COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

ACCREDITATION PROGRAMS

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FABRIC TERMS OF USE AND ACCESS REQUEST

Medical Director or Designate

This form is to be completed by the program medical director to request access to AP Fabric. If identified, the designate also completes their own copy of this form. Fabric is an online platform that supports the activities of the accreditation programs (AP). On completion, applicants will be required to successfully complete assigned training. The applicants granted access are considered the responsible external users, who may then approve, create and manage access for other facility staff. Only responsible external users are to approve, create and manage access for other facility staff.

Access is granted in accordance with the *AP Fabric User Access Policy*. As a medical director or designate, you must ensure that you manage information in accordance with applicable privacy laws and the terms of any agreement entered into with the College of Physicians and Surgeons of BC (CPSBC).

Privilege, management, and access control of responsible external users is the responsibility of the accreditation programs and user accounts are assigned according to role duties/functions to administer facility accounts and participate in accreditation activities.

Complete and submit this form to the CPSBC accreditation programs in conjunction with a completed *AP Fabric Program Medical Director Agreement*.

Terms of use

Responsible external users agree to:

- Keep your personal AP Fabric password confidential and not share this information.
- Activate and use multi-factor authentication (MFA).
- Take reasonable care to protect the security of the user information and immediately notify CPSBC at privacy@cpsbc.ca if the account information is lost or stolen.
- Immediately notify CPSBC if any potential or actual unauthorized disclosure of information occurs.
- Only access the AP Fabric and use/disclose information where it is solely for the purpose of performing the duties/functions pertaining to the requirements of participating in accreditation program activities.
- Not access areas, information or records that are not relevant to your role and facility(ies).

- Acknowledge that use of AP Fabric is monitored and recorded in an audit log, which will be reviewed regularly to ensure compliance with these terms of use.
- Complete any training as assigned and agree to comply and follow all conditions outlined in the training and these terms of use.
- Acknowledge that if you have more than one account and/or access to more than one facility, users are responsible to ensure the information provided is associated with the appropriate facility. Users may request separate logins for different facilities, if preferred.
- Create, manage and maintain user accounts, as appropriate for your facility staff. Assign roles and responsibilities according to your facility needs.
- Respond to requests for user audits and perform activities to support system maintenance as requested.
- Comply with these terms of use, the terms in the *AP Fabric Program Medical Director Agreement* and *AP Fabric User Access Policy.* Non-compliance may result in immediate termination of AP Fabric access privileges, impact program accreditation activity and lead to further review by CPSBC.

Responsible external user agreement

- All fields are mandatory.
- Please list multiple programs or facilities for the same organization on the next page.
- This agreement must be submitted with one or more completed *AP Fabric Medical Director or Designate Terms of Use and Access Request* forms, as required for yourself and any designates, if assigned.

First name: _____ Last name:_____

Organization: _____ HA: _____

Title: _____

Email: _____

The same email address may be associated with a single account for multiple facilities, or separate accounts with different email login may be issued for different facilities. Please discuss with the accreditation programs to arrange the preferred account set-up.

Program:

☐ NHMSFAP ☐ DAP Laboratory Medicine ☐ DAP Medical Imaging
☐ DAP Neurodiagnostics ☐ DAP Community Neurodiagnostics
☐ DAP Pulmonary Function ☐ DAP Polysomnography ☐ DAP HSAT

By signing below, I confirm that the above information is true, and I agree to the AP Fabric Responsible External User Terms of Use.

Date: _____ Signature: _____

Please forward this access request and the signed user agreement to the accreditation program. Please retain a copy of these completed forms for your records.

The program will reach out regarding next steps for training and onboarding.

Collection notice

The College of Physicians and Surgeons of BC (CPSBC) collects, uses, discloses, stores, and retains personal information under the legal authority of the *Freedom of Information and Protection of Privacy Act (FIPPA)*, RSBC 1996, c.165 and the CPSBC Bylaws made under the *Health Professions and Occupations Act (HPOA)*, SBC 2022, c.43.

The personal information collected on this form is permitted under sections 26(c) and (e) of FIPPA for the purpose of managing your accreditation.

The personal information provided will be used to manage access and use of the AP Fabric portal. If you have any questions or concerns about CPSBC's privacy practices, please contact privacy@cpsbc.ca or see https://www.cpsbc.ca/about/privacy/protection.

AP Fabric User Account Approval – Completed by AP Program Staff

User completed training ☐ Yes ☐ No User account created: ☐ Yes ☐ No

User notified by: Date: _____

Notes: