



PANORAMA USER ACCOUNT REQUEST FORM

► Call the Service Desk 1-888-316-7446 (local 306-337-0600) if you require assistance filling out this form.

Return to: eHealth Saskatchewan Service Desk

Fax Number: 306-781-8480

Email: servicedesk@ehealthsask.ca

User Information

Type of request (check one): New user Change in user type Remove

User's Full Name printed:

First Name

Last Name

Organization Name: **Required field**, check only **one**

- | | | |
|---|--|--|
| <input type="checkbox"/> Athabasca Health Authority | <input type="checkbox"/> Birch Narrows | <input type="checkbox"/> Little Red |
| <input type="checkbox"/> Cypress RHA | <input type="checkbox"/> Buffalo River | <input type="checkbox"/> Makwa Sahgaiehcan |
| <input type="checkbox"/> Five Hills RHA | <input type="checkbox"/> Canoe Lake | <input type="checkbox"/> Meadow Lake Tribal Council (MLTC) |
| <input type="checkbox"/> Heartland RHA | <input type="checkbox"/> Clearwater River | <input type="checkbox"/> Montreal Lake |
| <input type="checkbox"/> Keewatin Yatthé RHA | <input type="checkbox"/> Cumberland House | <input type="checkbox"/> Pelican Narrows |
| <input type="checkbox"/> Kelsey Trail RHA | <input type="checkbox"/> Deschambault Lake | <input type="checkbox"/> Peter Ballantyne Cree Nation (PBCN) |
| <input type="checkbox"/> Mamawetan Churchill River Region | <input type="checkbox"/> English River | <input type="checkbox"/> Prince Albert Grand Council (PAGC) |
| <input type="checkbox"/> Prairie North RHA | <input type="checkbox"/> Flying Dust | <input type="checkbox"/> Red Earth |
| <input type="checkbox"/> Prince Albert Parkland RHA | <input type="checkbox"/> Grandmother's Bay | <input type="checkbox"/> Shoal Lake |
| <input type="checkbox"/> Regina Qu'Appelle RHA | <input type="checkbox"/> Hall Lake | <input type="checkbox"/> Southend |
| <input type="checkbox"/> Saskatoon RHA | <input type="checkbox"/> Hatchet Lake/Wollaston Lake | <input type="checkbox"/> Stanley Mission |
| <input type="checkbox"/> Sun Country RHA | <input type="checkbox"/> Island Lake/ Ministikwan Lake /Mudie Lake | <input type="checkbox"/> Sturgeon Lake |
| <input type="checkbox"/> Sunrise RHA | <input type="checkbox"/> James Smith | <input type="checkbox"/> Sturgeon Landing |
| <input type="checkbox"/> Ministry of Health | <input type="checkbox"/> Kinoosao - Thomas Clark | <input type="checkbox"/> Sucker River/Nemebein River |
| | <input type="checkbox"/> Kitsaki (La Ronge) | <input type="checkbox"/> Wahpeton |
| | <input type="checkbox"/> Lac La Ronge Indian Band (LLRIB) | <input type="checkbox"/> Waterhen Lake |

Work Phone:

Working Title:

Email Address:

User Role: **Required field**, check only **one**

- | | | |
|--|--|---|
| <input type="checkbox"/> AMS_Team_Access | <input type="checkbox"/> Epidemiologist | <input type="checkbox"/> Inventory_RHA_User |
| <input type="checkbox"/> Designated_Immunization_Administrator | <input type="checkbox"/> Immunization_Provider | <input type="checkbox"/> Support_Staff |
| <input type="checkbox"/> eHS_Admin | <input type="checkbox"/> Inventory_MoH_User | |
| <input type="checkbox"/> eHS_Superuser | | |

