

Chapter 14

PROGRAM INTEGRITY

INTRODUCTION

The PHA is committed to ensuring that subsidy funds made available to the PHA are spent in accordance with HUD requirements.

This chapter covers HUD and OHA policies designed to prevent, detect, investigate, and resolve instances of program abuse or fraud. It also describes the actions that will be taken in the case of unintentional errors and omissions.

Part I: Preventing, Detecting, and Investigating Errors and Program Abuse. This part presents OHA policies related to preventing, detecting, and investigating errors and program abuse.

Part II: Corrective Measures and Penalties. This part describes the corrective measures the PHA must and may take when errors or program abuses are found.

Part III: EIV Security Policy and Procedures. This part describes the OHA policies and procedures related to EIV Security

PART I: PREVENTING, DETECTING, AND INVESTIGATING ERRORS AND PROGRAM ABUSE

14-I.A. PREVENTING ERRORS AND PROGRAM ABUSE

HUD created the Enterprise Income Verification (EIV) system to provide PHAs with a powerful tool for preventing errors and detecting program abuse. PHAs are required to use the EIV system in its entirety in accordance with HUD administrative guidance [24 CFR 5.233]. PHAs are further required to:

- Provide applicants and participants with form HUD-52675, “Debts Owed to PHAs and Terminations”
- Require all adult members of an applicant or participant family to acknowledge receipt of form HUD-52675 by signing a copy of the form for retention in the family file

OHA Policy

To ensure that the OHA’s HCV program is administered effectively and according to the highest ethical and legal standards, the OHA will employ a variety of techniques to ensure that both errors and intentional program abuse are rare.

The OHA will discuss program compliance and integrity issues during the voucher briefing sessions described in Chapter 5.

The OHA will provide each applicant and post for participant/public view a copy of “Is Fraud Worth It?” (form HUD-1141-OIG), which explains the types of actions a family must avoid and the penalties for program abuse.

The OHA may elect to provide each applicant and participant with a copy of “What You Should Know about EIV,” a guide to the Enterprise Income Verification (EIV) system published by HUD as an attachment to Notice PIH 2010-19. In such case, the OHA would require the head of each household to acknowledge receipt of the guide by signing a copy for retention in the family file.

The OHA will place a warning statement about the penalties for fraud (as described in 18 U.S.C. 1001 and 1010) on key OHA forms and form letters that request information from a family or owner.

OHA staff will be required to review and explain the contents of all HUD- and OHA-required forms prior to requesting family member signatures.

At every regular reexamination, OHA staff will explain any changes in HUD regulations or OHA policy that affect program participants.

The OHA will offer first-time owners (or their agents) the opportunity to participate in a briefing session on HAP contract requirements.

The OHA will provide owners with ongoing information about the program, with an emphasis on actions and situations to avoid.

The OHA will provide each OHA employee with the necessary training on program rules and the organization’s standards of conduct and ethics.

For purposes of this chapter the term *error* refers to an unintentional error or omission. *Program abuse or fraud* refers to a single act or pattern of actions that constitute a false statement, omission, or concealment of a substantial fact, made with the intent to deceive or mislead.

14-I.B. DETECTING ERRORS AND PROGRAM ABUSE

In addition to taking steps to prevent errors and program abuse, the PHA will use a variety of activities to detect errors and program abuse.

Quality Control and Analysis of Data

Under the Section 8 Management Assessment Program (SEMAP), HUD requires the PHA to review a random sample of tenant records annually to determine if the records conform to program requirements and to conduct quality control inspections of a sample of units to ensure HQS compliance [24 CFR, Part 985]. (See Chapter 16 for additional information about SEMAP requirements).

OHA Policy

In addition to the SEMAP quality control requirements, the OHA will employ a variety of methods to detect errors and program abuse.

The OHA routinely will use HUD and other non-HUD sources of up-front income verification. This includes The Work Number and any other private or public databases available to the OHA.

At each annual reexamination, current information provided by the family will be compared to information provided at the last annual reexamination to identify inconsistencies and incomplete information.

The OHA will compare family-reported income and expenditures to detect possible unreported income.

Independent Audits and HUD Monitoring

OMB Circular A-133 requires all PHAs that expend \$500,000 or more in federal awards annually to have an independent audit (IPA). In addition, HUD conducts periodic on-site and automated monitoring of PHA activities and notifies the PHA of errors and potential cases of program abuse.

