



PRIVACY IMPACT ASSESSMENT MODULE 1

PRELIMINARY PRIVACY SCREENING TOOL

This form helps to assess whether a formal Privacy Impact Assessment (PIA) is required. Section 42.1.(1) of the Access to Information and Protection of Privacy Act (ATIPP Act) defines a PIA to be:

“an assessment that is conducted by a public body to determine if a current or proposed enactment, system, project, program or service, including a common or integrated program or service, meets or will meet the requirements of this Part.”

This form must be completed during the development of a proposed enactment, system, project, program or during the development of a proposed common or integrated program or service that involves the collection, use and/or disclosure of personal information. Program managers should consult with their public body’s Department Privacy Officer or Access and Privacy Coordinator when completing this section.

PROJECT/ACTIVITY OFFICIAL TO COMPLETE

Activity Title:

Employee Name:

Job Title:

Date:

Public Body:

Division:

Telephone:

Email:

PROJECT/ACTIVITY DESCRIPTION

Identify if the PIA is for:

Proposed Enactment, System, Project, Program or Service
Proposed Common or Integrated Program or Service

Do you have the legislative and/or program authority to collect, use or disclose personal information in the manner in which the activity under consideration envisages?

Yes

No (obtain legislative authority before proceeding)

Document the authority under which the information is being used and any known or foreseeable sensitivities related to the use of that personal information.



PRIVACY IMPACT ASSESSMENT MODULE 1

PRELIMINARY PRIVACY SCREENING TOOL

Following to be Completed by Program Manager:

Provide a broad description of the project/activity, including:

- The activity's overall aims (including how it ties in with the organization's functions or activities);
- The activity lead along with key responsibilities and accountabilities;
- The drivers for, or reasons behind, the activity;
- The scope of the activity; and
- Any links with existing programs.

If the activity being proposed involves modifications to an existing program, first describe the current program and then the proposed changes. In these circumstances, it will also be relevant to provide details of any prior PIAs undertaken in relation to the existing program. **Managers are encouraged to use program information already available in completing this section.**



PRIVACY IMPACT ASSESSMENT MODULE 1

PRELIMINARY PRIVACY SCREENING TOOL

COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

Does the activity involve the **collection** of personal information?

Yes No

Does the activity envision a new use for personal information that is already held by the organization?

Yes No

Does the activity change the way in which personal information already held is **stored, secured or retained**?

Yes No

Will the activity **change** the way in which personal information already held is **disclosed**?

Yes No

Will the activity **affect or restrict** an individual's **access** to their own personal information?

Yes No

*Conditions on requirement to move forward:

Answers YES to any of questions 1-5 suggest that further privacy analysis is required for the activity or proposal under consideration. If this is the case, complete the following questions, sign this form and proceed to Module 2 "Preliminary Risk Assessment" of the PIA Modules. If all answers to questions 1-5 were NO, sign this form and retain the document with the activity records for future reference.

If you answered "yes" to any of the questions above please complete the following:

1. Briefly describe the elements of personal information that will be collected, used or disclosed (e.g., name, address, date of birth).

2. Briefly describe the general purposes for which the information is required. If the proposal involves modifications to an existing program, describe the changes, if any, to the handling of any personal information that would be involved, should the proposal be implemented.



PRIVACY IMPACT ASSESSMENT MODULE 1

PRELIMINARY PRIVACY SCREENING TOOL

SIGNATORY AND APPROVAL

Program Manager:

Date:

Department Privacy
Officer or Access and
Privacy Coordinator:

Date: