Privacy Impact Assessment Template

CMI (CONTENT MANAGEMENT SYSTEM)  
(SYSTEM NAME)

This template is used when the Chief Privacy Officer determines that the system contains Personally Identifiable Information and a more in-depth assessment is required.

Complete and sign this template and forward to the Chief Privacy Officer.

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A Privacy Impact Assessment (PIA) is an analysis of how information in identifiable form (IIF) is handled. PIAs are to be completed when FHFA: 1) develops or procures an IT system or project that collects, maintains, or disseminates IIF from or about members of the public; or 2) initiates a new electronic collection of IIF for 10 or more members of the public. PIAs are not required for collections of information from Federal employees. IIF about government personnel generally is protected by the Privacy Act; however the Office of Management and Budget (OMB) encourages agencies to conduct PIAs on these systems as appropriate. System owners and developers are responsible for completing the PIA. The guidance below has been provided to help system owners and developers complete a PIA.

Overview

- In this section, provide a thorough and clear overview of the system and give the reader the appropriate context to understand the responses. Some questions to consider include:
  - What is the purpose of the IT system?
  - What will be the primary uses of the system?
  - How will this support the program’s mission?
- This section fulfills the E-Government Act’s requirement for an introduction for members of the public who may be reading the PIA. PIAs may be made publicly available unless a determination is made to not make the PIA available because publication would raise security concerns and/or reveal classified or sensitive information.

FOR A PIA COMPLETE ALL SECTIONS.

FOR A MODIFIED PIA COMPLETE THE FOLLOWING SECTIONS ONLY:

- Overview
- Section 1
- Section 2
- Section 6

Section 1.0 Characterization of the Information

- Identify if the system contains information about individuals, versus statistical, geographical, or financial information, with no link to a name or other identifier, such as, home address, social security number, account number, home, mobile or facsimile telephone number, or personal e-mail address.
- Examples of sources of the information include information that comes from an individual applying for a loan or mortgage, or other forms that an individual completes. A question to consider include:
  - Where does the data originate? (e.g., FHFA, Office of Personnel Management, Regulated Entities, other Financial Institutions, or third parties. A third party is usually a non-Federal person or entity, which may be a source of data/information (e.g., a bank, an internet service provider, or an organization such as Neighborworks).
- If the system collects information from 10 or more members of the public, ensure that the agency has received OMB prior approval to do so or determine whether OMB’s approval is needed to collect the information in accordance with the Paperwork Reduction Act. If you are unsure of this last requirement, contact the Office of General Counsel for assistance.

Section 2.0 Uses of the Information
• Identify the primary uses of the information and how the information supports the Agency’s or Program’s mission.

• Identify the controls that are in place to ensure the information will be used for the manner for which it was collected. For example, access to the information will be restricted to a limited number of staff who use the data for their specific program use.

Section 3.0 Retention

• The Privacy Act requires an agency to address the retention and disposal of information about individuals. This retention information is published in the Privacy Act System of Record Notice (SORN).

• The retention periods of data/records that FHFA manages are contained in either the National Archives and Records Administration (NARA) General Records Schedule (GRS) or FHFA’s Records Schedule. For the data being created/maintained in the system, the records schedules are the authoritative sources for this information. For assistance, contact FHFA’s Records Management Office.

• Disposing of the data at the end of the retention period is the last state of life-cycle management. Records subject to the Privacy Act have special disposal procedures (e.g. shredding of paper documents).

Section 4.0 Notice, Access, Redress and Correction

• The Privacy Act requires that "each agency that maintains a system of记录 shall maintain in its records only such information about an individual as is relevant and necessary to accomplish a purpose of the agency required to be accomplished by statute or by executive order of the President." 5 U.S.C. 552a(e)(1).