OHA Policy

The OHA will use the results reported in any IPA or HUD monitoring reports to identify potential program abuses as well as to assess the effectiveness of the OHA's error detection and abuse prevention efforts.

Individual Reporting of Possible Errors and Program Abuse

OHA Policy

The OHA will encourage staff, program participants, and the public to report possible program abuse.

14-I.C. INVESTIGATING ERRORS AND PROGRAM ABUSE

When the PHA Will Investigate

OHA Policy

The OHA will review all referrals, specific allegations, complaints, and tips from any source including other agencies, companies, and individuals, to determine if they warrant investigation. In order for the OHA to investigate, the allegation must contain at least one independently-verifiable item of information, such as the name of an employer or the name of an unauthorized household member.

The OHA will investigate when inconsistent or contradictory information is detected through file reviews and the verification process.

Consent to Release of Information [24 CFR 982.516]

The PHA may investigate possible instances of error or abuse using all available PHA and public records. If necessary, the PHA will require HCV families to sign consent forms for the release of additional information.

Analysis and Findings

OHA Policy

The OHA will base its evaluation on a preponderance of the evidence collected during its investigation.

Preponderance of the evidence is defined as evidence which is of greater weight or more convincing than the evidence which is offered in opposition to it; that is, evidence that as a whole shows that the fact sought to be proved is more probable than not. Preponderance of evidence may not be determined by the number of witnesses, but by the greater weight of all evidence

For each investigation the OHA will determine (1) whether an error or program abuse has occurred, (2) whether any amount of money is owed the OHA, and (3) what corrective measures or penalties will be assessed.

Consideration of Remedies

All errors and instances of program abuse must be corrected prospectively. Whether the PHA will enforce other corrective actions and penalties depends upon the nature of the error or program abuse.

OHA Policy

In the case of family-caused errors or program abuse, the OHA will take into consideration (1) the seriousness of the offense and the extent of participation or culpability of individual family members, (2) any special circumstances surrounding the case, (3) any mitigating circumstances related to the disability of a family member, (4) the effects of a particular remedy on family members who were not involved in the offense.

In the case of owner-caused errors or program abuse, the OHA will take into consideration (1) the seriousness of the offense, (2) the length of time since the violation has occurred, and (3) the effects of a particular remedy on family members who were not involved in the offense.

Notice and Appeals

OHA Policy

The OHA will inform the relevant party in writing of its findings and remedies within 10 business days of the conclusion of the investigation. The notice will include (1) a description of the error or program abuse, (2) the basis on which the OHA determined the error or program abuses, (3) the remedies to be employed, and (4) the family's right to appeal the results through the informal review or hearing process, if applicable (see Chapter 16).

PART II: CORRECTIVE MEASURES AND PENALTIES

14-II.A. SUBSIDY UNDER- OR OVERPAYMENTS

A subsidy under- or overpayment includes (1) an incorrect housing assistance payment to the owner, (2) an incorrect family share established for the family, and (3) an incorrect utility reimbursement to a family.

Corrections

Whether the incorrect subsidy determination is an overpayment or underpayment of subsidy, the PHA must promptly correct the HAP, family share, and any utility reimbursement.

OHA Policy

1. Standards for Timely Reporting of Changes –

OHA requires that families report interim changes in writing to the OHA within 10 calendar days of when a change occurs in income, assets, family composition, or within 10 calendar days of a change in the full-time student status of any adult (age 18 or over) members of the tenant family. Any information, documentation or signature requested from the family which is needed to verify the change must be provide within three working days of the change.

If the change is not reported within the required time period, or if the family fails to provide signatures, certifications or documentation (in the time period requested by the OHA), it will be considered untimely reporting.

2. Procedures When the Change is Reported in a Timely Manner

The OHA will notify the family of any changes in Tenant Rent to be effective according to the following guidelines:

- a. Increases in the Tenant Rent will become effective on the first of the month following at least 30 days' notice.
- b. Decreases in Tenant Rent will become effective the first of the month following the month in which the tenant reported the change and provided requested information, documents, and signatures.

The change may be implemented based on documentation provided by the family, pending third-party written verification.

