

Privacy Impact Assessment for the VA IT System called:

Salesforce: Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS)

Veterans Health Administration

Readjustment Counseling Service

eMASS ID #2357

Date PIA submitted for review:

11/14/2024

System Contacts:

System Contacts

	Name	E-mail	Phone Number
Privacy Officer	Lisa Walker	Lisa.Walker20@va.gov	202-306-3421
Information System Security Officer (ISSO)	James Boring	James.Boring@va.gov	215-842-2000 Ext. 4613
Information System Owner	Michael Domanski	Michael.Domanski@va.gov	352-421-3976

Version date: October 1, 2024

Page 1 of 34

Abstract

The abstract provides the simplest explanation for "what does the system do for VA?".

Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (SF-RCS) provides the VHA Readjustment Counseling Office with a solution to standardize their outreach efforts, reach a larger audience, and track interactions with Veterans and other potential Vet Center clients. The Program Office, National Outreach Specialist, and District staff will have the ability to pull analytics and create dashboards and reports on community engagement to quantify/measure their success. Outreach Specialists at all Vet Centers will receive and collect specific data for separating service members and other potential clients to enter and manage Vet Center outreach leads and actions taken.

Overview

The overview is the most important section of the Privacy Impact Assessment (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:

1 General Description

A. What is the business purpose of the program, IT system, or technology and how it relates to the program office and agency mission?

The system provides the VHA Readjustment Counseling Office with a solution to standardize their outreach efforts, reach a larger audience, and track interactions with Veterans and other potential Vet Center clients. The Program Office, National Outreach Specialists, and District staff will have the ability to pull analytics and create dashboards and reports on community engagement to quantify/measure their success. Outreach Specialists at all Vet Centers will receive and collect specific data for separating service members and other potential clients to enter and manage Vet Center outreach leads and actions taken.

B. Who is the owner or has control of the IT system or project? If the system has an eMASS entry, ensure this information matches with the eMASS entry.

Salesforce Government Cloud Plus (SFGCP) is a cloud platform, data in the platform is controlled by VA but non-VA Owned and Operated. Ownership rights to PII data should be covered in the Salesforce contract. Per NIST 800-144, it is understood that the organization (VA) is ultimately accountable for security and privacy of data held by Salesforce on our behalf.

2. Information Collection and Sharing

C. Indicate the expected number of individuals whose information is stored in the system and include a brief description of the typical client or affected individual?

An estimated 200,000 separating service members are expected to be transmitted to the system each year through VADIR and 163,000 or more outreach contacts per year are obtained from Vet Center outreach campaigns.

Check if Applicable	Demographic of individuals
	Veterans or Dependents
	VA Employees
	Clinical Trainees
	VA Contractors
	Members of the Public/Individuals
	Volunteers

D. What is a general description of the information in the IT system and the purpose for collecting this information?

Outreach Specialists and other Vet Center staff will collect and use client identification, demographic, and service-related information to contact and engage with separating service members and other potential Vet Center clients.

E. What information sharing is conducted by the IT system? A general description of the modules and components, where relevant, and their functions.

VADIR (VA Defense Information Depository) will provide information about the Veterans to the system so Outreach Specialists and other Vet Center staff have all the contact information and background information needed to work with these specific separating service members. Data collected by Outreach Specialists and other Vet Center staff on all eligible individuals who express a desire to engage with Vet Center services that are entered into the system will be shared with RCSNet (Readjustment Counseling Service Network) to maintain a record of contact and progress and establish them as a Vet Center client.

F. Are the modules/subsystems only applicable if information is shared?

Yes, the components VADIR, RCSNet, VA Profile and DIP are all applicable because the system receives, stores or shares data with these systems.

G. Is the system operated in more than one site to include primary and secondary 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?

Not applicable. The system is cloud-based.

- 3. Legal Authority and System of Record Notices (SORN)
 - H. What is the citation of the legal authority?

Although Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) data is stored in the Salesforce FedRAMP cloud, it remains the property of the VA and as such, the VA remains responsible for the security and privacy of this data.

The VA enforces these protection requirements through the implementation of its cybersecurity policies and the Risk Management Framework (RMF) process. Under the RMF Process, the system has a Data Security Categorization of Moderate, with the impacts of a data compromise being identified in the Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) Data Security Categorization (DSC) memo. The Privacy Act of 1974, set forth at 5 U.S.C. 552a, states the legal authority to utilize this information.

I. What is the SORN?

The SORNs applicable for the system are

24VA10A7/ 85 FR62406 Patient Medical Records-A: 2020-21426.pdf (govinfo.gov)

64VA10/87 FR 25703 Readjustment Counseling Program (RCS) Vet Center Program-VA: 2022-09374.pdf (govinfo.gov).

J. If the system is in the process of being modified and a SORN exists, will the SORN require amendment or revision and approval.

The above SORNs will not require amendment or revision and approval. The SORNs cover Cloud usage or storage.

