



PRIVACY THRESHOLD ANALYSIS (PTA)

This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance
The Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
Tel: 202-343-1717

PIA@hq.dhs.gov

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



Privacy Threshold Analysis (PTA)

Specialized Template for Information Collections (IC) and Forms

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

Form Number:	FEMA Form 008-0-15		
Form Title:	Community Preparedness and Participation Survey		
Component:	Federal Emergency Management Agency (FEMA)	Office:	Protection and National Preparedness (PNP)

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title:	Community Preparedness and Participation Survey		
OMB Control Number:	1660-0105	OMB Expiration Date:	September 30, 2017
Collection status:	Extension	Date of last PTA (if applicable):	September 16, 2013

PROJECT OR PROGRAM MANAGER

Name:	Jacqueline Snelling		
Office:	Individual and Community Preparedness Division	Title:	Senior Advisor
Phone:	202 786-9577	Email:	<u>jacqueline.snelling@fema.dhs.gov</u>

COMPONENT INFORMATION COLLECTION/FORMS CONTACT



Name:	Sherina Greene		
Office:	Record Management	Title:	Management Analyst
Phone:	202-646-4343	Email:	Sherina.greene@fema.dhs.gov

SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

- a. Describe the purpose of the information collection or form. *Please provide a general description of the project and its purpose, including how it supports the DHS mission, in a way a non-technical person could understand (you may use information from the Supporting Statement).*
If this is an updated PTA, please specifically describe what changes or upgrades are triggering the update to this PTA.

This PTA is being submitted for the renewal of FEMA’s use of Community Preparedness and Participation Survey (FEMA Form 008-0-15) per the three year expiration. FEMA is now collecting information related to caregiver status but is no longer collecting information related to job status. The changes are reflected in this PTA.

The Individual and Community Preparedness Division (ICPD) works to strengthen the Nation’s resilience by preparing individuals, organizations, and communities for any disaster or emergency. To execute its mission, ICPD conducts research to better understand effective preparedness actions and ways to motivate the public to take those actions. ICPD also develops and shares preparedness resources based upon its research.

ICPD analyzes and uses data collected in FEMA Form 008-0-15, Community Preparedness and Participation Survey, to identify progress and gaps in individual and community preparedness and participation and to better understand the motivators and barriers to preparedness in general and about specific hazards (e.g., hurricanes, floods, wildfires). The survey measures the public’s knowledge, attitudes, and behaviors relative to preparing for a range of hazards.

The Community Preparedness and Participation Survey does not collect personally identifiable information (PII) from the public. ICPD has hired a contractor to conduct the surveys. The contractor uses its existing phone directory system to create a pool of phone numbers that will be used to conduct the anonymous survey. FEMA does not receive any of the phone numbers but does retain the survey responses and any data analysis for the purposes stated above.



b. List the DHS (or component) authorities to collect, store, and use this information. *If this information will be stored and used by a specific DHS component, list the component-specific authorities.*

The Stafford Act, Title VI, Emergency Preparedness (42 U.S.C. 5195-5195(a)) identifies the purpose of emergency preparedness “for the protection of life and property in the United States from hazards.” It directs that the Federal Government “provide necessary direction, coordination, and guidance” as authorized for a comprehensive emergency preparedness system for all hazards. Emergency preparedness is defined as all “activities and measures designed or undertaken to prepare or minimize the effects of a hazard upon the civilian population...” The “conduct of research” is among the measures to be undertaken in preparation for hazards.

The DHS Strategic Plan 2014-2018 includes a Goal 5.1 including the goal for “improving strategies for the mission of empowering individuals and communities to strengthen and sustain their own preparedness”¹

The FEMA Strategic Plan 2014-2018 references FEMA priorities for preparing individuals in Priority #1- to achieve a survivor-centric mission where “Individuals and communities know the steps to take, have the tools required, and take appropriate actions, before, during, and after disasters, and in Priority #3, to better prepare survivors and bystanders.”²

Presidential Policy Directive-8 (PPD-8) directs the Secretary of Homeland Security to “coordinate a comprehensive campaign to build and sustain national preparedness, including public outreach and community-based and private sector programs to enhance national resilience, the provision of Federal financial assistance, preparedness efforts by the Federal Government, and national research and development efforts.”

2. Describe the IC/Form

a. Does this form collect any Personally Identifiable Information” (PII ³)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. From which type(s) of individuals does this form collect information? (Check all that apply.)	<input checked="" type="checkbox"/> Members of the public <input checked="" type="checkbox"/> U.S. citizens or lawful permanent residents <input checked="" type="checkbox"/> Non-U.S. Persons.

¹
²

³ Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



	<input type="checkbox"/> DHS Employees <input type="checkbox"/> DHS Contractors <input type="checkbox"/> Other federal employees or contractors.
<p>c. Who will complete and submit this form? (<i>Check all that apply.</i>)</p>	<input type="checkbox"/> The record subject of the form (e.g., the individual applicant). <input type="checkbox"/> Legal Representative (preparer, attorney, etc.). <input type="checkbox"/> Business entity. <p style="padding-left: 40px;">If a business entity, is the only information collected business contact information?</p> <p style="padding-left: 80px;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <input type="checkbox"/> Law enforcement. <input type="checkbox"/> DHS employee or contractor. <input checked="" type="checkbox"/> Other individual/entity/organization that is NOT the record subject. <i>Please describe.</i> This is a survey given over the telephone. FEMA contracts with a Research Company to conduct the surveys and compile the collected data.
<p>d. How do individuals complete the form? <i>Check all that apply.</i></p>	<input checked="" type="checkbox"/> Paper. <input checked="" type="checkbox"/> Electronic. (ex: fillable PDF) <input type="checkbox"/> Online web form. (available and submitted via the internet) <i>Provide link:</i>
<p>e. What information will DHS collect on the form? <i>List all PII data elements on the form. If the form will collect information from more than one type of individual, please break down list of data elements collected by type of individual.</i></p>	
<p>The Community Preparedness and Participation Survey collects demographic and contextual characteristics as the relate to preparedness, including:</p> <ul style="list-style-type: none"> - Prior experience with disasters; - Health condition; - Caregiver; - Community Engagement; 	



- Gender;
- Age;
- Children under 18 in household;
- Race and Ethnicity;
- Household Income category;
- Geography and Location of Residence; (zip code, state, county); years at location;
- Home ownership;
- Language;
- Education; and
- Type of telephone (landline or cell).

No PII data elements are collected.

f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? *Check all that apply. None apply*

- | | |
|---|--|
| <input type="checkbox"/> Social Security number | <input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI) |
| <input type="checkbox"/> Alien Number (A-Number) | <input type="checkbox"/> Social Media Handle/ID |
| <input type="checkbox"/> Tax Identification Number | <input type="checkbox"/> Known Traveler Number |
| <input type="checkbox"/> Visa Number | <input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.) |
| <input type="checkbox"/> Passport Number | <input type="checkbox"/> Driver's License Number |
| <input type="checkbox"/> Bank Account, Credit Card, or other financial account number | <input type="checkbox"/> Biometrics |
| <input type="checkbox"/> Other. <i>Please list:</i> | |

g. List the **specific authority** to collect SSN or these other SPII elements.

No information is collected containing any SSN or other SPII elements.

h. How will this information be used? What is the purpose of the collection? Describe **why** this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.

No SPII is collected or used.

i. Are individuals provided notice at the	<input checked="" type="checkbox"/> Yes. Please describe how notice is provided.
---	--



<p>time of collection by DHS (<i>Does the records subject have notice of the collection or is form filled out by third party?</i>)?</p>	<p>As this is a telephone survey, notice is read to the respondent by the research company doing the survey for FEMA as follows: Hello, this is ____ calling for the Research Company on behalf of the Federal Emergency Management Agency (FEMA). We are doing a special poll about preparation for disasters and would like to include your opinions. This survey will take about 15 minutes and is completely voluntary.</p> <p>These questions comply have been approved by the Office of Management and Budget under number 1660-0105.If you have any questions about the survey, you can reach a FEMA contact by calling (1-202 646-2500) and indicating you want to talk with a contact for the FEMA Survey.</p> <p><input type="checkbox"/> No.</p>
---	---

3. How will DHS store the IC/form responses?	
<p>a. How will DHS store the original, completed IC/forms?</p>	<p><input type="checkbox"/> Paper. Please describe. Click here to enter text.</p> <p><input checked="" type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. FEMA Network Storage (R Drive).</p> <p><input type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Click here to enter text.</p>
<p>b. If electronic, how does DHS input the responses into the IT system?</p>	<p><input checked="" type="checkbox"/> Manually (data elements manually entered). Data is manually entered into forms which are manually saved to the R drive.</p> <p><input type="checkbox"/> Automatically. Please describe.</p>