3. Procedures When the Change is Not Reported by the Tenant in a Timely Manner

If the family causes a delay in the interim process or does not report the change as described under the Standard of Timely Reporting of Changes described above, the family will have caused an unreasonable delay in the interim reexamination processing and the following guidelines will apply:

- a. Increase in Tenant Rent will be effective retroactive to the first of the month following the month in which the misrepresentation, failure to report or increase income occurred. The family will be liable for any underpaid rent, and may be required to sign a Repayment Agreement.

- b. Decrease in Tenant Rent will be effective on the first of the month following completion of processing by the OHA and not retroactively.
- 4. Procedures When the Change is not Processed by the OHA in a Timely Manner

“Processed in a timely manner” means that the change goes into effect on the date it should when the family reports the change in a timely manner and does not cause a delay so that the processing of the change is delayed. If the change cannot be made effective on that date and the family has fully cooperated with all requests in a timely manner, the change has not been processed by the OHA in a timely manner.

Therefore, an increase will be effective after the required 30 days’ notice prior to the first of the month after completion of processing by the OHA

If the change resulted in a decrease, the overpayment by the family will be calculated retroactively to the date it should have been effective, and the family will be credited for the amount.

Reimbursement

Whether the family or owner is required to reimburse the PHA or the PHA is required to make retroactive subsidy payments to the owner or family depends upon which party is responsible for the incorrect subsidy payment and whether the action taken was an error or program abuse. Policies regarding reimbursement are discussed in the three sections that follow.

14-II.B. FAMILY-CAUSED ERRORS AND PROGRAM ABUSE

Family obligations and general administrative requirements for participating in the program are discussed throughout this plan. This section deals specifically with errors and program abuse by family members.

An incorrect subsidy determination caused by a family generally would be the result of incorrect reporting of family composition, income, assets, or expenses, but also would include instances in which the family knowingly allows the PHA to use incorrect information provided by a third party.

Family Reimbursement to PHA [HCV GB pp. 22-12 to 22-13]

OHA Policy

In the case of family-caused errors or program abuse, the family will be required to repay any excess subsidy received. The OHA may, but is not required to, offer the family a repayment agreement in accordance with Chapter 16. If the family fails to repay the excess subsidy, the OHA will terminate the family's assistance in accordance with the policies in Chapter 12.

PHA Reimbursement to Family [HCV GB p. 22-12]

OHA Policy

The OHA will not reimburse the family for any underpayment of assistance when the underpayment clearly is caused by the family.

Prohibited Actions

An applicant or participant in the HCV program must not knowingly:

- Make a false statement to the PHA [Title 18 U.S.C. Section 1001].
- Commit fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program [24 CFR 982.552(c)(iv)].

OHA Policy

Any of the following will be considered evidence of family program abuse:

Payment to the owner in excess of amounts authorized by the OHA for rent, security deposit, and additional services

Offering bribes or illegal gratuities to the OHA Board of Commissioners, employees, contractors, or other OHA representatives

Offering payments or other incentives to the owner or a third party as an inducement for the third party to make false or misleading statements to the OHA on the family's behalf

Use of a false name or the use of falsified, forged, or altered documents

Intentional misreporting of family information or circumstances (e.g. income, family composition)

Omitted facts that were obviously known by a family member (e.g., not reporting employment income)

Admission of program abuse by an adult family member

The OHA may determine other actions to be program abuse based upon a preponderance of the evidence, as defined earlier in this chapter.

Penalties for Program Abuse

In the case of program abuse caused by a family the PHA may, at its discretion, impose any of the following remedies.

- The PHA may require the family to repay excess subsidy amounts paid by the PHA, as described earlier in this section.
- The PHA may require, as a condition of receiving or continuing assistance, that a culpable family member not reside in the unit. See policies in Chapter 3 (for applicants) and Chapter 12 (for participants).
- The PHA may deny or terminate the family's assistance following the policies set forth in Chapter 3 and Chapter 12 respectively.
- The PHA may refer the family for state or federal criminal prosecution as described in section 14-II.E.

14-II.C. OWNER-CAUSED ERROR OR PROGRAM ABUSE

Owner requirements that are part of the regular process of offering, leasing, and maintaining a unit (e.g., HQS compliance, fair housing) are addressed in the appropriate chapters of this plan. This section focuses on errors and program abuse by owners.