4	.S	vstem	CI	han	005
┰.	\sim	ysiciii	\sim	uui	こしい

K. Will the business processes change due to the information collection and sharing?
☐ Yes
☒ No
if yes, <<ADD ANSWER HERE>>

I. Will the technology changes impact information collection and sharing?

	Yes			
\boxtimes	No			
if y	ves, < <add< td=""><td>ANSW.</td><td>ER HER</td><td><i>E>></i></td></add<>	ANSW.	ER HER	<i>E>></i>

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 Information 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://vaww.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. It must also match the information provided in question 3.4 of the PTA.

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:

 Name Full Social Security Number Partial Social Security Number Date of Birth Mother's Maiden Name Personal Mailing Address Personal Phone Number(s) Personal Fax Number Personal Email Address 	 ☑ Emergency Contact Information (Name, Phone Number, etc. of a Different Individual) ☐ Financial Information ☐ Health Insurance Beneficiary Numbers Account Numbers ☐ Certificate/License Numbers¹ ☐ Vehicle License Plate Number ☐ Internet Protocol (IP) Address Numbers 	 ☐ Medications ☐ Medical Records ☒ Race/Ethnicity ☐ Tax Identification Number ☐ Medical Record Number ☒ Gender/Sex ☐ Integrated Control Number (ICN) ☒ Military History/Service Connection ☐ Next of Kin ☐ Date of Death ☐ Business Email Address
---	---	---

¹ *Specify type of Certificate or License Number (e.g., Occupational, Education, Medical)

☐ Electronic Data	(List Below)
Interchange Personal	
Identifier (EDIPI)	
☑ Other Data Elements	

Other PII/PHI data elements:

- Veteran File Number
- Deployment location
- Deployment details
- Guard Reserve episode details
- Active-Duty Status
- Military Job
- Marital Status
- Doctors' office locations
- Pharmacy location
- Other health office locations
- Member of the public's association with the Veteran
- Member of the public's dependent status

1.2 List the sources of the information in the system

These questions are related to privacy controls DI-1, Data Quality, and IP-1, Consent.

1.2a 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?

The VA maintains the data in the VADIR-VA Defense Information Repository. The Readjustment Counseling Service maintains the data in the RCSNet (Readjustment Counseling Service Network). Vet Center staff may collect updated contact and demographic information directly from separating service members and other potential Vet Center clients. Vet Center staff will log interactions with potential Vet Center clients to maintain a record of engagement and ensure continuity of outreach activities and outcomes.

1.2b 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 indicate why the system is using this source of data.

Data about the Veteran is uploaded from VADIR for Vet Center staff reference to understand the Veteran's background and aid in building connection with services that may benefit the separating service member. This system does not use information from VA-external sites or sources.

1.2c Does the system create information (for example, a score, analysis, or report), list the system as a source of information?

SF-RCS is a source of information which will allow creation of dashboards and reports for VHA leadership oversight. This information will allow for the analysis of the efficacy of outreach activities and allow RCS to focus efforts on activities and processes that connect the most eligible individuals with Vet Center services.

1.3 Methods of information collection

These questions are related to privacy controls DI-1, Data Quality, and IP-1, Consent.

1.3a 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 technologies used in the storage or transmission of information in identifiable form?

Information about a Veteran is received from VADIR (VA Defense Information Repository) via site-to-site encrypted transmission. Information is collected directly from potential Vet Center clients during community engagement and other interactions where individuals may be interested in Vet Center services.

1.3b If the information is collected on a form and is subject to the Paperwork Reduction Act, what is the form's OMB control number and the agency form number?

This system does not collect information on a form and is not subject to the Paperwork Reduction Act.

1.4 Information checks for accuracy, and how often will it be checked.

These questions are related to privacy controls DI-1, Data Quality, and DI-2, Data Integrity and Integrity Board.

1.4a 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.

RCS staff will contact and validate data accuracy for each individual loaded from VADIR into Salesforce. Accuracy of the system data is managed internally and relies upon efficient daily operational processes.

(a) Within RCS access to the Vet Center Client Record is limited to authorized RCS staff (Vet Center, District Director Office, and/or the Office of the Chief Readjustment Counseling Officer in VACO) with a legitimate need to know connected to direct service delivery and/or the quality oversight of services provided. RCS staff access to the electronic Vet Center Client Record is via standalone computers located in locked RCS

facilities. RCS program computers are username and password protected. Computer security is in compliance with RCS and VA computer security policy and protocol.

- (b) Access to Veteran's or Service member's counseling records by elements outside of RCS, VA, or non-VA, is contingent upon the Veteran's or Service member's signed authorization, or to one of the routine uses identified above.
- (c) Authorized RCS staff will have access to the Client Record via stand-alone RCSNet computers located in locked RCS facilities: Vet Centers, District Director Offices, and VA Central Office.

1.4b Does the system check for accuracy by accessing a commercial aggregator of information, describe this process and the levels of accuracy required by the contract?

The system does not check for accuracy by accessing a commercial aggregator.