<p>c. How would a user search the information submitted on the forms, <i>i.e.</i>, how is the information retrieved?</p>	<p><input type="checkbox"/> By a unique identifier.⁴ <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA. Click here to enter text.</p> <p><input checked="" type="checkbox"/> By a non-personal identifier. <i>Please describe.</i> All search would be done by types of disasters or demographic information like county or state or zip code of respondents.</p>
<p>d. What is the records retention schedule(s)? <i>Include the records schedule number.</i></p>	<p>ICPD records are destroyed immediately after data have been entered or otherwise incorporated into the master file or database and verified, but longer retention is authorized if required for business use, per EDP 2-2.</p>
<p>e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?</p>	<p>ICPD staff uses the collected data for studies and development of trend analysis. Records are continuously used and monitored. When they are no longer deemed useful for analysis the records will be destroyed.</p>
<p>f. Is any of this information shared outside of the original program/office? <i>If yes, describe where (other offices or DHS components or external entities) and why. What are the authorities of the receiving party?</i></p>	
<p><input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe. Click here to enter text.</p> <p><input type="checkbox"/> Yes, information is shared <i>external</i> to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe. Click here to enter text.</p> <p><input checked="" type="checkbox"/> No. Information on this form is not shared outside of the collecting office.</p>	

⁴ Generally, a unique identifier is considered any type of “personally identifiable information,” meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



**Homeland
Security**

Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
202-343-1717, pia@hq.dhs.gov
www.dhs.gov/privacy



Please include a copy of the referenced form and Privacy Act Statement (if applicable) with this PTA upon submission.



PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	Christopher Rogers
Date submitted to component Privacy Office:	May 12, 2017
Date submitted to DHS Privacy Office:	Click here to enter a date.
Have you approved a Privacy Act Statement for this form? <i>(Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.)</i>	<input type="checkbox"/> Yes. Please include it with this PTA submission. <input checked="" type="checkbox"/> No. Please describe why not. The form does not collect PII.
Component Privacy Office Recommendation: <i>Please include recommendation below, including what existing privacy compliance documentation is available or new privacy compliance documentation is needed.</i>	
FEMA Privacy recommends that this collection be adjudicated as non-privacy sensitive.	



PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Hannah Burgess
PCTS Workflow Number:	1144881
Date approved by DHS Privacy Office:	June 13, 2017
PTA Expiration Date	June 13, 2020

DESIGNATION

Privacy Sensitive IC or Form:	Choose an item. If "no" PTA adjudication is complete.
Determination:	<input checked="" type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input type="checkbox"/> Privacy Act Statement required. <input type="checkbox"/> Privacy Impact Assessment (PIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other. Click here to enter text.
DHS IC/Forms Review:	DHS PRIV has not received this ICR/Form.
Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	Click here to enter text.
Privacy Act Statement:	e(3) statement not required. Click here to enter text.
PTA:	No system PTA required. Click here to enter text.
PIA:	Choose an item. If covered by existing PIA, please list: Click here to enter text.



	If a PIA update is required, please list: Click here to enter text.
SORN:	Choose an item. If covered by existing SORN, please list: Click here to enter text. If a SORN update is required, please list: Click here to enter text.
DHS Privacy Office Comments: <i>Please describe rationale for privacy compliance determination above.</i>	
<p>This PTA is being submitted for the renewal of FEMA’s use of Community Preparedness and Participation Survey (FEMA Form 008-0-15) per the three year expiration. The anonymous survey is conducted via telephone, and a contractor uses its existing phone directory system to create a pool of phone numbers that will be used to conduct the survey. FEMA does not receive the phone numbers used in the survey, but does receive the survey responses, which are then used to identify progress and gaps in individual and community preparedness and participation and to better understand the motivators and barriers to preparedness in general and about specific hazards.</p> <p>The survey collects demographic and contextual information on disaster preparedness from members of the public including age, gender, income level, and geography. No PII is collected, and the information that is collected is not enough to determine an individual’s identity. The DHS Privacy Office agrees with FEMA that the Community Preparedness and Participation Survey is a non-privacy sensitive system.</p> <p>Therefore, a PTA is sufficient and no PIA is necessary. SORN coverage is also not required, as no PII is collected and no information is retrieved by unique identifier.</p>	