SDL (facility): **Required field**, check only **one**

- | | |
|--|--|
| <input type="checkbox"/> Assiniboia Public Health Office | <input type="checkbox"/> Regina North Public Health Office |
| <input type="checkbox"/> Battle River Treaty 6 Health Centre | <input type="checkbox"/> Regina North Public Health Office_Rrl |
| <input type="checkbox"/> Beauval Public Health Clinic | <input type="checkbox"/> Regina Travel Health Centre |
| <input type="checkbox"/> Big River Public Health Clinic | <input type="checkbox"/> Rosetown Public Health Office |
| <input type="checkbox"/> Biggar Public Health Office | <input type="checkbox"/> Sandy Bay Health Centre |
| <input type="checkbox"/> Buffalo Narrows Public Health Clinic | <input type="checkbox"/> Saskatoon Idylwyld Centre – Main Office |
| <input type="checkbox"/> Canora Public Health Office | <input type="checkbox"/> Saskatoon North East Public Health Office |
| <input type="checkbox"/> Carlyle Public Health Office | <input type="checkbox"/> Saskatoon Our Neighbourhood Public Health |
| <input type="checkbox"/> Coronach Public Health Office | <input type="checkbox"/> Saskatoon South East Public Health Office |
| <input type="checkbox"/> Creighton Health Centre | <input type="checkbox"/> Saskatoon Tribal Council (STC) Office |
| <input type="checkbox"/> Davidson Public Health Office | <input type="checkbox"/> Saskatoon West Winds Public Health Office |
| <input type="checkbox"/> Esterhazy Public health office | <input type="checkbox"/> Shaunavon Public Health Office |
| <input type="checkbox"/> Estevan Public Health Office | <input type="checkbox"/> Shellbrook Public Health Office |
| <input type="checkbox"/> Fort Qu'Appelle Public Health Office | <input type="checkbox"/> South Service Centre, FNIHB, |
| <input type="checkbox"/> Gravelbourg Public Health Office | <input type="checkbox"/> Spiritwood Office, FNIHB, Health Canada |
| <input type="checkbox"/> Green Lake Public Health Clinic | <input type="checkbox"/> Spiritwood Public Health Office |
| <input type="checkbox"/> Grenfell Public Health Office | <input type="checkbox"/> Stony Rapids Health Centre |
| <input type="checkbox"/> Hudson Bay Public Health Office | <input type="checkbox"/> Swift Current Public Health Office |
| <input type="checkbox"/> Humboldt Public Health Office | <input type="checkbox"/> Tisdale Public Health Office |
| <input type="checkbox"/> Il-X Health Centre | <input type="checkbox"/> Turtleford Public Health Nurse Office |
| <input type="checkbox"/> Indian Head Public Health Office | <input type="checkbox"/> Unity Public Health Office |
| <input type="checkbox"/> Kamsack Public Health Office | <input type="checkbox"/> Wadena Public Health Office |
| <input type="checkbox"/> Kelvington Public Health Office | <input type="checkbox"/> Watrous Public Health Office |
| <input type="checkbox"/> Kerrobert Public Health Office | <input type="checkbox"/> Weyburn Public Health Office |
| <input type="checkbox"/> Kindersley Public Health Office | <input type="checkbox"/> Whitewood Public Health Office |
| <input type="checkbox"/> Kipling Public Health Office | <input type="checkbox"/> Wynyard Public Health Office |
| <input type="checkbox"/> La Loche Health Centre | <input type="checkbox"/> Yorkton Public Health office |
| <input type="checkbox"/> Langenburg Public Health Office | <input type="checkbox"/> Birch Narrows |