1.5 Identify the specific legal authorities, arrangements, and agreements that 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

The Privacy Act of 1974, as amended, 5 U.S.C. § 552a, establishes a code of fair information practices that govern the collection, maintenance, use, and dissemination of information about individuals that are maintained in systems of records by federal agencies. The SORN for the system states the authority of maintenance of the system listed in question 1.1 falls under the following:

SORN 24VA10A7/ 85 FR62406 *Patient Medical Records-A* https://www.govinfo.gov/content/pkg/FR-2020-10-02/pdf/2020-21426.pdf

SORN 64VA10RCS *Readjustment Counseling Service (RCS) Vet Center Program-VA* https://www.govinfo.gov/content/pkg/FR-2022-05-02/pdf/2022-09374.pdf

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:

<u>Principle of Purpose Specification:</u> The collection ties with the purpose of the underlying mission of the organization and its enabling authority.

<u>Principle of Minimization:</u> The information is directly relevant and necessary to accomplish the specific purposes of the program.

<u>Principle of Individual Participation:</u> The program, to the extent possible and practical, collects information directly from the individual.

<u>Principle of Data Quality and Integrity:</u> VA policies and procedures must ensure that personally identifiable information is accurate, complete, and current.

This 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:

<u>Privacy Risk:</u> Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) stores sensitive Veterans' and other potential Vet Center client's PII and PHI. The risk is in revealing this information to an unauthorized party.

<u>Mitigation:</u> Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) uses two-factor authentication to prevent unauthorized access to the system. Additionally, the system can only be accessed by authorized personnel with access to the VA intranet. There is no public access to the system.

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 that 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.

PII/PHI Data Element	Internal Use	External Use
Veteran ID Number (can be a	To identify	Not used externally
unique number or SSN)		
Veteran First Name	To identify	Not used externally
Veteran Last Name	To identify	Not used externally
Date of Birth	To identify	Not used externally
Veteran Personal Email	To contact	Not used externally
Veteran Personal Phone	To contact	Not used externally
Veteran Address	To contact	Not used externally
Veteran Gender	For counselor reference/	Not used externally
	healthcare support	
Veteran Race	For counselor reference/	Not used externally
	healthcare support	

Veteran Ethnicity	For counselor reference/	Not used externally
	healthcare support	
Military Job	For counselor reference/	Not used externally
	healthcare support	,
Marital Status	For counselor reference/	Not used externally
	healthcare support	-
Doctor's office locations	For healthcare support	Not used externally
Pharmacy location	For healthcare support	Not used externally
Other health office locations	For healthcare support	Not used externally
Deployment location(s)	For counselor reference/	Not used externally
	healthcare support	
Deployment details	For counselor reference/	Not used externally
	healthcare support	
Guard Reserve episode details	For counselor reference/	Not used externally
	healthcare support	
Summary of military service	For counselor reference/	Not used externally
	healthcare support	
Active-duty status	For counselor reference/	Not used externally
	healthcare support	
Member of the public's	For counselor reference/	Not used externally
association with Veteran	healthcare support	
Member of the public's	For counselor reference/	Not used externally
dependent status	healthcare support	

- **2.2 Describe the types of tools used to analyze data and what type of data may be produced.** These questions are related to privacy controls DI-1, Data Quality, DI-2, Data Integrity and Integrity Board, and SE-1, Inventory of Personally Identifiable Information.
- 2.2a 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?
 - SF Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) will update an existing Veteran's or other potential Vet Center client's record based on the information provided during a call/contact with the respective individual. This information can be made available to requestors by following the VA's standard procedures for requesting such access. No analysis is performed on the information collected.
- 2.2b 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.

SF Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) follows the standard documented need-to-know principle of only granting access to VA employees to the data they need to perform their jobs. As part of standard VA Privacy and Information Security training, users are taught not to arbitrarily share data with co-workers unless the co-worker has a need for that data. Anyone needing access to data goes through the formal VA access request process, submitting a SNOW ticket and receiving their supervisor's approval before access can be granted. As with all access to PII and PHI, data access is monitored, tracked, and reported to identify possible misuse. The Information System Security Officer (ISSO) and Cybersecurity Operations Center (CSOC) are responsible for assuring safeguards for the PII.

2.3 How the information in the system is secured.

These questions are related to security and privacy controls SC-9, Transmission Confidentiality, and SC-28, Protection of Information at Rest.

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

Data in transit are protected by HTTPS site-to-site encryption. PII data are encrypted at rest with Salesforce Shield encryption.

2.3b If the system is collecting, processing, or retaining Social Security Numbers, are there additional protections in place to protect SSNs? (refer to PTA question 3.8).

SSN is PII data, encrypted at rest with Salesforce Shield encryption. Only VA employees with a business need will have the record view based on security levels.

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

Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) is an encrypted secure system. User roles determine who has visibility into PII/PHI.

2.4 PRIVACY IMPACT ASSESSMENT: Use of the information.

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:

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

<u>Principle of Use Limitation:</u> 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.

2.4a How is access to the PII determined?