An incorrect subsidy determination caused by an owner generally would be the result of an incorrect owner statement about the characteristics of the assisted unit (e.g., the number of bedrooms, which utilities are paid by the family). It also includes accepting duplicate housing assistance payments for the same unit in the same month, or after a family no longer resides in the unit.

Owner Reimbursement to the PHA

In all cases of overpayment of subsidy caused by the owner, the owner must repay to the PHA any excess subsidy received. The PHA may recover overpaid amounts by withholding housing assistance payments due for subsequent months, or if the debt is large, the PHA may allow the owner to pay in installments over a period of time [HCV GB p. 22-13].

OHA Policy

In cases where the owner has received excess subsidy, the OHA will require the owner to repay the amount owed in accordance with the policies in Section 16-IV.B.

Prohibited Owner Actions

An owner participating in the HCV program must not:

- Make any false statement to the PHA [Title 18 U.S.C. Section 1001].

- Commit fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program [24 CFR 982.453(a)(3)] including:

OHA Policy

Any of the following will be considered evidence of owner program abuse:

- Charging the family rent above or below the amount specified by the OHA
- Charging a security deposit other than that specified in the family's lease
- Charging the family for services that are provided to unassisted tenants at no extra charge
- Knowingly accepting housing assistance payments for any month(s) after the family has vacated the unit
- Knowingly accepting incorrect or excess housing assistance payments
- Offering bribes or illegal gratuities to the OHA Board of Commissioners, employees, contractors, or other OHA representatives
- Offering payments or other incentives to an HCV family as an inducement for the family to make false or misleading statements to the OHA
- Residing in the unit with an assisted family

Remedies and Penalties

When the PHA determines that the owner has committed program abuse, the PHA may take any of the following actions:

- Require the owner to repay excess housing assistance payments, as discussed earlier in this section and in accordance with the policies in Chapter 16.
- Terminate the HAP contract (See Chapter 13).
- Bar the owner from future participation in any PHA programs.
- Refer the case to state or federal officials for criminal prosecution as described in section 14-II.E.

14-II.D. PHA-CAUSED ERRORS OR PROGRAM ABUSE

The responsibilities and expectations of PHA staff with respect to normal program administration are discussed throughout this plan. This section specifically addresses actions of a PHA staff member that are considered errors or program abuse related to the HCV program. Additional standards of conduct may be provided in the PHA personnel policy.

PHA-caused incorrect subsidy determinations include (1) failing to correctly apply HCV rules regarding family composition, income, assets, and expenses, (2) assigning the incorrect voucher size to a family, and (3) errors in calculation.

Repayment to the PHA

Neither a family nor an owner is required to repay an overpayment of subsidy if the error or program abuse is caused by PHA staff [HCV GB. 22-12].

PHA Reimbursement to Family or Owner

The PHA must reimburse a family for any underpayment of subsidy, regardless of whether the underpayment was the result of staff-caused error or staff or owner program abuse. Funds for this reimbursement must come from the PHA's administrative fee reserves [HCV GB p. 22-12].

Prohibited Activities

OHA Policy

Any of the following will be considered evidence of program abuse by OHA staff:

Failing to comply with any HCV program requirements for personal gain

Failing to comply with any HCV program requirements as a result of a conflict of interest relationship with any applicant, participant, or owner

Seeking or accepting anything of material value from applicants, participating families, vendors, owners, contractors, or other persons who provide services or materials to the OHA

Disclosing confidential or proprietary information to outside parties

Gaining profit as a result of insider knowledge of OHA activities, policies, or practices

Misappropriating or misusing HCV funds

Destroying, concealing, removing, or inappropriately using any records related to the HCV program

Committing any other corrupt or criminal act in connection with any federal housing program

14-II.E. CRIMINAL PROSECUTION

OHA Policy

When the OHA determines that program abuse by an owner, family, or OHA staff member has occurred and the amount of overpaid subsidy meets or exceeds the threshold for prosecution under local or state law, the OHA will refer the matter to the appropriate entity for prosecution. When the amount of overpaid assistance meets or exceeds the federal threshold, the case will also be referred to the HUD Office of Inspector General (OIG).

Other criminal violations related to the HCV program will be referred to the appropriate local, state, or federal entity.