| <input type="checkbox"/> LaRonge Health Centre _MedRm | <input type="checkbox"/> Buffalo River |
| <input type="checkbox"/> LaRonge Health Centre _OutPt | <input type="checkbox"/> Canoe Lake |
| <input type="checkbox"/> LaRonge Health Centre _PHC | <input type="checkbox"/> Clearwater River |
| <input type="checkbox"/> LaRonge Health Centre _VSR | <input type="checkbox"/> Cumberland House |
| <input type="checkbox"/> Leader Public Health Office | <input type="checkbox"/> Deschambault Lake |
| <input type="checkbox"/> Lloydminster Population Health Services | <input type="checkbox"/> English River |
| <input type="checkbox"/> Maidstone Public Health Nurse Office | <input type="checkbox"/> Flying Dust |
| <input type="checkbox"/> Maple Creek Public Health Office | <input type="checkbox"/> Grandmother's Bay |
| <input type="checkbox"/> Meadow Lake Community Health Services | <input type="checkbox"/> Hall Lake |
| <input type="checkbox"/> Melfort Public Health Office | <input type="checkbox"/> Hatchet Lake/Wollaston Lake |
| <input type="checkbox"/> Melville Public Health Office | <input type="checkbox"/> Island Lake/ Ministikwan Lake /Mudie Lake |
| <input type="checkbox"/> Moose Jaw Public Health Office | <input type="checkbox"/> James Smith |
| <input type="checkbox"/> Moosomin Public Health Office | <input type="checkbox"/> Kinoosao - Thomas Clark |
| <input type="checkbox"/> Neilburg Manitou Health Center | <input type="checkbox"/> Kitsaki (La Ronge) |
| <input type="checkbox"/> Nipawin Public Health Office | <input type="checkbox"/> Lac La Ronge Indian Band (LLRIB) |
| <input type="checkbox"/> North Battleford Primary Health | <input type="checkbox"/> Little Red |
| <input type="checkbox"/> North Service Centre,FNIHB, Health Canada | <input type="checkbox"/> Makwa Sahgaiehcan |
| <input type="checkbox"/> Northern Inter-Tribal Health | <input type="checkbox"/> Meadow Lake Tribal Council (MLTC) |
| <input type="checkbox"/> Onion Lake Health Centre | <input type="checkbox"/> Montreal Lake |
| <input type="checkbox"/> Outlook Public Health Office | <input type="checkbox"/> Pelican Narrows |
| <input type="checkbox"/> Oxbow Public Health Office | <input type="checkbox"/> Peter Ballantyne Cree Nation (PBCN) |
| <input type="checkbox"/> Pinehouse Health Centre | <input type="checkbox"/> Prince Albert Grand Council (PAGC) |
| <input type="checkbox"/> Population Health Unit | <input type="checkbox"/> Red Earth |
| <input type="checkbox"/> Preeceville Hospital | <input type="checkbox"/> Shoal Lake |
| <input type="checkbox"/> Prince Albert Public Health Office | <input type="checkbox"/> Southend |
| <input type="checkbox"/> Radville Public Health Office | <input type="checkbox"/> Stanley Mission |
| <input type="checkbox"/> Redvers Public Health Office | <input type="checkbox"/> Sturgeon Lake |
| <input type="checkbox"/> Regina Central Immunization | <input type="checkbox"/> Sturgeon Landing |
| <input type="checkbox"/> Regina Central Public Health | <input type="checkbox"/> Sucker River/Nemebein River |
| <input type="checkbox"/> Regina East Public Health Office | <input type="checkbox"/> Wahpeton |
| <input type="checkbox"/> Regina Four Directions Public | <input type="checkbox"/> Waterhen Lake |
| <input type="checkbox"/> Rosthern Public Health Office | |