The SORN defines the information use of the information and how the information is accessed, contained, and stored in the system. As per the SORN, strict control measures are enforced to ensure that access to and disclosure are limited to a need-to-know based on official duties. Access to the computerized information is limited by means of passwords and authorized user identification codes.

2.4b Are criteria, procedures, controls, and responsibilities regarding access documented? How are the documented, i.e. Policy, SOP, other. And where is this documentation located?

Yes, controls are in place to ensure data is used and protected in accordance with legal requirements, VA policies, and VA's stated purpose for using the data. Controls include mandatory training completion for all employees, volunteers, and contractors. Additionally, audits are performed to ensure information is accessed and retrieved appropriately. VA and Salesforce have implemented required security and privacy controls for Federal information systems and organizations according to NIST SP 800-53 and VA Handbook 6500, Risk Management Framework for VA Information Systems. Per the approval of the Acting Assistant Secretary for Information Technology [the VA Authorizing Official (AO)]. VA Records Management Policy and the VA Rules of Behavior in Talent Management System (TMS) govern how Veterans' information is used, stored, and protected.

2.4c Does access require manager approval?

Yes, managers must approve any new users accessing the system.

2.4d Is access to the PII being monitored, tracked, or recorded?

Yes, VA Identify and Access Management (IAM) systems verify credentials and collect audit logs based on access requested and may contain PII that might have been captured to authenticate to the resource.

2.4e Who is responsible for assuring safeguards for the PII as identified in eMASS?

Accessibility to data is granted based on the permission sets and role-based hierarchy applied based on FedRAMP Salesforce Gov Cloud Plus platform. Account creation is managed and offered through VA via two factor authentication (2FA) Personal Identity Verification (PIV) card and/or Access VA. Single Sign On external (SSOe) is used to provide credential access to VA modules/communities residing in the Salesforce application, the determinant of access is organizational affiliation rather than personal identity. For some module(s) the required organizational e-mail confirmation and multi-factor authentication (MFA) will be enforced (IAL1), but no identity proofing (IAL2) and vice versa. The managers will reject any applications from individuals who do not work with them, do not require access or are not using the correct e-mail address. IAM systems verify credential and collect audit logs based on access requested and may contain PII that might have been captured into order to authenticate to the resource.

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

The following data is retained by SF - RCS:

- Veteran File Number (can be a unique number or the SSN) Used as an identifier
- Veteran First Name Used as an identifier
- Veteran Last Name Used as an identifier
- Date of Birth Used as an identifier
- Veteran Personal Email Used to contact individual
- Veteran Personal Phone Used to contact individual
- Veteran Address Used to contact individual
- Veteran Gender Used for counselor reference/healthcare support
- Veteran Race Used for counselor reference/healthcare support
- Veteran Ethnicity Used for counselor reference/healthcare support
- Military Job Used for counselor reference/healthcare support
- Marital Status Used for counselor reference/healthcare support
- Doctor's office locations Used for healthcare support
- Pharmacy location Used for healthcare support
- Other health office locations Used for healthcare support
- Deployment location Used for counselor reference/healthcare support
- Deployment details— Used for counselor reference/healthcare support
- Guard Reserve episode details— Used for counselor reference/healthcare support
- Summary of Military Service Used for counselor reference/healthcare support
- Active-Duty Status Used for counselor reference/healthcare support

- Military Job Used for counselor reference/healthcare support
- Marital Status Used for counselor reference/healthcare support
- Member of the public's association with the Veteran Used for counselor reference/healthcare support
- Member of the public's dependent status Used for counselor reference/healthcare support
- Emergency Contact Information

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 https://www.archives.gov/records-mgmt/grs? This question is related to privacy control DM-2, Data Retention and Disposal.

The information is retained following the policies and schedules of VA's Records Management Service, General Control Schedule 10-1 can be found at the following link: https://www.va.gov/vhapublications/RCS10/rcs10-1.pdf.

3.3 The retention schedule approved by the VA records office and the National Archives and Records Administration (NARA).

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. Please work with the system VA Records Officer to answer these questions. This question is related to privacy control DM-2, Data Retention and Disposal.

3.3a Are all records stored within the system of record indicated on an approved disposition authority?

The information is retained following the policies and schedules of VA's Records management Service and NARA in "Department of Veterans Affairs Records Control Schedule 10-1". Record Control Schedule 10-1 can be found at the following link: https://www.va.gov/vhapublications/RCS10/rcs10-1.pdf.

3.3b Please indicate each records retention schedule, series, and disposition authority?

SFGCP complies with all VA retention and disposal procedures specified in VA Handbook 6300 and VA Directive 6500. Records contained in the Salesforce FedRAMP cloud will be retained if the information is needed in accordance with a NARA-approved retention period. VA manages Federal records in accordance with NARA statues including the Federal Records Act (44 U.S.C. Chapters 21, 29, 31, 33) and NARA regulations (36 CFR Chapter XII Subchapter B). SFGCP records are retained according to the Record Control Schedule 10-1 Section 4 (Disposition of Records). Request for Records Disposition Authority. Disposition Authority: DAA-0015-2013-0004.

https://www.archives.gov/files/records-mgmt/rcs/schedules/departments/department-of-veterans-affairs/rg-0015/daa-0015-2013-0004_sf115.pdf.3.4.