14-II.F. FRAUD AND PROGRAM ABUSE RECOVERIES

The PHA may retain a portion of program fraud losses that the PHA recovers from a family or owner through litigation, court order, or a repayment agreement [24 CFR 982.163].

The PHA must be the principal party initiating or sustaining the action to recover amounts due from tenants that are due as a result of fraud and abuse. 24 CFR 792.202 permits the PHA to retain the greater of:

- 50 percent of the amount it actually collects from a judgment, litigation (including settlement of a lawsuit) or an administrative repayment agreement, or
- Reasonable and necessary costs that the PHA incurs related to the collection including costs of investigation, legal fees, and agency collection fees.

The family must be afforded the opportunity for an informal hearing in accordance with requirements in 24 CFR 982.555.

If HUD incurs costs on behalf of the PHA related to the collection, these costs must be deducted from the amount retained by the PHA.

PART14- III.A. EIV SECURITY POLICY AND PROCEDURES

The Enterprise Income Verification System (EIV)

The EIV system is intended to provide a single source of income-related data to PHAs for use in verifying the income reported by tenants in the various assisted housing programs. The Office of Public and Indian Housing (PIH) is responsible for administering and maintaining the EIV System.

APPLICABILITY

The procedures in this document apply to all Section 8 staff that access EIV data.

PURPOSE

The purpose of this document is to establish the Housing Authority of the City of Oxnard's Public Housing and Section 8 policies and procedures to assure that the practices, controls and safeguards used by Public Housing and Section 8 staff are in compliance with the Federal laws regarding the protection of this information.

PRIVACY ACT

The data provided via the EIV system will be protected to ensure that it is only used for official purposes and not disclosed in any way that would violate the privacy of the individuals represented in the system data. Privacy of data and data security for computer systems are covered by a variety of Federal laws and regulations. The Privacy Act of 1974 as amended, 5 U.S.C. 532(a) is one such regulation.

The full text of the Privacy Act can be accessed at <http://www.usdoj.gov/foisprivstat.htm>. Appendix 1 of the Housing Authority of the City of Oxnard Public Housing and Section 8 EIV Security Policy and Procedures manual is a summary of the safeguards of the Privacy Act.

EXAMPLES OF PRIVACY ACT VIOLATIONS

Section 8 will not rely entirely upon staff to read and understand the Privacy Act. To ensure that staff has a complete understanding of the Privacy Act and how seemingly harmless actions may be violations, examples of Privacy Act violations will be provided during security awareness training. The following example of a security violation was explained during the HUD Satellite Broadcast introducing the EIV system.

EIV data can only be viewed by authorized OHA staff and the individual adult who the information pertains to. This means that EIV data for an adult household member in a resident family cannot be shared with another adult household member of the resident family (even the head of household) unless that family member is present or signs a waiver authorizing the other family member to view their EIV information. The Privacy Act protects the privacy of each adult family member from any unauthorized person viewing their EIV data, even another family member. However, EIV data for minor children may be viewed by the Head of Household.

SECTION 8 SECURITY OFFICER(S)

A Section 8 EIV Security Officer(s), appointed by the Director of the City of Oxnard's Housing Authority, is responsible for ensuring that proper **technical, physical, and administrative** safeguards are in place and enforced. The duties of the security officer are as follows:

Conducts quarterly reviews of all User IDs issued to determine if the users still have a valid need to access the EIV data and modifies or revokes access rights as appropriate

At the request of the Director, updates the EIV Security Policy and Procedures

Maintains a key control log or audits key the control log to ensure that one is properly maintained (*for Section 8 restricted areas/locking file cabinets*)

Maintains a list of users who can access the restricted areas

Assures that a copy of Form HUD-9886 has been signed by each member of the household age 18 years or older and is in the household file

Ensures compliance with the OHA security policies and procedures outlined in this document

Communicates security information and requirements to appropriate personnel, including coordinating and conducting security awareness training sessions

Ensures that any infractions of security procedures are promptly reported to Department Director for investigation and enforcement

Ensures that all EIV records and forms (i.e., signed user agreements) are kept and updated as needed

SECURITY AWARENESS TRAINING

Security awareness training is a crucial aspect of ensuring the security of the EIV system and data. Section 8 users and potential users will be made aware of the importance of respecting the privacy of data, following established procedures to maintain privacy and security, and notifying management in the event of a security or privacy violation.

