

**Instructions:** Please fill in this form, print it, sign it, and sign the Checklist (3 pages in total). You may then either: fax the completed and signed forms to the Ministry of Health at 306-787-3823 **or** scan the completed and signed forms and email them to lyn.yeo@health.gov.sk.ca. This form is specifically for NITHA and/or communities with transferred nursing services.

**REQUESTING ORGANIZATION INFORMATION:**

Organization Legal Name: (Please Print)

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

I acknowledge that I, head of the Requesting Organization, have read and agree to the responsibilities and uses as described in this form and my obligations under *The Health Information Protection Act (HIPA)*, *The Public Health Act, 1994* and *The Disease Control Regulations Section 22.01*. This section **must** be signed by the head of the Organization requesting access to Panorama. The head of the organization could be the Director or CEO of the organization, the Tribal/Band Chief, or Health Director, depending upon the reporting structure.

Head of the First Nation Organization Information & Signature:

Name: \_\_\_\_\_  
(Please Print)

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
YYYY/MM/DD

**COMMUNITY NAME:** (If there is more than one community for which the organization will assume responsibility, a separate form is to submitted for each community)

\_\_\_\_\_

**DESIGNATION OF AUTHORIZED APPROVERS**

Please complete the following section with a minimum of one Authorized Approver. Authorized Approvers will receive email notification when members of your Organization request user rights to Panorama and will be required to approve those members who will be allowed to have access (“approved users”).

| <i>Last Name</i> | <i>First Name</i> | <i>Email Address</i> | <i>Role</i> |
|------------------|-------------------|----------------------|-------------|
|                  |                   |                      |             |
|                  |                   |                      |             |

***Agreement***

This Agreement is specific to accessing Panorama.

***Panorama - Approved Organization Roles & Responsibilities***

**Approved Organizations are responsible for ensuring that:**

- The Organization’s designated Authorized Approver(s) have completed all required training as well as have read and understand the roles and responsibilities of Authorized Approvers.
- Appropriate physical, organizational and technological safeguards are in place within their Organization to protect the security and integrity of the Panorama data.
- Panorama data is used only for authorized purposes.
- The Organization is responsible for the management of Authorized Approvers including additions and timely deletions.
- The Approved Organization and any designated Authorized Approvers are accountable for the actions of approved users within your organization.
- The organizational head can delegate the responsibility for managing Panorama Authorized Approvers to someone within the organization by sending an email or letter identifying the responsible individual to the eHealth SK Service Desk.

***Panorama - Authorized Approver Roles & Responsibilities***

**Designated Authorized Approvers are responsible for:**

- Reviewing and approving Panorama access requests for their Organization(s) as required.
- Keeping the approved users list up to date for your organization.
- Being accountable for the actions of any approved users within your organization.

***Panorama - User Roles & Responsibilities***

**Approved users are responsible for:**

- Using Panorama data for authorized purposes only and in accordance with their Organization’s policies and procedures.

**Note:**

- **User access is audited.**
- **Inappropriate use of Panorama shall be reported to the Ministry of Health and may result in revocation of the user’s and/or Organization’s access privileges.**

---

***Managing Requests for Secondary Use of First Nation Data in Panorama***

---

Section 22.01 of the *Disease Control Regulations*, under *The Public Health Act, 1994*, outlines the collection, use and disclosure of information in Panorama, the basis of which is to ensure the prevention and control of vaccine preventable diseases. In the event that eHealth SK and/or the Ministry of Health receives a request for First Nation community level data for research purposes, the request will be forwarded to the Head of the First Nations Community to approve the data access request regardless of whether the First Nations community is a current user of Panorama.

### Panorama Readiness Checklist

The following list of readiness items must be completed before access to Panorama will be actioned. If you have not already connected with FNIHB/NITHA to review the Panorama Deployment Preparation Package, please do so before completing the attached form and checklist.

Please check the list and ensure that the Head of Organization, as identified in the First Nation Organizational Access Request Form, signs below confirming that these are completed. Thank you.

- 
- Hardware/Software/Connectivity meets requirements \_\_\_\_\_
  - Business and IT support mechanisms are established and accessible \_\_\_\_\_
  - Training plan for users has been established \_\_\_\_\_
  - Back-entry plan is established based on historical immunizations for clients from 1996 to date \_\_\_\_\_   
*Note: All publicly funded vaccines will be entered into Panorama.*
  - Privacy & Security policies are established, and staff trained on their application \_\_\_\_\_
  - Process to track users and notify eHealth SK of changes is in place \_\_\_\_\_
  - The Organization Access Request Form has been completed and signed \_\_\_\_\_

---

Head of Organization – Signature

---

YYYY/MM/DD