



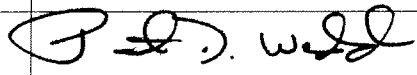


**U.S. Consumer Product Safety Commission  
PRIVACY IMPACT ASSESSMENT**

Name of Project:	National Electronic Injury Surveillance System (NEISS)
Office/Directorate:	EXHR / EP

**A. CONTACT INFORMATION**

Person completing PIA: (Name, title, organization and ext.)	Cathleen Irish, Chief, EPDSC, x7417
System Owner: (Name, title, organization and ext.)	Thomas Schroeder, Director, EPDS, x7431
System Manager: (Name, title, organization and ext.)	Ming Zhu, Chief, TSAD, x7517

B. APPROVING OFFICIALS	Signature	Approve	Disapprove	Date
System Owner	 Thomas Schroeder, Director, EPDS	✓		3/25/10
Privacy Advocate	 Linda Glatz, ITTP	✓		3/25/10
Chief Information Security Officer	 Patrick Manley, ITTS	✓		3/30/10
Senior Agency Official for Privacy				
System of Record? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	 Mary James, Director, ITTP	✓		3/31/10
Reviewing Official:	 Patrick D. Weddle, AED, EXIT	✓		3/30/10

**C. SYSTEM APPLICATION/GENERAL INFORMATION**

1. Does this system contain any personal information about individuals? (If there is NO information collected, maintained, or used that is identifiable to the individual, the remainder of PIA does not have to be completed.)	yes
2. Is this an electronic system?	yes

<b>D. DATA IN THE SYSTEM</b>	
1. What categories of individuals are covered in the system? (public, employees, contractors)	public
2. Generally describe what data/information will be collected in the system.	NEISS contains information on product-related injuries treated in hospital emergency rooms. Records include data such as the treatment date, product, age, gender, race, diagnosis, injured body part, disposition, and a brief narrative describing the nature of the injury and how it happened. Some records contain date of birth. For a small subset of records we also collect victim ID – name, address and phone number.
3. Is the source of the information from the individual or is it taken from another source? If not directly from individual, then what other source?	The information is abstracted from medical records in the hospital.
4. How will data be checked for completeness?	Completeness of individual records: the program used to enter NEISS records has a number of edits which prevent saving of incomplete records. Completeness of data submitted for a given period: EPDS monitors summary statistics such as percentage of hospitalizations, number of cases per treatment date, etc., which can signal deficiencies in hospital reporting. In addition, on-site evaluation visits are conducted at each participating hospital at least annually. During these visits the evaluator reviews and codes a set of records and compares the result to the records submitted by the hospital coder. This process can detect problems with both completeness and accuracy.
5. Is the data current? (What steps or procedures are taken to ensure the data is current and not out-of-date?)	The information being captured is a record of an ER visit and is generally not subject to change; though in some hospitals there are timing issues that can affect the availability of data to the hospital coder. During evaluation visits the hospital's record flow is reviewed and documented and any problems identified are addressed with the coder and hospital management.
6. Are the data elements described in detail and documented? (If yes, what is the name and location of the document?)	Yes - H:\apps\DOC\TableFieldsDefined\epidb\EPI\neismain.xls, neisprod.xls, neiscmt.xls, study09.xls, and victim.xls. For a more in-depth explanation of codes used, reporting rules, etc., see the NEISS Coding Manual ( <a href="http://www.cpsc.gov/Neiss/completemanual.pdf">http://www.cpsc.gov/Neiss/completemanual.pdf</a> ), and the NEISS FAQs (G:\USERS\EPDS\READONLY\Library\Documentation\FAQ\FAQ 2010\FAQ 2010 Non-Trauma.pdf).
<b>E. ATTRIBUTES OF THE DATA</b>	
1. Explain how the use of the data is both relevant and necessary to the purpose for which the system is being designed?	NEISS is unique in its ability to provide national estimates of product-related injuries. The descriptive data (treatment date, product, age, gender, diagnosis, etc.) that are collected are necessary to identify various populations of interest (i.e. children under five years of age that are poisoned with household chemicals), while the contact information that is provided for some cases allows us to conduct follow-back interviews and obtain more detailed information about the product and circumstances of the injury.
2. For electronic systems, if the data is being consolidated, what controls are in place to protect the data from unauthorized access or use? Explain.	PC's used for data entry have encrypted hard disks and user authentication. Data are submitted to CPSC over a secure internet connection. Victim contact information is only entered for a few cases and cannot be retrieved once it is entered.  At CPSC the data are stored in a database on CPSC's network. Only EPDS staff and those involved in conducting follow-back interviews have access to contact information.
3. How will the data be retrieved? Can it be retrieved by a personal identifier? If yes, explain and list the identifiers that will be used to retrieve information on the individual.	Data are retrieved through the EPIR, EPHQ, and EPReview database applications and through user-written SAS programs. Data are not retrieved by personal identifiers.