• Data can be retrieved in a number of ways, but there is usually a personal identifier associated with a record. If the system retrieves information by an individual’s name or other personal identifier (e.g. social security number) it is a Privacy Act system and may need a SORN published in the Federal Register. The system may already have a Privacy Act SORN. If you do not have a published SORN, or are unsure whether one exists, contact the Privacy Act Officer. The Privacy Act requires that any amendments to an existing system must also be addressed in a Federal Register notice.

• If a name or other personal identifier is not used to retrieve information, it is possible that the system is not a Privacy Act system. However, even though information may not fall under the Privacy Act’s protection and requirements, certain information may still be protected from disclosure under the Freedom of Information Act.

• The agency has developed and published an agency specific Privacy Act Rule in the Federal Register (12 CFR Part 1204) that explains how individuals can gain access to information about themselves and correct errors, if appropriate.

• Any employee who knowingly and willfully maintains a systems of records without meeting the Privacy Act notice requirements (5 U.S.C. 552a(e)(4)) is guilty of a misdemeanor and may be fined up to $5,000.

Section 5.0 Sharing and Disclosure

• If it is unknown whether or not systems share data, contact either the business owner of the data, or the IT specialist who knows what interfaces exist between the systems/applications. As an example, if your system/application shares data with another system/application, ask yourself whether you have access to the data in the interfaced system/application. If so, then your answer is yes and an explanation is needed.

• Also consider “other” users who may not be obvious as those listed, such as GAO or the Inspector General. “Other” may also include database administrators or IT Security Officers. Also include organizations listed in the Privacy Act system of records notice under the “Routine Use” section.
when a Privacy Act system of records notice is required. The more comprehensive the list, the better it is.

- You must first review the SORN to determine whether any information that may come from an existing SORN allows that information to be exchanged and used for these new purposes or uses. There are restrictions on the use and disclosure of information that are set forth in a SORN.

Section 6.0 Access and Security

- Access to data by a user (i.e. employee or contractor personnel) within FHFA is determined on a “need-to-know” basis. This means to authorized employees or contractor personnel who have a need for the information to perform their duties may be granted access to the information. Factors to consider in making this determination include the user’s job requirements including supervisory responsibilities.
- The criteria, procedures, controls and responsibilities regarding access must be documented in order to comply with the intent of the Federal Information Security Management Act of 2002 for standards and guidelines on security and privacy.
- The system owner is responsible for ensuring that access to information and data is restricted to authorized personnel. Usually, a user is only given access to certain information that is needed to perform an official function. Care should be given to avoid “open systems” where all information can be viewed by all users. System administrators may be afforded access to all of the data depending upon the system and/or application. However, restrict access when users do not need to have access to all the data.
- When a contract provides for the operation of a system on behalf of FHFA, the Privacy Act requirements must be applied to such a system. Contact the Contracting Officer or Contracting Officer’s Technical Representative to determine whether the contract contains the Privacy Act clause and the requirements thereunder.
- The IT Security Certificate and Accreditation (C&A) process requires a system security plan that identifies the technical controls associated with identification and authentication of users. Certain laws and regulations require monitoring of systems to ensure that only authorized users can access the system for authorized reasons. In doing so, consider what controls are in place to ensure that only those authorized to monitor the system can in fact monitor use of the system. For example, business rules, internal instructions, and posting Privacy Warning Notices address access controls and violations for unauthorized monitoring. System Owners are responsible for ensuring that no unauthorized monitoring is occurring.
- The IT Security Plan describes the practice of applying logical access controls. Logical access controls are system-based means by which the ability to access a system is either explicitly enabled or restricted. System Owners are responsible for ensuring that no unauthorized access is occurring.
- The IT Security Plan describes the practice of audit trails. An audit trail maintains a record of system activity and user activity including invalid logon attempts, access to data and monitoring. The C&A process requires a system security plan outlining the implementation of the technical controls associated with identification and authentication.
- According to OMB Circulars A-123 and A-130, every system/application/process that uses data must have controls in place to prevent the misuse of the data by those having access to the data. For instance, in computerized systems the Security Information Record (SIR) is part of the Core Storage Terminal Table. The SIR is the automated tool that identifies and authenticates an individual for the system and is transparent to the user. Describe these processes in response to this question.
- All employees, including contractors, have requirements for protecting information in Privacy Act systems. Describe the controls in place, including any privacy and security awareness controls such as training materials, to protect the information.
Overview

