

## APPENDIX B

### Requirements Relating to Confidentiality and Privacy in Data Processing Contracts

#### I. Purpose

This appendix provides the wording to be used when the Centers for Disease Control (CDC) contracts with any organization outside CDC for the processing of information possessed by CDC which identifies individuals and/or establishments and for which confidentiality has been assured. Such contracts must contain stipulations to assure confidentiality and physical security of the information and to assure that the contractor's employees abide by the stipulations.

#### II. Background

The Privacy Act of 1974 (5 U.S.C. 552a) requires the safeguarding of individuals, and Section 308(d) of the Public Health Service Act (42 U.S.C. 242m) requires the safeguarding of both individuals and establishments against invasion of privacy. As a result of the provisions of these Acts, contractors who process information identifying individuals and/or establishments must stipulate as to the appropriate safeguards to be taken regarding such information. Wording is provided for use in contracts when such information is processed by contractors outside CDC.

#### III. Policy

The wording given in the following section is to be used in contracts calling for processing by contractors of confidential data. If the particular circumstances of a given contract imply the need for different wording from that prescribed as follows, the wording may be changed, provided that approval for the new wording is obtained from the Director, CDC.

##### Safeguards for Individuals and Establishments Against Invasions of Privacy

In accordance with Subsection (m) of the Privacy Act of 1974 (5 U.S.C. 552a)<sup>2</sup> and Section 308(d) of the Public Health Service Act (42 U.S.C. 242m), the contractor is required to comply with the applicable provisions of the Privacy Act and to undertake other safeguards for individuals and establishments against invasions of privacy.

<sup>2</sup>If the data provided to the contractor relate only to establishments and not to individuals, then references to the Privacy Act of 1974 should be deleted from the prescribed contract wording.

To provide these safeguards in performance of the contract, the contractor shall:

A. Be bound by the following assurance:

**Assurance of Confidentiality**

In accordance with Section 308(f) of the Public Health Service Act (42 U.S.C. 242m), the contractor assures that the confidentiality of this information will be maintained and that no information used in the course of this activity will be disclosed in a manner in which the individual or establishment is identifiable, unless the individual or establishment has consented to such disclosure.

B. Maintain the following safeguards to assure that confidentiality is protected by the contractor's employees and to provide for the physical security of the records:

1. After having read the above assurance of confidentiality, each employee of the contractor participating in this project is to sign the following statement of understanding:

I have carefully read and understand the assurance which pertains to the confidential nature of all records to be handled in regard to this survey. As an employee of the contractor I understand that I am prohibited by law from disclosing any such confidential information to which I may have access as a result of this contract. I understand that any willful and knowing disclosure in violation of the Privacy Act of 1974 is a misdemeanor and would subject the violator to a fine of up to \$5,000.

(Signature)

(Date)

2. To preclude observation of confidential information by persons not employed on the project, the contractor shall maintain all confidential records that identify individuals or establishments or from which individuals or establishments could be identified under lock and key.

Specifically, at each site where these items are processed or maintained, all confidential records that will permit identification of individuals or establishments are to be kept in locked containers when not in use by the contractor's employees. The keys or means of access to these containers are to be held by a limited number of the contractor's staff at each site. When confidential records are being used in a room, admittance to the room is to be restricted to employees pledged to confidentiality and employed on this project. If at any time the contractor's employees are absent from the room, it is to be locked.

3. The contractor and his professional staff will take steps to insure that the intent of the statement of understanding is enforced at all times through appropriate qualifications standards for all personnel working on this project and through adequate training and periodic followup procedures.

C. Release no information from the data obtained or used under this contract to any person except as specified by the contract.

D. By a specified date, which may be no later than the date of completion of the contract, return all study data to CDC or destroy all such data, as specified by the contract.

**IV. Dissemination**

All contracts involving the processing of information on individuals and/or establishments, in which the individuals or establishments are identified, must contain the above wording except when the study subjects had been advised that all of the data to be received from them were to be made public. Center/Institute/Office Directors should make sure that employees of CDC are familiar with contract requirements.