3.4 What are the procedures for the elimination or transfer of SPI?

Explain how records are destroyed, eliminated, or transferred to NARA at the end of their mandatory 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.

All electronic storage media used to store, process, or access records will be disposed of in adherence with the VA Directive 6500. https://www.va.gov/vapubs/search_action.cfm?dType=1.

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. This question is related to privacy control DM-3, Minimization of PII Used in Testing, Training and Research.

SF –Readjustment Counseling Service (RCS) does not use PII information of the users stored in this application for research, testing or training. Users accessing the system would have to undergo basic Privacy training such as, Privacy and Information Security Awareness and Rules of Behavior and information security training annually.

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. (Work with your System Privacy Officer (PO) to complete all Privacy Risk questions inside the document in this section).

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:

<u>Principle of Minimization:</u> The project retains only the information necessary for its purpose, additionally, the PII is retained only for as long as necessary and relevant to fulfill the specified purposes.

<u>Principle of Data Quality and Integrity:</u> The PIA should describe 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:

<u>Privacy Risk:</u> There is risk associated with longer retention time. The system could exceed the retention times to fulfill the VA mission. With longer retention times, the system is at a greater risk of data breach.

<u>Mitigation:</u> By adhering to the data retentions times, Salesforce –Readjustment Counseling Service (RCS) System mitigates the risk posed for information maintained in the system. VA Directive 6500 Cybersecurity Program serves as the authoritative source for addressing and managing a cybersecurity breach or attack (also known as a cyber incident) to contain and limit the damage.

Section 4. Internal Sharing/Receiving/Transmitting and Disclosure

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

PII Mapping of Components

4.1a Salesforce – Readjustment Counseling Service consists of 5 key components (servers/databases/instances/applications/software/application programming interfaces (API)). Each component has been analyzed to determine if any elements of that component collect PII. The type of PII collected by SF-RCS and the reasons for the collection of the PII are in the table below.

Note: Due to the PIA being a public facing document, please do not include server names in the table. The first table of 3.9a in the PTA should be used to answer this question.

Internal Components Table

Component Name (Database, Instances, Application, Software, Application Program Interface (API) etc.) that contains PII/PHI	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
---	---	---	------------------------------	---	------------

SF- Readjustment Counseling Service (SF-RCS)	Yes	Yes	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact Information	Identification of Veterans, background information on Veterans, Veterans' healthcare- related information	Electronic Transfer using Secure Socket Layer (SSL) Encryption
VADIR – VA Defense Information Repository	Yes	Yes	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact Information	Identification of Veterans, background information on Veterans, Veterans' healthcare- related information	Electronic Transfer using Secure Socket Layer (SSL) Encryption
RCSNet (Readjustment Counseling Service Network)	Yes	Yes	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits	Identification of Veterans, background information on Veterans, Veterans' healthcare- related information	Electronic Transfer using Secure Socket Layer (SSL) Encryption

VA Profile	Yes	Yes	information, Claims Decision, DD-214, Emergency Contact Information Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact	Identification of Veterans, background information on Veterans, Veterans' healthcare- related information	Electronic Transfer using Secure Socket Layer (SSL) Encryption
DTC Integration Platform (DIP)	Yes	Yes	Information Social Security Number, Benefits Information, Claims Decision, DD-214	Identification of Veterans, background information on Veterans, Veterans' healthcare- related information	Electronic Transfer using Secure Socket Layer (SSL) Encryption

4.1b List internal organizations information is shared/received/transmitted, the information shared/received/transmitted, and the purpose, and how the information is transmitted.

NOTE: Question 3.9b (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
VADIR – VA Defense Information Repository	Identification of Veterans, background information on Veterans, Veterans' healthcare-related information	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact Information	Compensation and Pension Record Interchange (CAPRI) electronic software package
RCS NET (Readjustment Counseling Service Network)	Identification of Veterans, background information on Veterans, Veterans' healthcare-related information	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact Information	Database connection using Secure JDBC which is sent over/using a TLS/HTTPS connection

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
VA Profile	Identification of Veterans, background information on Veterans, Veterans' healthcare-related information	Veteran File number (can be a unique number or Social Security Number), Veteran Name, Date of Birth, Email, Phone, Address, Gender, Race, Ethnicity, Military Job, Summary of Military Service, Marital Status, Doctors' Office locations, Pharmacy location, Other health office locations, Benefits information, Claims Decision, DD-214, Emergency Contact Information	Electronic Transfer using Secure Socket Layer (SSL) Encryption
DTC Integration Platform (DIP)	Identification of Veterans, background information on Veterans, Veterans' healthcare-related information	Social Security Number, Benefits Information, Claims Decision, DD-214	Electronic Transfer using Secure Socket Layer (SSL) Encryption

4.2 PRIVACY IMPACT ASSESSMENT: Internal sharing and disclosure

Discuss the privacy risks associated with the sharing of information within the VA network and what steps, if any, are currently being taken to mitigate those identified risks. (Work with your System ISSO to complete all Privacy Risk questions in this section.).