This section provides an overview of the system and addresses the following:

- The system name and the division/office that owns the system;
- The purpose of the program, system, or technology and how it relates to the agency’s mission; and
- A general description of the information in the system.

Date submitted for review:

Name of System: CMI (Content Management System)

System Owner(s)(including Division/Office):

<table>
<thead>
<tr>
<th>Name</th>
<th>E-mail</th>
<th>Phone #</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
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</tr>
</tbody>
</table>

System Overview: Briefly describe the purpose of the program, system, or technology, and the information in the system, and how it relates to the agency’s mission.
This system is a web application that allows the appropriate individuals to update information published on our public web site and intranet sites. The application allows individuals to publish news articles, HPI information, testimonies, and other information for the web site. The CMI controls the FHFA public web site, the FHFA Emergency web site, and the FHFA intranet site. The application uses Active Directory integrated authentication to control access to each specific page. In addition it contains built-in workflow functionality that allows each page to go through a QA process before it is published.

Personal information is limited solely to a feature of the application which allows end users to be notified when new information is posted to the site via email. The web site user may submit his/her email address (and email address only) to be added to a mailing list. The user may unsubscribe from the list at any time. The information collected (email addresses) is used for no other purposes.

Section 1.0 Characterization of the Information

The following questions define the scope of the information requested and/or collected as well as reasons for its collection as part of the program, system, or technology being developed. The questions address all information collected, with more emphasis provided on the collection of personally identifiable information (PII), such as name, address, social security number, date of birth, financial information, etc.

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<tr>
<th>#</th>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>1.1</td>
<td>What information is collected, used, disseminated, or maintained in the system?</td>
<td>The email address of the user, if the user would like to be notified of page changes.</td>
</tr>
<tr>
<td>1.2</td>
<td>What are the sources of the information in the system?</td>
<td>The source of the information is the end user.</td>
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<tr>
<td>1.3</td>
<td>Why is the information being collected, used, disseminated, or maintained?</td>
<td>If the user would like to be notified of changes in the web page, they may submit his/her email address to an address list of individuals to be automatically notified when the page is updated.</td>
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</tbody>
</table>
How is the information collected? The information is collected via a form on the website.

Given the amount and type of data collected, what risks to an individual’s privacy are associated with the data? All that is collected is an email address. No other information (including name) is collected.

Section 2.0 Uses of the Information

The following questions delineate the use of information and the accuracy of the data being used.

Describe the uses of information. The information is used to send the user an email when the web page’s content is updated.

Describe any types of controls or safeguards in place to ensure that information is only used in the manner for which it was collected. As per our privacy guidelines, the information is only used to provide updates to the web site to those users interested in receiving it. This information is not available to any other system or used for any other purposes.

Section 3.0 Retention

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

How long is information retained?

Has a retention schedule been approved by the Agency’s Records Management Officer and NARA? If yes, provide the corresponding GRS or Agency specific Records Schedule number.

Discuss the risks associated with the length of time data is retained and how those risks are mitigated.
Section 4.0 Notice, Access, Redress and Correction

The following questions are directed at notice to the individual, the individual’s right to consent to uses of the information, the individual’s right to decline to provide information, and an individual’s ability to ensure the accuracy of the information collected about them.

