Institute for Research on Poverty
UNIVERSITY OF WISCONSIN–MADISON

Name: _____

I understand that to uphold professional ethical standards, the work I conduct for the Institute for Research on Poverty involving access to confidential data is directed and regulated by this confidentiality agreement. Furthermore, I realize that public assistance records and documents are subject to strict confidentiality requirements imposed by state and federal law, including Wisconsin Statute 49.83.

I certify that I have received training regarding the state and federal laws and University and Institute policies that govern access to and use of information contained in data collected by or on behalf of IRP and administrative data collected by federal and state agencies and provided to IRP for research purposes.

I understand that I am being granted access to this information and data based on my agreement to comply with the following terms and conditions:

- I will respect the confidentiality of individuals identified within research materials. I understand that all information concerning studied individuals is privileged information and must never be released or reported to any other person. I will at all times safeguard research materials containing confidential information and will protect research materials that could identify individuals from observation by others not immediately involved in the research.

- All data containing personal identifiers will remain on the SSCC SILO WinRD server (accessible to IRP programming staff).

- All sensitive research data, and resulting files from work with such data conducted for IRP will remain on the IRP project spaces on the SSCC SILO WinLDS server. (irp, irp1, irp2, irp3, irp4)

- I cannot remove files with individual-level data from WinLDS. Only aggregate information can be removed.

- I will prevent others' access to my computer by locking my screen (ctrl+alt+delete) or by logging out of WinLDS when I temporarily leave my computer.

- I will not share any of my passwords that allow access to data, nor will I use these password(s) for other purposes, such as to gain access to an internet site.

- I will not make any public presentation (including poster sessions) or submission for publication of research or reports using administrative data without the prior review of the department providing the data. For any work using administrative data, I will provide IRP with copies of presentations 30 days before the presentation. Any submissions for publication will be provided at the time of submission, and copies of contracted reports at the time of delivery to grantor. I will include any required disclaimers with publicly released materials.

I understand that by signing this document I have pledged to adhere to these principles. Furthermore, I realize that any unauthorized reporting, use, or distribution of privileged information—computer files or written materials—obtained in the course of my work for the Institute for Research on Poverty may be grounds for my dismissal from employment and may subject me to other penalties, both civil and criminal.

_____

Signature   **Date**

student   faculty   staff   other

Please initial your understanding of the following policies:

DATA USE AUTHORIZED BY PROJECT ONLY
State agencies (data owners) must provide support and approval for any and all uses
of data. I understand that access to Wisconsin State administrative data is provided
for only the projects listed on this form, and that data cannot be used for any other
purpose or project.

DATA REMAINS ON SILO SERVERS ONLY
I WILL NOT copy or remove individual-level data from the SSCC SILO WinLDS server.

30-DAY NOTICE
For any work using administrative data, I will give Steven Cook (at IRP) copies of
presentations 30 days before the presentation. Any submissions for publication
will be provided at the time of submission, and copies of contracted reports at the
time of delivery to grantor. I will include any required disclaimers with publicly
released materials.

REMOTE COMPUTING
I understand that access to IRP confidential data on SILO WinLDS must be limited
to non-public locations, such as a campus or home office. I will not use the "save
password" feature in any software program (for SSCC password), and will update
anti-virus software

LOCK SCREEN OR CLOSE SESSION
I will lock my screen (ctrl+alt+delete) or log out of any open WinLDS sessions when
I leave my computer

MAILBOX/EMAIL ARE NOT SECURE ENVIRONMENTS
NO sensitive materials may be left in IRP mailboxes, or other unlocked places

On the next page, please enter information on project(s) which authorize you to access
restricted state data.

Name: _____

Use this form to enter info on projects on which you are personnel.
Use the following page for projects on which you are the PI.

PROJECT NAME and PI	**PROJECT NAME and PI**	**PROJECT NAME and PI**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROJECT DATA:

☐ Child care subsidies	☐ Child care subsidies	☐ Child care subsidies
☐ Child support	☐ Child support	☐ Child support
☐ W-2/TANF/AFDC	☐ W-2/TANF/AFDC	☐ W-2/TANF/AFDC
☐ DOC/Milwaukee Jail	☐ DOC/Milwaukee Jail	☐ DOC/Milwaukee Jail
☐ SNAP/Food Stamps	☐ SNAP/Food Stamps	☐ SNAP/Food Stamps
☐ Medicaid/BadgerCare	☐ Medicaid/BadgerCare	☐ Medicaid/BadgerCare
☐ Child Welfare	☐ Child Welfare	☐ Child Welfare
☐ UI benefits/wages	☐ UI benefits/wages	☐ UI benefits/wages
☐ Housing subsidies	☐ Housing subsidies	☐ Housing subsidies
☐ SS/SSI/SSDI/CTS	☐ SS/SSI/SSDI/CTS	☐ SS/SSI/SSDI/CTS
☐ Other: _____	☐ Other: _____	☐ Other: _____
_____	_____	_____

Version: MSPF2016   MSPF2017 | Version: MSPF2016   MSPF2017 | Version: MSPF2016   MSPF2017
other:_____ | other:_____ | other:_____

PROJECT NAME and PI	**PROJECT NAME and PI**	**PROJECT NAME and PI**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROJECT DATA:

☐ Child care subsidies	☐ Child care subsidies	☐ Child care subsidies
☐ Child support	☐ Child support	☐ Child support
☐ W-2/TANF/AFDC	☐ W-2/TANF/AFDC	☐ W-2/TANF/AFDC
☐ DOC/Milwaukee Jail	☐ DOC/Milwaukee Jail	☐ DOC/Milwaukee Jail
☐ SNAP/Food Stamps	☐ SNAP/Food Stamps	☐ SNAP/Food Stamps
☐ Medicaid/BadgerCare	☐ Medicaid/BadgerCare	☐ Medicaid/BadgerCare
☐ Child Welfare	☐ Child Welfare	☐ Child Welfare
☐ UI benefits/wages	☐ UI benefits/wages	☐ UI benefits/wages
☐ Housing subsidies	☐ Housing subsidies	☐ Housing subsidies
☐ SS/SSI/SSDI/CTS	☐ SS/SSI/SSDI/CTS	☐ SS/SSI/SSDI/CTS
☐ Other: _____	☐ Other: _____	☐ Other: _____
_____	_____	_____

Version: MSPF2016   MSPF2017 | Version: MSPF2016   MSPF2017 | Version: MSPF2016   MSPF2017
other:_____ | other:_____ | other:_____

Principal Investigator Project Descriptions   (this form is for Project PI's only)

List data information and data access personnel for each project for which you are PI

Project Title: _____

Approved Data: ☐ MSPF2015   ☐ MSPF2016   ☐ MSPF2017   notes: _____

☐ Child support   ☐ W-2/TANF/AFDC   ☐ Child care subsidies ☐ Child Welfare
☐ SNAP/Food Stamps   ☐ Medicaid/BadgerCare   ☐ Housing subsidies   ☐ SS/SSI/SSDI/CTS
☐ UI benefits/wages   ☐ DOC/Milwaukee Jail   ☐ Other: _____

Project Personnel: _____
    I acknowledge responsibility for the compliance of project personnel with all established data security policy and procedures.

Project Title: _____

Approved Data: ☐ MSPF2015   ☐ MSPF2016   ☐ MSPF2017   notes: _____

☐ Child support   ☐ W-2/TANF/AFDC   ☐ Child care subsidies ☐ Child Welfare
☐ SNAP/Food Stamps   ☐ Medicaid/BadgerCare   ☐ Housing subsidies   ☐ SS/SSI/SSDI/CTS
☐ UI benefits/wages   ☐ DOC/Milwaukee Jail   ☐ Other: _____

Project Personnel: _____
    I acknowledge responsibility for the compliance of project personnel with all established data security policy and procedures.

Project Title: _____

Approved Data: ☐ MSPF2015   ☐ MSPF2016   ☐ MSPF2017   notes: _____

☐ Child support   ☐ W-2/TANF/AFDC   ☐ Child care subsidies ☐ Child Welfare
☐ SNAP/Food Stamps   ☐ Medicaid/BadgerCare   ☐ Housing subsidies   ☐ SS/SSI/SSDI/CTS
☐ UI benefits/wages   ☐ DOC/Milwaukee Jail   ☐ Other: _____

Project Personnel: _____
    I acknowledge responsibility for the compliance of project personnel with all established data security policy and procedures.

Project Title: _____

Approved Data: ☐ MSPF2015   ☐ MSPF2016   ☐ MSPF2017   notes: _____

☐ Child support   ☐ W-2/TANF/AFDC   ☐ Child care subsidies ☐ Child Welfare
☐ SNAP/Food Stamps   ☐ Medicaid/BadgerCare   ☐ Housing subsidies   ☐ SS/SSI/SSDI/CTS
☐ UI benefits/wages   ☐ DOC/Milwaukee Jail   ☐ Other: _____

Project Personnel: _____
    I acknowledge responsibility for the compliance of project personnel with all established data security policy and procedures.

Have I Completed All Of The Requirements For Access To IRP Confidential Data?

Name: _____

I have a UW NetID and an SSCC member agency account (Non-UW collaborators will only need a UW NetID if their institution will cede IRB oversight to the UW. More info)

My project(s) has all required state agency approvals

I am working on a project(s) that is considered human subjects research:

I am already listed on the Study Team for the approved IRB protocol for project(s)

I have completed the UW online human subjects training

I have completed an Outside Activities Report for the current year (UW faculty/staff/students only)

I have completed IRP Data Security Training. I have read the Data Security Manual, and understand that IRP data security training is renewed annually for continued access. I have returned the following forms to Maggie Townsend:

IRP Confidentiality and Data Security Agreement

Data Security and Access Checklist of Understanding

I already have access to Silo WinLDS:

I have completed this year's UW HIPAA Training Requirement

I will need access to Silo WinLDS for the first time:

I have completed this year's UW HIPAA Training Requirement

I have read the Using Silo WinLDS documentation

I have returned my signed SSCC Silo Access Agreement to Maggie Townsend

I have changed my SSCC account password to a new one, which is at least 14 characters long

I will use the mobile device app for 2-factor authentication, OR I have contacted Maggie Townsend about using a piece of hardware (key fob) from IRP instead

I have downloaded the Citrix Receiver and have tested my 2-factor authentication

Notes: _____