

PRIVACY IMPACT ASSESSMENT (PIA)

For the

Department of Defense Suicide Event Report (DoDSER) System

Defense Health Agency (DHA)

SECTION 1: IS A PIA REQUIRED?

a. Will this Department of Defense (DoD) information system or electronic collection	of
information (referred to as an "electronic collection" for the purpose of this form) co	ollect,
maintain, use, and/or disseminate PII about members of the public, Federal personn	el,
contractors or foreign nationals employed at U.S. military facilities internationally?	Choose
one option from the choices below. (Choose (3) for foreign nationals).	
T (4) M (to the second solution	

(1) Yes, from members of the general pul	OIIC.
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- (2) Yes, from Federal personnel* and/or Federal contractors.
- (3) Yes, from both members of the general public and Federal personnel and/or Federal contractors.

(4) No

- b. If "No," ensure that DITPR or the authoritative database that updates DITPR is annotated for the reason(s) why a PIA is not required. If the DoD information system or electronic collection is not in DITPR, ensure that the reason(s) are recorded in appropriate documentation.
- c. If "Yes," then a PIA is required. Proceed to Section 2.

^{* &}quot;Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."

SECTION 2: PIA SUMMARY INFORMATION

a.	Why	is this PIA being	created or	updated	? CI	hoose one:	
		New DoD Informa	tion System			New Electroni	c Collection
	\boxtimes	Existing DoD Info	rmation Sys	tem		Existing Elect	ronic Collection
		Significantly Modi System	ified DoD Inf	ormation			
		DoD information letwork (SIPRNE			in ti	he DITPR or the	DoD Secret Internet Protocol
	\boxtimes	Yes, DITPR	Enter DITP	R System	Ident	tification Number	13190
		Yes, SIPRNET	Enter SIPR	NET Ident	ificati	ion Number	
		No					
		this DoD informa on 53 of Office of	•				que Project Identifier (UPI), required ar A-11?
	\boxtimes	Yes			No		
	If "Ye	es," enter UPI		JII: 007-00	00036	571	
		If unsure,	, consult the C	component	iT Bu	udget Point of Conta	act to obtain the UPI.
	ecords A Priva	Notice (SORN)? acy Act SORN is required permanent U.S. res	ired if the infor	mation sys	tem oi	r electronic collection	quire a Privacy Act System of contains information about U.S. citizens ntifier. PIA and Privacy Act SORN
	inform	ation should be consis	stent.				
	\boxtimes	Yes			No		
	If "Ye	es," enter Privacy	Act SORN Id	entifier		DHA 20	
		Consult the Comp	onent Privacy	Office for	additi	Federal Register nu- ional information or v.defenselink.mil/pri	
		or					
	Date	of submission for Consult the C	approval to l Component Pri				

Contact the Component Information Management Control Officer or DoD Clearance Officer for this information. This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format. X Yes **Enter OMB Control Number** Pending review and approval of the 60-day Federal Register Notice submitted 9/16/2013. **Enter Expiration Date** \Box No f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records. (1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same. (2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.) (a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII. (b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records. (c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified. 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; 10 U.S.C. 3013, Secretary of the Army; 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 8013, Secretary of the Air Force; 10 U.S.C. Chapter 55, Medical and Dental Care; 29 CFR Part 1960, Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters; DoDD 6490.02E, Comprehensive Health Surveillance; DoDD 6490.14, Defense Suicide Prevention Program; AR 600-63, Army Health Promotion, Rapid Action Revision 7 Sep 10, Paragraph 4-4 Suicide prevention and surveillance; OPNAV Instruction 1720.4A, Suicide Prevention Program, 5.d, Reporting; AFPAM 44-160, The Air Force Suicide Prevention Program, XI, Epidemiological Database and Surveillance System; and E.O. 9397 (SSN), as amended.

e. Does this DoD information system or electronic collection have an OMB Control Number?

g. Summary of DoD information system or electronic collection. Answers to these questions should be consistent with security guidelines for release of information to the public.

(1) Describe the purpose of this DoD information system or electronic collection and briefly describe the types of personal information about individuals collected in the system.

This data system provides integrated enterprise and survey data to be used for direct reporting of suicide events and ongoing population-based health surveillance activities. These surveillance activities include the systematic collection, analysis, interpretation, and reporting of outcome-specific data for use in planning, implementation, evaluation, and prevention of suicide behaviors within the Department of Defense (DoD). Data is collected on individuals with reportable suicide and self-harm behaviors (to include suicide attempts, self harm behaviors, and suicidal ideation). Records are integrated from enterprise systems and created and revised by civilian and military personnel in the performance of their duties.

Personally identifiable information (PII) and protected health information (PHI) collected in the system are name, other names used, Social Security Number (SSN), DoD ID, date of birth, gender, race/ethnic group, marital status, rank/pay grade, religious preference, spouse information, child information, education information, military service, military status, job title, service duty specialty code, duty environment/status, Unit Identification Code (UIC), permanent duty station, the major command of the permanent duty station, temporary duty station (if applicable), deployment history, security clearance, use of military and/or community helping services, information regarding the individual's past military experience, law enforcement information, employment information, military records, financial information, medical information, psychological history, treatment history, prior suicidal behaviors, the reportable event type or description, event details, location of event, individual's residence at time of event, circumstance of death/event, potential precipitating factors, psychological stressors, postvention activities, social history, developmental history, behavioral, economic, education/training history, medical facility, unit or military treatment facility where reportable event occurred, legal history, behavioral health provider information, data sources used to compile records, and form completer contact information.

The categories of individuals covered by the system are Department of Defense active and reserve military personnel (Air Force, Army, Navy, Marines), National Guard with reportable suicide and self-harm behaviors (to include suicide attempts, self harm behaviors, and suicidal ideation).