PLEASE SELECT IF YOU HAVE A USER ACCOUNT FOR ANY OF THE FOLLOWING

- | | | |
|-------------------------------------|--|------------------------------|
| <input type="checkbox"/> SCI | <input type="checkbox"/> iPHIS Reporting | <input type="checkbox"/> EMC |
| <input type="checkbox"/> eHR Viewer | <input type="checkbox"/> HQC | |

If you do not have one of the accounts mentioned above, to complete the User registration process, you must complete the online self-registration at: <https://services.ehealthsask.ca/myehealth>

PANORAMA User Roles and Responsibilities

- Users are responsible for completion of the training available on the Panorama Program Page.
- Users are responsible for ensuring that the use of Panorama data is on a need-to-know basis for the purpose of their health care work and it is in accordance with their health organization's policies and procedures and HIPA.
- Users must be authorized by an Authorized Approver within an Approved Organization.
- A User is identified and authenticated by an Authorized Approver to view and use Panorama data. The Approved Organization and the Approver are accountable for actions of the User.
- Users who are viewing data within the Panorama application are responsible for selecting the correct person from the candidate list and for protecting the information from use for purposes other than health care delivery.
- All Panorama Users must be aware of and review the terms in the Panorama Immunization Management System Joint Service and User Access Policy – it can be accessed at <http://www.ehealthsask.ca/services/panorama/immun/Documents/AMENDING AGREEMENT Addition of Schedule C Nov 5 w Appendix.doc>

Note:

- User access is audited.
- Inappropriate use of the Panorama shall be reported to the eHealth Saskatchewan's Chief Privacy Officer.
- Any violation of privacy legislation will be investigated and addressed.
- If any of the following user roles are requested, the confidentiality agreement on the next two pages must also be completed by the user, signed by their supervisor and submitted to eHealth Saskatchewan along with the account request. If this form is not submitted, the account will not be provisioned. The roles requiring the confidentiality agreement are:
 - SUPPORT_STAFF
 - IMMUNIZATION_PROVIDER
 - DESIGNATED_IMMUNIZATION_ADMINISTRATOR
 - EPIDEMIOLOGIST
 - eHS_ADMIN
 - eHS_SUPERUSER

Panorama User Rights & Confidentiality Agreement

As an employee, contracted employee, student, or otherwise service provider, I understand that as an authorized user of Panorama I will have contact with confidential client information that includes, but is not limited to, information relating to client registration and immunization data stored in Panorama (Panorama Information) .

As a condition of being granted user rights and permissions for Panorama, I acknowledge that I am permitted to access and use the Panorama Information only for authorized health purposes or such other purposes that may be permitted by law, and that my access to and use of the Panorama Information is limited to that information I need to perform the legitimate duties within my Trustee organization that are specific to the role(s) for which I was authorized as a user.

In Particular:

1. I understand that the Panorama Information I use in the performance of my duties is confidential;
2. I understand that my use of and access to the Panorama Information must be in accordance with the Panorama Immunization Management System Joint Service and User Access Policy and that I have been made aware of the terms of that Policy;
3. I understand that a client's implied or express consent is required to disclose Panorama Information to a third party, unless applicable law permits disclosure of the information without consent;
4. I understand that I am not permitted to use Panorama Information regarding myself, my spouse, family members, friends, acquaintances, co-workers, and any other person for purposes unrelated to my duties. This includes looking up birth dates, addresses, and immunization information for personal use, out of curiosity or for any other purposes other than those for which the Panorama Information is intended;
 - 4.1 I further understand that unauthorized use also includes looking up and/or exporting any information on the names, birth dates, and addresses of clients for purposes other than those for which Panorama has been approved;
5. I understand that any disposal of documents containing Panorama Information must be done by way of secure disposal which includes mechanical shredding of the documents;
6. I acknowledge that I am responsible and accountable for all activities conducted on the computer network under my Panorama user account and I am not to share my Panorama user account or password with others; and
7. I acknowledge that Panorama is monitored in order to protect and maintain the integrity of the system and to ensure compliance with privacy policies and procedures.

I understand that there are severe consequences including discipline and possible termination of my employment/service if I act in a fashion which is not in keeping with the foregoing. I also understand that legal action may result from breach of these terms and that such may include prosecution of an offence where actions violate the provisions of the law. I understand that my name may be released to a complainant as part of full disclosure in a proven case of breach of privacy.

I hereby acknowledge the above obligations regarding my user rights and permissions associated with Panorama:

User's Legal Name: _____

Signature: _____

Date: _____

User Organization/Operating Legal Name: _____

Authorizing Signature: _____

Printed Name and Title: _____

Date: _____

Street Address (mailing): _____

City and Province: _____

Postal Code: _____