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<tbody>
<tr>
<td>4.1</td>
<td>Has a System of Record Notice (SORN) been created? If so, provide the SORN name and number.</td>
<td></td>
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<tr>
<td>4.2</td>
<td>Was notice provided to the individual prior to collection of information?</td>
<td></td>
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<tr>
<td>4.3</td>
<td>Do individuals have the opportunity and/or right to decline to provide information?</td>
<td></td>
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<tr>
<td>4.4</td>
<td>What are the procedures that allow individuals to gain access to their information?</td>
<td></td>
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<tr>
<td>4.5</td>
<td>What are the procedures for correcting inaccurate or erroneous information?</td>
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Section 5.0 Sharing and Disclosure

The following questions define the content, scope, and authority for information sharing.

<table>
<thead>
<tr>
<th>#</th>
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<tbody>
<tr>
<td>5.1</td>
<td>With which internal organization(s) is the information shared? What information is shared and for what purpose?</td>
<td></td>
</tr>
<tr>
<td>5.2</td>
<td>With which external organization(s) is the information shared? What information is shared, and for what purpose? External organization(s) include Federal, state and local government, and the private sector.</td>
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</tbody>
</table>
**Section 6.0 Technical Access and Security**

The following questions describe technical safeguards and security measures.

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<tbody>
<tr>
<td>5.3</td>
<td>Is the sharing of PII outside the agency compatible with the original information collection? If so, is it covered by an appropriate routine use in a SORN? If so, describe. If not, describe under what legal authority the program or system is allowed to share PII outside of the agency.</td>
<td></td>
</tr>
<tr>
<td>5.4</td>
<td>Given the external sharing, explain the privacy risks identified and describe how they were/are mitigated.</td>
<td></td>
</tr>
<tr>
<td>6.1</td>
<td>What procedures are in place to determine which users may access the system? Are these procedures documented in writing? If so, attach a copy to this PIA.</td>
<td>Access to the system is limited through Active Directory security groups. User authentication is provided through integrated Kerberos credentials. Only users within the specified user group may edit the page or view the user notification email list.</td>
</tr>
<tr>
<td>6.2</td>
<td>Will contractors have access to the system? If yes, how will contractors gain access to the system? How will the agency control their access and use of information? Are there procedures documented in writing? If so, attach a copy to this PIA.</td>
<td>Access to the email list is granted to users within an Active Directory security group specific to the webpage. Membership of this group is provided through the Access Control system.</td>
</tr>
<tr>
<td>6.3</td>
<td>Describe the training that is provided to users either generally or specifically relevant to the program or system?</td>
<td>Users of the CMI have access to the CMI User’s manual and training, as necessary.</td>
</tr>
<tr>
<td>6.4</td>
<td>What technical safeguards are in place to protect the data?</td>
<td>This information is stored on our internal production SQL Server, located behind our firewall. Authentication is provided through Windows integrated Kerberos authentication. Web Page groups are controlled through Active Directory security groups.</td>
</tr>
<tr>
<td>6.5</td>
<td>What auditing measures are in place to protect the data?</td>
<td>All access to the CMI system is audited into Audit Central. This provides the user id, timestamp, IP address and actions performed by the user during the session.</td>
</tr>
<tr>
<td>#</td>
<td>Question</td>
<td>Response</td>
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<tr>
<td>6.6</td>
<td>Has a C&amp;A been completed for the system or systems supporting the program? If so, provide the date the last C&amp;A was completed.</td>
<td>No. This system falls under the General Support System.</td>
</tr>
</tbody>
</table>

**Signatures**

Amy Lakroune  
System Owner (Printed Name)  
1/19/2012  
System Owner (Signature)

J. Jute Corra  
System Developer (Printed Name)  
1/23/2012  
System Developer (Signature)

Ralph Mosis  
Chief Information Security Officer (Printed Name)  
1/23/2012  
Chief Information Security Officer (Signature)

R. Kevin Winker  
Chief Information Officer (Printed Name)  
1/27/12  
Chief Information Officer (Signature)

David A. Lee  
Chief Privacy Officer (Printed Name)  
1/30/12  
Chief Privacy Officer (Signature)