

# Privacy Impact Assessment Checklist & Worksheet

Process/Program/ Project being Assessed: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

Privacy Impact Assessment (PIA) conducted by: \_\_\_\_\_

Job Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Description of Process/Program/Project being Assessed:

---

---

---

---

---

---

---

---

## **Part I – Preliminary Review**

Is personal information being collected? Yes  No

**If No:** Assessment is complete

**If Yes:** Has a previous Privacy Impact Assessment been completed? Yes  No

**If No:** Complete *Part II – Detailed Assessment*

**If Yes,** has any information changed since the previous Privacy Impact Assessment? Yes  No

**If No:** Assessment is complete

Date of previous Assessment \_\_\_\_\_  
( Copy attached)

**If Yes:** Complete *Part II - Detailed Assessment*

**Part II – Detailed Assessment**

***Collection of Information***

1. What types of personal information are being collected?

_____	_____
_____	_____
_____	_____
_____	_____

2. Is there a legitimate education-related purpose for the collection of the personal information? Yes  No

*Purpose:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Is personal information collected for a program, activity, or service that will be of benefit to the subject individual? Yes  No

*Activity/Service:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Is every item of information being collected necessary for the purposes of the process/program? Yes  No

5. Will individuals be informed as to the anticipated uses and/or disclosures of their personal information? Yes  No

*Information will be provided by*  
 *written handout*       *information on questionnaire*  
 *group meeting*       *meeting with individual*  
: \_\_\_\_\_

6. Is personal information being collected directly from the individual? Yes  No

If No, are there procedures in place to ensure that personal information is as accurate and complete as possible? Yes  No   
*See Board Policy/Procedure #:* \_\_\_\_\_

7. Is personal information being used only for its originally Intended purpose? Yes  No

If not, has consent been obtained to use the information in a different manner than originally intended? Yes  No

***Storage and Disposal of Information***

8. Are procedures clear for:

- identification of personnel who will have access to the information Yes  No
- physical access and security controls such as locked offices and filing cabinets, clean desk policy, padlocked laptop computers, etc.) Yes  No
- information technology access and security controls

(encryption, digital signatures, secure passwords, etc.) Yes  No   
See Board Policy/Procedure #: \_\_\_\_\_

9. Have retention periods for the information been identified? Yes  No   
Information will be retained until \_\_\_\_\_  
Or See Board Policy/Procedure #: \_\_\_\_\_

10. Are persons responsible for storage and disposal of information identified? Yes  No   
Person Responsible: \_\_\_\_\_

### **Access to Information**

11. Are procedures in place to accommodate individual requests for access to personal information? Yes  No   
See Board Policy/Procedure #: \_\_\_\_\_

12. Are procedures in place to deny an individual request for access to personal information when appropriate? Yes  No   
See Board Policy/Procedure #: \_\_\_\_\_

13. Are procedures in place to correct an individual's personal information, if requested? Yes  No   
See Board Policy/Procedure #: \_\_\_\_\_)

14. Will informed consent in writing be obtained from the individual before the disclosure of personal information? Yes  No   
If No, will disclosure be made only in accordance with LAFOIPP and board policy? Yes  No

15. Will it be necessary to disclose personal information outside the division or to any persons who are not employees of the board? Yes  No   
Disclosure will be made to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Will information be used or disclosed outside of Saskatchewan? Yes  No   
To:(Location) \_\_\_\_\_

17. Will information be used or disclosed outside of Canada? Yes  No   
To:(Location) \_\_\_\_\_

### **Other Privacy Obligations**

18. Are there any other privacy obligations in addition to LAFOIPP:

- collective bargaining agreement Yes  No
- contractual agreement Yes  No
- promises or undertakings Yes  No
- other \_\_\_\_\_ Yes  No

Copy of relevant provision attached to Assessment

**Consultations**

19. Have key stakeholders been provided an opportunity for comment on the issues raised in this PIA?

Yes  No

*Stakeholders identified:*

*Type of Consultation*

*Completed*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Copies of relevant documentation attached to Assessment*

**Audit and Reporting**

20. Are arrangements in place for an audit of the Procedure/ Program/Project (including access to personal information, compliance with policies and procedures, enforcement and reporting)?

Yes  No

**Managing Privacy Risks**

21. If privacy risks have been identified, have methods to avert, mitigate or accept risks been identified as part of the Procedure/Program/Project design?

Yes  No

22. Are procedures in place to alert individuals if their personal information has been released inappropriately?

Yes  No

**Other Considerations Identified:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature of Employee Conducting Assessment**

\_\_\_\_\_  
**Date**