This question is related to privacy control UL-1, Internal Use.

Follow the format below:

<u>Privacy Risk:</u> There is a potential loss of information due to theft or destruction with the sharing of information with the listed internal systems.

Mitigation: Release of PII to unauthorized individuals is prohibited by the Privacy standards mandated to all VA employees, affiliates, trainees, volunteers, and contractors. Both contractor and VA employees are required to take Privacy, Health Insurance Portability and Accountability Act (HIPAA), and information security training annually. Safeguards are implemented to ensure data is not sent to unauthorized VA employees, including employee security and privacy

training, and required reporting of suspicious activity. Use of secure passwords, access for need to-know basis, Personal Identification Verification (PIV) Cards, Personal Identification Numbers (PIN), encryption, and access authorization are all measures that are utilized for the system.

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 List the external organizations (outside VA) that information shared/received. and information shared/received, and the purpose, and how the information transmitted and what measures are taken to ensure it is secure.

The sharing of information outside the agency must be compatible with the original collection. The sharing must be covered by an appropriate routine use in a SORN. If not covered, 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

List IT System	List the	List the specific	List agreements such	List the method
or External	purpose of	PII/PHI data	as: Contracts,	of transmission
Program Office	information	elements that are	MOU/ISA, BAA,	and the
information is	being shared	processed	SORN. etc. that permit	measures in
shared/received	/ received /	(shared/received/	external sharing (can	place to secure
with	transmitted	transmitted)	be more than one)	data
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.

If no External Sharing listed on the table above, (State there is no external sharing in both the risk and mitigation fields).

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: No external sharing, so not applicable for this system.

Mitigation: No external sharing, so not applicable for this system.

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 The notice provided to the individual before collection of the information. Please provide a copy and/or screen shot of a web notice of the notice as an Appendix-A 6.1 on the last page of the document. (A notice may include a posted privacy policy, a Privacy Act notice on forms, notice given to individuals by the sources system, or a system of records notice published in the Federal Register.) If notice was not provided, explain why.

These questions are 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.

6.1a Provide the Privacy Notice provided to the public by this system or any source systems. Include a copy of the notice in Appendix A of the PIA, the Federal Register citation, or Privacy Statement from collection of information such as forms or surveys.

The Department of Veterans Affairs does provide public notice that the system does exist. This notice is provided in 2 ways:

- 1. The SORNs define the information collected from Veterans, use of the information, and how the information is accessed and stored.
- 2. This Privacy Impact Assessment (PIA) also serves as a notice of this system.

6.1b If notice was not provided, explain why.

Notice provided via VA Privacy Policy Notice.

6.1c Provide how the notice provided at the time of collection meets the purpose of use for this system.

This system is an internally used VA system utilized for and by VA employees, so the notice is not applicable for the tool.

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.

Yes, a Veteran or other potential Vet Center client can refuse to consent to participating in the SF—Readjustment Counseling Service (RCS) Program. No penalty will occur, and Veteran benefits will not be affected or denied.

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.

Other than refusing to participate, individuals do not have a right to consent to particular uses of the information or to review or to contest the information in this system because the system is only used for the express purpose of tracking and analyzing the details of the outreach program.

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. (Work with your Privacy Officer (PO) to complete all Privacy Risk questions inside the document this section).

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

<u>Principle of Transparency:</u> This is referring to sufficient notice provided to the individual.

<u>Principle of Use Limitation:</u> The information used only for the purpose for which notice was provided either directly to the individual or through a public notice. The procedures in place must 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:

<u>Privacy Risk:</u> Risk is associated with individuals being unaware the system Salesforce – Readjustment Counseling Service System exists within the Department of Veterans Affairs.

<u>Mitigation</u>: The Department of Veterans Affairs does provide public notice that the system does exist. This notice is provided in 2 ways:

- 1. The SORNs define the information collected from Veterans, use of the information, and how the information is accessed and stored.
- 2. This Privacy Impact Assessment (PIA) also serves as a notice of this system.

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 The procedures that allow individuals to gain access to their information.

These questions are related to privacy control IP-2, Individual Access, and AR-8, Accounting of Disclosures.

7.1a 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 VA Public Access Link-Home (efoia-host.com) to obtain information about FOIA points of contact and information about agency FOIA processes.

As per the SORNs,

1) 24VA10A7/ 85 FR62406 Patient Medical Records-A https://www.govinfo.gov/content/pkg/FR-2020-10-02/pdf/2020-21426.pdf and 2) 64VA10/87 FR 25703 Readjustment Counseling Program (RCS) Vet Center Program-VA 2022-09374.pdf (govinfo.gov), individuals seeking information on the existence and content of records in this system pertaining to them should contact the system manager in writing as indicated below or write or visit the VA facility location where they normally receive their care. A request for access to records must contain the requester's full name, address, and telephone number, be signed by the requester and describe the records sought in sufficient detail to enable VA personnel to locate them with a reasonable amount of effort.