4. What opportunities do individuals have to decline to provide information or to consent to particular uses of the information?	Individuals do not have an opportunity to decline for the information in the basic NEISS record to be collected, but they may decline to participate in any follow-back interview.
<b>F. MAINTENANCE AND ADMINISTRATIVE CONTROLS</b>	
1. What are the retention periods of data in this system?	NEISS records are kept indefinitely. Victim ID is deleted from the database automatically, 30 days after it is entered.
2. What are the procedures for disposition of the data at the end of the retention period? How long will the reports produced be kept? Where are the procedures documented?	Records in the victim table containing victim ID for assigned cases are deleted automatically from the database 30 days after they are entered. Printouts of victim ID are disposed of by placing in a shredder bin within 45 days of completion of the investigation. Procedures are documented in the EPDS Information Protection Plan ( <a href="G:\USERS\EPDS\RDWRITE\security\information protection plan.doc">G:\USERS\EPDS\RDWRITE\security\information protection plan.doc</a> ) and in EPDS Internal Operating Procedures to Control Unauthorized Access to Protected Data ( <a href="G:\USERS\EPDS\RDWRITE\security\sop.doc">G:\USERS\EPDS\RDWRITE\security\sop.doc</a> ).
3. For electronic systems, will this system provide the capability to identify, locate, and monitor individuals? If yes, explain.	No
4. For electronic systems only, what controls will be used to prevent unauthorized monitoring?	Victim ID is only retained long enough to complete follow-back interviews and is only accessible to EPDS staff and field staff or contractors conducting the interviews.
5. Is this system currently identified as a CPSC system of records? If so, under which notice does the system operate?	No
6. If the system is being modified, will the Privacy Act system of records notice require amendment or revision? Explain	N/A
<b>G. ACCESS TO DATA</b>	
1. Who will have access to the data in the system? (e.g., contractors, managers, system administrators, developers, other).	Victim contact information can only be accessed by EPDS staff and those involved in conducting follow-back interviews. The basic NEISS data may be retrieved for analysis by most CPSC staff, including technical staff and IT staff. NEISS data are also made available to the public with "purged narratives" (all information that might identify an individual, hospital, location, or company is removed).
2. What controls are in place to prevent the misuse of data by those having access? (Please list processes and training materials.)	CPSC and EPDS policies and procedures for handling PII apply. All CPSC staff must complete annual privacy and security training. EPDS staff must also attend an additional information security training session and affirm that they have read the CPSC directives relating to information security. EPDS plans to begin conducting annual information security training sessions for contractors conducting follow-back interviews. Relevant training materials and documentation: EPDS Information Protection Plan ( <a href="G:\USERS\EPDS\RDWRITE\security\information protection plan.doc">G:\USERS\EPDS\RDWRITE\security\information protection plan.doc</a> ), EPDS Internal Operating Procedures to Control Unauthorized Access to Protected Data ( <a href="G:\USERS\EPDS\RDWRITE\security\sop.doc">G:\USERS\EPDS\RDWRITE\security\sop.doc</a> ), and EPDS Information Security Training ( <a href="G:\USERS\EPDS\RDWRITE\security\EPDS Information Security Training.ppsx">G:\USERS\EPDS\RDWRITE\security\EPDS Information Security Training.ppsx</a> ).
3. Who is responsible for assuring proper use of the data?	IT administrators and EPDS management
4. Are contractors involved with the design and development of the system and will they be involved with the maintenance of the system? Are contractors involved in the collection	Yes – contractors were involved in both the statistical design and in programming the system. Currently maintenance and support is provided by CPSC's Application Development Branch.  Yes – contractors are involved in the collection of the data. CPSC has contracts with

<p>of the data? If yes, were Privacy Act contract clauses inserted in their contracts and other regulatory measures addressed?</p>	<p>both the hospitals providing the data and in some cases with third party coders (usually hospital employees) who do the actual coding of the data. Each contract includes the Privacy Act clause.</p>
<p>5. Do other systems share data or have access to the data in the system? If yes, explain. Who will be responsible for protecting the privacy rights of the public and employees affected by the interface?</p>	<p>Victim ID is not shared with any other system. Those incidents that are investigated become part of INDP, but those records do not contain any personal identifiers. INDP is managed by the same group as NEISS – IT administrators and EPDS management would be responsible for protecting privacy rights.</p>
<p>6. Will other agencies share data or have access to the data in this system? If yes, how will the data be used by the other agency?</p>	<p>No other agencies may access the information stored in CPSC's database, but data from the database is extracted and provided to Federal agencies with which we have interagency agreements to conduct NEISS special studies. The data are used for different specific purposes depending upon the study, but generally these agencies use the data similarly to CPSC – to identify the number and nature of injuries and illnesses and develop strategies for reducing the number and severity of these injuries and illnesses. CPSC does not release victim ID to other agencies.</p>
<p>7. Will any of the personally identifiable information be accessed remotely or physically removed?</p>	<p>Yes – victim ID is provided in hardcopy form to contractors conducting follow-back investigations. They return it to CPSC upon completion of the investigation. CPSC field staff conducting follow-back investigations may access the information remotely.</p>