SYSTEM MANAGER AND ADDRESS: Director, National Center for Telehealth and Technology (T2) Defense Centers of Excellence, 9933 West Hayes Street, OMAMC, Joint Base Lewis-McChord, Tacoma, WA 98431-1100. Phone number 253.968.2282.

The system is accessed by multiple sites world-wide. The system does not host a Web site that is accessible by the public.

(2) Briefly describe the privacy risks associated with the PII collected and how these risks are addressed to safeguard privacy.

Privacy risks are inherent in any system that collects PII. These risks includes: unauthorized disclosure of PII contained in the system through unauthorized access to the system or unauthorized alteration or destruction of the data; observation of data by unauthorized passersby via "shoulder surfing" techniques; or lax security practices on the part of a data entry user. Additionally, systems are vulnerable to attacks from outsiders, including hacking of a system, or contamination by computer viruses and other malware.

To mitigate these risks, data is entered via secure socket layer (SSL) encrypted sessions. The web and database servers TCP/IP access are limited through Access Control Lists (ACLs) and are behind two firewalls; one inside the ASR and one at the perimeter. Records are electronic and stored in electronic storage media. The servers that house the data are always kept in compliance with the Information Assurance Vulnerability Management (IAVM) requirements and maintain current virus definitions, updated daily. Records are maintained in a controlled facility. Physical entry is restricted by the use of locks, and is accessible only to authorized personnel. Access to records is limited to person(s) responsible for servicing the record in performance of their official duties and who are properly screened and cleared for need-to-know. Access to computerized data is restricted by Common Access Cards and passwords that are changed periodically. The system automatically logs out a user if there has been no activity on

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the system for 30 minutes. All personnel with authorized access to the system must have appropriate Information Assurance training, Privacy Act training, and Health Insurance Portability and Accountability Act training. Mandatory refresher of all training is required by all DoD entities annually.

h. V out	Vith side	whom will by your Comp	the PII be shared through data exchange, both within your DoD Component and ponent (e.g., other DoD Components, Federal Agencies)? Indicate all that apply.
	\boxtimes	Within the	DoD Component.
		Specify.	Defense Centers of Excellence (DCoE)
	\boxtimes	Other DoD	Components.
		Specify.	Departments of the Army, Navy and Air Force
	\boxtimes	Other Feder	ral Agencies.
		Specify.	Armed Forces Medical Examiner, Defense Manpower Data Center
	\boxtimes	State and Lo	ocal Agencies.
		Specify.	Statistical summary data with no personally identifiable information may be provided to Federal, State, and local governments for health surveillance and research.
		Contractor	(Enter name and describe the language in the contract that safeguards PII.)
		Specify.	
		Other (e.g.,	commercial providers, colleges).
		Specify.	
i.	Do i	ndividuals	have the opportunity to object to the collection of their PII?
	\boxtimes	Yes	□ No
	((1) If "Yes,"	describe method by which individuals can object to the collection of PII.
	duri elen no d disc 602	ng face-to-fac nents for the I collection from losure of PII t	e informed that participation is voluntary and will have opportunity to object to data collection be interviews. However, regardless of whether the individual objects, some PII data DoDSER database will be obtained from existing DoD data sources (in which case there is a the individual) or else in certain circumstances where DoD 6025.18-R permits use or that is protected health information without authorization by the individual. See DoD (required by law), C7.2.3 (public health activities administered by DoD), C7.4.5 (DoD health is).
	((2) If "No," s	state the reason why individuals cannot object.
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	Yes		\boxtimes	No						
	(1) If	Yes," describe	the meth	od by whic	ch indiv	riduals car	n give or v	vithhold th	heir conse	ent.
										-
	(2) If	'No," state the r	reason wh	ny individu	als can	not give o	or withhold	d their cor	nsent.	
		ed in the precedi								
		individuals when								
		ources, including							neither ci	rcumstance
are	individ	uals entitled to gi	ve or withh	nold their co	onsent t	o specific ı	uses of PII			
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permitted by the HIPAA Privacy Rule (45 CFR Parts 160 and 164), as implemented within DoD. Permitted uses and discloses of PHI include, but are not limited to, treatment, payment, and healthcare operations.

DISCLOSURE: Voluntary. However, any information you provide may assist DoD in promoting the health of the Armed Forces.

The following PAS may be provided in lieu of the above PAS when collecting information from an individual over the telephone. If the individual requests additional information about the authorities, purposes, routine uses, or disclosures, that section of the above PAS should be read. If the individual requests a paper copy of the PAS, the individual may choose whether to withhold any responses until a paper copy of the above PAS has been provided.

I am about to request information on suicides or instances of self-harm behavior (including suicide attempts and suicidal ideations) that may have occurred among active military personnel, reserve military personnel, or members of the National Guard. This information may be collected into the Department of Defense Suicide Event Report (DoDSER). You are not required to provide any information, but any information you provide may assist DoD in promoting the health of the Armed Forces.

The authorities permitting this collection include 10 U.S.C. 136 and 10 U.S.C. Chapter 55. The information you provide may be disclosed for reasons compatible with why it was collected and when permitted by the HIPAA Privacy Rule and other applicable privacy laws. Would you like to know more about the authorities, purposes, routine uses, or disclosures, or receive a paper copy of the full Privacy Act Statement?

NOTE:

Sections 1 and 2 above are to be posted to the Component's Web site. Posting of these Sections indicates that the PIA has been reviewed to ensure that appropriate safeguards are in place to protect privacy.

A Component may restrict the publication of Sections 1 and/or 2 if they contain information that would reveal sensitive information or raise security concerns.

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