SYSTEM MANAGER(S): Officials responsible for policies and procedures: Chief Officer for Health Informatics, Department of Veterans Affairs, 810 Vermont Avenue NW, (105), Washington, DC 20420. Officials maintaining this system of records: Director, National Data Systems, Austin Information Technology Center, 1615 Woodward Street, Austin, Texas 78772. Telephone number 512–326–6780 (this is not a toll-free number).

7.1b 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)?

This system is not exempt from the Privacy Act.

7.1c 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 system is a Privacy Act system.

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.

Veteran data flows one way from VADIR to the Salesforce – RCS system, so a two-way connection to any external data source does not exist. Veterans can reach out to their assigned VA Medical Center (VAMC) for the correct process to address data inaccuracies in VADIR.

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 will be made aware of the procedure for correcting their information when they agree to join the Salesforce - VA Vet Centers Readjustment Counseling Service (RCS) program. Veterans can reach out to their assigned VA Medical Center (VAMC) for the correct process to address data inaccuracies.

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

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

A Veteran who wishes to determine whether a record is being maintained by the Readjustment Counseling Service Vet Center Program under his or her name or other

personal identifier or wishes to determine the contents of such records should submit a written request or apply in person to: (1) The Vet Center Director, (2) the RCS Deputy District Director having supervisory responsibility for the Vet Center, with whom he or she had contact, or (3) the Deputy Chief Readjustment Counseling Officer (10RCS), VA Central Office, 810 Vermont Ave. NW, Washington, DC 20420. Inquiries should include the individual's full name and Social Security number.

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. (Work with your Privacy Officer (PO) to complete all Privacy Risk questions in this section).

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

<u>Principle of Individual Participation:</u> The individual must be provided with the ability to find out whether a project maintains a record relating to them.

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

<u>Principle of Individual Participation:</u> The mechanism by which an individual is able to prevent information about them obtained for one purpose from being used for other purposes without their knowledge.

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

Follow the format below:

<u>Privacy Risk:</u> Because Salesforce - RCS is not the system of record for Veteran information, nor does it have the ability to correct erroneous information imported from VADIR. Therefore, the propensity exists for incorrect information to remain that way.

Mitigation: A Veteran who wishes to determine whether a record is being maintained by the Readjustment Counseling Service Vet Center Program under his or her name or other personal identifier or wishes to determine the contents of such records should submit a written request or apply in person to: (1) The Vet Center Director, (2) the RCS Deputy District Director having supervisory responsibility for the Vet Center, with whom he or she had contact, or (3) the Deputy Chief Readjustment Counseling Officer (10RCS), VA Central Office, 810 Vermont Ave. NW, Washington, DC 20420. Inquiries should include the individual's full name and Social Security number.

<u>Privacy Risk:</u> Risk is associated with individuals having no proper guidance regarding access, redress and correction of their information being captured by the Salesforce –Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) system.

<u>Mitigation:</u> By publishing this PIA and the applicable SORN, the VA makes the public aware of the information being captured by the Salesforce – Readjustment Counseling Service (RCS) system.

Section 8. Technical Access and Security

The following questions are intended to describe technical safeguards and security measures. (Work with your ISSO to complete this section).

8.1 The procedures in place to determine which users may access the system, must be documented.

These questions are related to privacy control AR-7, Privacy-Enhanced System Design and Development.

8.1a Describe the process by which an individual receives access to the system?

Managers must approve the VA employees accessing/ requiring to access the Salesforce – Veteran Outreach for VA Vet Centers Readjustment Counseling Service (RCS) system. The access to the application the manager/ sponsor should provide a description of the user needs, user's role, and security caveats that apply to the user. The roles will be governed by the permission sets that allow field level control of the information and data. Per VA Directive 6500, 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.

8.1b 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?

The VA 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 are performed through the use of Talent Management System (TMS).

The Salesforce Digital Transformation Center (DTC) contractor team supports the VA Salesforce production environment and as such has access to the VA Salesforce system and data contained therein. This includes PII and VA Sensitive Information. The user roles will be governed by permission sets that allow field level control of the information and data. This information is documented in the user provisioning process with the Digital Transformation Center.

8.1c 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.

Role-based hierarchy of profiles and permission sets are applied for users accessing the platform. Only authorized VA users can access this tool. Users access the Salesforce – Readjustment Counseling Service (SF-RCS) system using Single Sign On (SSO) and two factor authentication to log in. Additionally, field audit trails and event monitoring provided by Salesforce platform assists in ensuring only assigned users have access to specific records within the Salesforce – Readjustment Counseling Service (SF-RCS) system.

8.2. Contractor signed Non-Disclosure Agreement (NDA), Business Associate Agreement (BAA) etc. in place.

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.

8.2a Has a contractor confidentiality agreement, Business Associate Agreement (BAA), or a Non-Disclosure Agreement (NDA) been developed for contractors who work on the system?