**APPENDIX D**  
**REQUEST FOR**  
**AUTHORIZATION TO GIVE ASSURANCE OF CONFIDENTIALITY**

Control No. \_\_\_\_\_

(Instructions for completing this form are on the reverse side. Please submit seven copies of all attachments.)

**1. REQUESTED BY:**

Name: \_\_\_\_\_ Center/Institute/Office: \_\_\_\_\_  
Room No.: \_\_\_\_\_ Bldg.: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Period of time authorization needed for data collection: From \_\_\_\_\_ To \_\_\_\_\_  
 New Request     Amended Request (Control No. of previous request: \_\_\_\_\_)  
Approval of Request: \_\_\_\_\_ Signature of Center/Institute/Office Director    Date: \_\_\_\_\_

**2. TITLE OF PROJECT:**

**3. JUSTIFICATION STATEMENT:** Please attach the justification statement. See instructions on reverse side.

**4. FOR OD USE ONLY**

Received in DPPE (Date): \_\_\_\_\_  
Confidentiality Review Group recommends: [Check appropriate box]     Approval     Disapproval  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Chairman, CRG  
Assurance of confidentiality is authorized:  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Director, CDC

**OFFICERS NOTIFIED:**

- |   |  |
|---|--|
| <input type="checkbox"/> Director, Requesting Center/Institute/Office | <input type="checkbox"/> CDC Legal Advisor                       |
| <input type="checkbox"/> Freedom of Information Officer               | <input type="checkbox"/> Director, Procurement and Grants Office |
| <input type="checkbox"/> ADP Security Officer                         | <input type="checkbox"/> Human Subjects Review Coordinator       |
| <input type="checkbox"/> CDC Records Officer                          | <input type="checkbox"/> Project Clearance Officer               |
| <input type="checkbox"/> Privacy Act Officer                          | <input type="checkbox"/> Other, _____                            |

Specify

## INSTRUCTIONS FOR REQUESTING AUTHORIZATION TO GIVE ASSURANCE OF CONFIDENTIALITY

This form and justification statement should be submitted through OPPE to the Director, CDC, by the Director, Center/Institute/Office. These materials should document the need for authority to give assurances of confidentiality based upon Section 308(d) of the Public Health Service (PHS) Act, and relate only to the conduct of statistical and epidemiological activities authorized under Sections 304, 306, and 307 of the PHS Act.

1. Insert the name of the requesting Center/Institute/Office, the name and locale of principal investigator for the project, and the period of time authorization is needed for data collection. All requests must be approved and signed by the Center/Institute/Office Director or authorized designee. If this is an amendment to a previous request, please include control number of that previous request.
2. Insert the title of the statistical or epidemiological project related to this request.
3. A justification statement should be attached and should include detailed information on each of the following:
  - A. Purpose of Project — Along with the programmatic purpose(s) for the conduct of the project, include the type of data to be collected and the uses which will be made of the information collected.
  - B. Justification — Please give detailed information on the following issues in your justification:
    - (1) Extent to which the assurance of confidentiality is important to protection of the individual or institution.
    - (2) Extent to which the individual or establishment will not furnish or permit access to it unless an assurance of confidentiality is given.
    - (3) Extent to which the information cannot be obtained with the same degree of reliability from sources that do not require an assurance.
    - (4) Extent to which the information is essential to the success of the particular statistical or epidemiological project and is not duplicative of other information gathering activities of the Department.
    - (5) Extent to which the giving of the assurance of confidentiality will restrain CDC from carrying out any of its responsibility.
    - (6) Extent to which the advantages of assuring confidentiality outweigh the disadvantages of doing so.

Please submit seven copies of this justification and all other attachments.

4. Notification of approval will be made by the return to the Center/Institute/Office of a copy of this form along with any additional information as necessary. If the authority to assure confidentiality is disapproved, the Center/Institute/Office will be notified by the Director, CDC, outlining the reasons for disapproval.
- CDC 0.970 2-83 (BACK)