In addition to security awareness training, the Section 8 Security Officer(s) will communicate security information and requirements to appropriate personnel using Security Bulletins posted throughout the work areas.

Security Awareness training will be provided to each employee upon granting access to the EIV system. Thereafter, annual security awareness refresher training will be provided to each employee with EIV access.

The Section 8 EIV Officer(s) will conduct security awareness training in the following manner:

The trainer and the employee will both sign a certification that EIV security training has been provided. The training certification and a record of the training material provided at the awareness training will be kept in the *Security Awareness Training* section of the PH EIV Security binder.

At the end of the training, each employee will also sign the EIV Rules of Behavior and User Agreement form. One copy will be given to the employee to be placed in their desk manual and one copy will be retained in the *User Agreement* section of the PH EIV Security binder. The forms will be updated once a year at the refresher training.

The Section 8 Security Officer(s) will limit the security awareness training to security awareness and compliance issues only. Instructing staff on how to navigate the EIV modules and how to run reports or to interpret data is the responsibility of the supervisor or designated trainer.

Examples of potential Privacy Act and Security violations will be provided during the training.

TECHNICAL SAFEGUARDS

The purpose of these technical safeguards is as follows:

To reduce the risk of a security violation related to the EIV system's software, network, or applications

To identify and authenticate all users seeking access to the EIV system

To deter and detect attempts to access the system without authorization

To monitor the user activity of the EIV system.

Various technical safeguards have been built into the EIV system to mitigate the risk of security violations. However, Section 8 will ensure that the physical and administrative safeguards are also in place to complement these technical safeguards in order to meet HUD's standard for protection of private data.

DESCRIPTION OF BUILT-IN TECHNICAL SAFEGUARDS

The following describes the technical controls built into the EIV system:

Each user is required to have their own User ID and password.

The User ID identifies the PHA and tenant information that the user is authorized to access.

Passwords are encrypted and the password file is protected from unauthorized access.

The system forces all users to change their password every 21 days and limits the reuse of previous passwords.

After three unsuccessful attempts to log in, the User ID is locked and the user must contact the HUD System Administrator to have the password reset.

Online warning messages that inform the user of the civil and criminal penalties associated with unauthorized use of the EIV system will be displayed.

In addition to the built-in technical safeguards, Section 8 will follow the following technical security requirement:

Section 8 **will not** save EIV data to a computer hard drive or any other automated information system (i.e., network drive, disk or CD).

Section 8 staff will not leave their computer unattended with EIV data displayed on the screen.

Section 8 staff will not log in on another user's ID.

ADMINISTRATIVE SAFEGUARDS

The Section 8 Security Officer(s) will maintain security-related records and monitor programmatic security issues. The PH Security Officer(s) will adhere to the following administrative safeguards:

Ensure that all users who have access to EIV data have an Access Authorization form signed by the Director of Housing on file;

Ensure that all users who access the EIV system have a current signed Rules of Behavior and User Agreement on file;

Conduct quarterly reviews of all User IDs to determine if the user still has a valid need to access the EIV data; and

Ensure the access rights are modified or revoked as appropriate.

The Section 8 Security Officer(s) will maintain the following EIV security records and forms:

- EIV Rules of Behavior and User Agreement Forms
- EIV Access Authorization Forms
- EIV Disposal Records List
- EIV Security Violation Information
- Key Control Logs for secure areas or filing cabinets
- EIV Security Awareness Training Records
- Records of internal audits to ensure that the Form HUD-9886 has been signed by each adult member of the household and is kept in the Confidential Resident File.
- A record of all users who have approved access to EIV data including the date the access was granted and the date access was terminated.

PHYSICAL SAFEGUARDS

The purpose of physical safeguards is to provide barriers between unauthorized persons and documents containing private data.

CONFIDENTIAL RESIDENT FILES

All EIV data will be printed and saved in the “Confidential” resident file. Each resident file will be clearly labeled on the front cover as “Confidential.” This alerts staff that this file contains EIV data that must be protected at all times when not in use. Leaving a confidential resident file out on a desk unattended is a breach of security.