The Salesforce Digital Transformation Center (DTC) contractor team supports the VA Salesforce production environment and as such has access to the VA Salesforce system and data contained therein. This includes PII and VA Sensitive Information. The contractors who provide support to the system are required to complete annual VA Privacy and Information Security and Rules of Behavior training via the VA's Talent Management System (TMS). The Salesforce DTC team will maintain users, update applications and components, introduce new functionality, govern deployment activities, and ensure user operability. The Salesforce DTC members are not primary users VA Salesforce. The ISO will monitor and review VA Salesforce related support contracts on a regular basis to ensure no gaps in support for the users. Developers do not have access to production PII.

8.2a. Will VA contractors have access to the system and the PII?

Yes, VA contractors will be involved in the design and development of the system. However, contractors will only use 'dummy' data to test the system and will not have access to PII.

8.2b. What involvement will contractors have with the design and maintenance of the system?

Contractors will be responsible for design of the system and involved in the maintenance of the system.

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.

General Training includes VA Privacy and Information Security Awareness and Rules of Behavior, TMS 10203 - Privacy and Health Insurance Portability and Accountability Act (HIPPA), VA On-boarding enterprise-wide training, and annual information security training. After the user's initial acceptance of the Rules, the user must reaffirm their acceptance annually as part of the privacy and security awareness training. Acceptance is obtained via electronic acknowledgment and is tracked through the Talent Management (TMS) system.

8.4 The Authorization and Accreditation (A&A) completed for the system.

8.4a If completed, provide:

- 1. The Security Plan Status: Approved
- 2. The System Security Plan Status Date: 04/05/2023
- 3. The Authorization Status: Active
- 4. The Authorization Date: 08/07/2023
- 5. The Authorization Termination Date: 08/06/2025
- 6. The Risk Review Completion Date: 08/06/2025
- 7. The FIPS 199 classification of the system (LOW/MODERATE/HIGH): Moderate

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

8.4b If not completed or In Process, provide your **Initial Operating Capability (IOC) date.**Not applicable. The A&A has been completed.

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), Desktop as a Service (DaaS), Mobile Backend as a Service (MBaaS), Information Technology Management as a Service (ITMaaS). This question is related to privacy control UL-1, Information Sharing with Third Parties. (Refer to question 1.8 of the PTA)

Yes, the Salesforce —Readjustment Counseling Service System utilizes Salesforce Gov Cloud Plus. Salesforce Government Cloud Plus is hosted in the AWS GovCloud. The

Salesforce Government Cloud Plus (SFGCP-E) is built on the underlying Salesforce Force.com that is hosted in a FedRAMP Certified FISMA High environment which is in the Amazon Web Services (AWS) GovCloud West. This software utilizes the PaaS Service of Salesforce Gov Cloud Plus.

9.2 Does the contract with the Hosting 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). (Refer to question 3.3.1 of the PTA) This question is related to privacy control AR-3, Privacy Requirements for Contractors, and Service Providers.

Yes, VA has full ownership of the PII/PHI that will be shared through the Salesforce – Readjustment Counseling Service (RCS) System. Contract agreement "Salesforce Subscription Licenses, Maintenance and Support", Contract Number: NNG15SD27B.

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.

Ancillary data is not collected by Salesforce. VA has full ownership over the data stored in the SF –Readjustment Counseling Service (RCS) system

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.

VA has full authority over the data stored in the SF—Readjustment Counseling Service (RCS) system.

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).

The system does not utilize RPA.

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		
UL-1	Internal Use		
UL-2	Information Sharing with Third Parties		

Version date: October 1, 2024

Page **31** of **34**

Signature of Responsible Officials
The individuals below attest that the information they provided in this Privacy Impact Assessment is true and accurate.
Privacy Officer, Lisa Walker
Information System Security Officer, James Boring
Information System Owner, Michael Domanski

Version Date: October 1, 2024 Page 32 of 34

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; screen shot of a website collection privacy notice).

VA Privacy Policy

SORN 24VA10A7/ 85 FR62406 Patient Medical Records-A https://www.govinfo.gov/content/pkg/FR-2020-10-02/pdf/2020-21426.pdf and

SORN 64VA10/87 FR 25703 Readjustment Counseling Program (RCS) Vet Center https://www.govinfo.gov/content/pkg/FR-2022-05-02/pdf/2022-09374.pdf

Version date: October 1, 2024

Page **33** of **34**

HELPFUL LINKS:

Records Control Schedule 10-1 (va.gov)

General Records Schedule

https://www.archives.gov/records-mgmt/grs.html

National Archives (Federal Records Management):

https://www.archives.gov/records-mgmt/grs

VA Publications:

https://www.va.gov/vapubs/

VA Privacy Service Privacy Hub:

https://dvagov.sharepoint.com/sites/OITPrivacyHub

Notice of Privacy Practice (NOPP):

VHA Directive 1605.04 IB 10-163p (va.gov)

Version date: October 1, 2024

Page **34** of **34**