APPENDIX A-6.1

Please provide a link to the notice or verbiage referred to in Section 6 (a notice may include a posted privacy policy, a Privacy Act notice on forms).

58VA21/22/2886 FR 61858: SOR Name: Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA

https://www.oprm.va.gov/docs/Current_SORN_List_1_7_2022.pdf