LOCKING FILE CABINETS FOR CONFIDENTIAL FILES

Even though the OHA has monitored office buildings, persons unauthorized to view EIV data, such as maintenance staff, janitorial staff, or temporary staff, have access to the office spaces. In office settings where any staff other than the staff responsible for the resident file or their supervisor has access to the office, all Confidential Resident Files will be kept in locking file cabinets located near the workspace of the staff responsible for those files. The cabinets will be locked whenever the responsible staff leaves the workspace.

HARD COPY SECURITY REQUIREMENTS

When possible, a dedicated printer will be used with **blue paper** in order to further protect the confidentiality of the EIV hard copy data. Users will retrieve computer printouts as soon as they are generated so that EIV data is not left lying unattended in printers where unauthorized users may access them.

HARD COPY SECURITY VIOLATIONS

Section 8 will handle EIV data in such a manner that it does not become misplaced or available to unauthorized personnel. Any confidential resident file should be assumed to contain EIV data. Therefore, the tenant file cannot be viewed by **any personnel** that are not expressly authorized (i.e., staff in charge of that file, the supervisor of the staff in charge of the file, the security officer, or the Section 8 Internal Auditor) and who do not have both an Access Authorization Form and a Rules of Behavior and User Agreement on file with the EIV Security Officer. Viewing the EIV information of a resident outside of a staff's caseload assignment is considered a security violation for both the staff unlawfully viewing the EIV information and for the staff that left the information unattended. Unless a supervisor has specifically authorized staff to view another staff's EIV data, this is expressly prohibited.

DISPOSAL OF EIV INFORMATION

To reduce the risk of improper destruction of EIV hard copy data and to eliminate the need for monitoring and tracking individual destruction logs at multiple sites, all EIV data will become part of the "**Confidential**" resident file. As part of the confidential resident file, the EIV data will be secured and disposed of like all other resident file documents which require Privacy Act protection, in accordance with the Section 8 policy and procedures and record retention procedures.

When EIV data is no longer useful for rent determination purposes (i.e., EIV data was printed, but became outdated before rent determination was made), it will still be part of the resident file; however, it will be kept in a separate manila envelope secured in the file and marked, "*Unused EIV – to be destroyed with tenant file.*" When the file is purged, this envelope will go to the Section 8 retention/destruction vendor along with the other purged file documents.

A copy of the Section 8 retention and disposal procedures for resident records will be included in the EIV Disposal section of the Section 8 EIV Security binder.

REPORTING IMPROPER DISCLOSURES

Recognition, reporting and disciplinary action in response to security violations are crucial to successfully maintaining the security and privacy of the EIV system.

Security Violations may include the following:

- Disclosure of private data
- Attempts to access unauthorized data
- Sharing of User IDs and passwords

Upon discovery of a possible improper disclosure of EIV information or another security violation by a Section 8 employee or any other person, the individual making the observation or receiving the information should contact the Section 8 Security Officer(s). The PHA Security Officer(s) will document all improper disclosures in writing on a security disclosure form

providing details including who was involved, what was disclosed, how the disclosure occurred, and where it occurred.

The following contacts will be made:

- The Section 8 Security Officer(s) will contact and provide the Housing Authority's Director the written documentation in the security violation;
- The Housing Authority's Director or his designee will provide the HUD Field Office of Public Housing's Director with the written documentation; and
- The HUD Field Office of Public Housing Director upon receipt of the documentation will make a determination regarding the referral and provision of the written documentation to the Headquarters EIV Coordinator and/or EIV Security Officer(s) for further review and follow-up action.

APPENDIX 1 : SAFEGUARDS PROVIDED BY THE PRIVACY ACT

The Privacy Act provides safeguards for individuals against invasion of privacy by requiring Federal agencies, except as otherwise provided by law or regulations to:

1. Permit individuals to know what records pertaining to them are collected, maintained, used or disseminated;
2. Allow individuals to prevent records pertaining to them, obtained for a particular purpose from being used or made available for another purpose without their consent;
3. Permit individuals to gain access to information pertaining to them, obtain a copy of any or all portions thereof, and correct or amend such records;
4. Collect, maintain, use or disseminate personally identifiable information in a manner that ensures the information is current and accurate, and that adequate safeguards are provided to prevent misuses of such information;
5. Permit exemptions from the requirements of the Act only where an important public policy need exists as determined by specific statutory authority; and
6. Be subject to a civil suit for any damages that occur as a result of action that violates any individual's rights under this Act.