

Ministry of Labour, Training and Skills Development Service Provider Staff EOIS-CaMS Registration



The information collected in this application is used for providing access to the Employment Ontario Information System Case Management System (EOIS-CaMS) to manage client cases.

In order to authenticate your identity, you must provide two pieces of identification to your Service Provider Registration Authority (SPRA) at the time of your face to face meeting. Note: S.I.N. and Ontario Health cards will not be accepted as authentication of identity.

Must select one box:

New User	Update Existing User	English	French (ce formulaire est aussi disponible en francais)
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Section 1: Application Details				
Last Name:	First Name:		Middle Initial:	
Position/Titles:	Position/Titles:		Service Provider Organization Name:	
Work Address (street number and	Suite/Unit:	City:	Postal code:	
name):				
Work Telephone Number: Ext.:		Work E-mail Address (No		
		address must be accessit	ble by only you)	
EOIS-CaMS Application User Role:				
Caseworker Administra		ator	EOIS-CaMS Application	
Caseworker	Administrator		role not required	
EOIS-CaMS Reporting User Role:				
		EOIS-CaMS Reporting role		
Stan	Manager		not required	
EOIS-SP Connect User Role:				
Administrator Subm		on Authority	Financial Officer	
EOIS-SP Connect role not required Enhanced Authority			Enhanced Authority	

Section 2: Terms and Conditions

Security

- 1. I will take all reasonable measures to:
 - a. protect my EOIS-CaMS Enrolment Number and PIN including, but not limited to, refraining from sharing my EOIS-CaMS Enrolment Number or PIN;
 - b. prevent the loss, disclosure, modification, and unauthorized use of my EOIS-CaMS Enrolment Number and PIN; and

control access to computers or devices containing my EOIS-CaMS Enrolment Number and PIN.

Use and Reliance

- I will use my EOIS-CaMS Enrolment Number and PIN to access EOIS-CaMS for the sole purpose of providing services to clients in accordance with the Service Provider's agreement with the Ministry of Labour, Training and Skills Development (Ministry) and the system rights granted to me according to my assigned EOIS-CaMS user role(s).
- 3. I will only access EOIS-CaMS if it is necessary and proper in my employment duties and in accordance with the Service Provider's agreement with the Ministry and the system rights granted to me according to my assigned EOIS-CaMS user role(s).
- 4. I will take all reasonable measures to ensure that accurate information is recorded in EOIS-CaMS.
- 5. I will not:
 - a. interfere with or disrupt EOIS-CaMS
 - b. attempt to gain unauthorized access to EOIS-CaMS, the Enrolment Number or PIN of others; or
 - c. use EOIS-CaMS in any manner whatsoever that could disrupt the normal flow of Ministry business.
- 6. I will immediately cease accessing EOIS-CaMS if no longer required for my employment duties or if I cease employment with the Service Provider.

Protection of Client Privacy

- 7. I will protect the privacy of the Service Provider's clients in accordance with the Service Provider's privacy policy and its agreement with the Ministry.
- 8. Before accessing the EOIS-CaMS, I will:
 - a. participate in the privacy training that the Service Provider is obligated to provide; and
 - b. sign a confidentiality agreement with the Service Provider to protect client privacy in accordance with the Service Provider's privacy policy and its agreement with the Ministry.
- 9. I will take all reasonable measures to ensure that I do not collect use, disclose or dispose of personal information contained in the EOIS-CaMS for any purposes other than those set out in these Terms and Conditions.

Obligation to Provide Notice

- 10. I will notify the SPRA immediately if:
 - a. I have any reason to believe that my EOIS-CaMS Enrolment Number and/or PIN is or may have been compromised or considered insecure; or
 - b. I have any reason to believe that there has been unauthorized collection, use, disclosure or disposal of personal information contained in the EOIS-CaMS.
 - c. any of my identification and authentication information, or my contact information set out in Section 1, has changed or becomes otherwise incomplete or inaccurate; or
 - d. I cease employment with the Service Provider or my job changes such that access to the EOIS-CaMS is no longer necessary and proper.

Monitoring and Auditing

11. The Ministry may monitor and audit my use of EOIS-CaMS, including all transactions made on client and user files, my use of Ministry forms and my retrieval of Service Provider reports.

Breach of Terms and Conditions

12. I will cooperate with the Ministry and its contractors or auditors in any investigation into a breach of these Terms and Conditions and the privacy and security provisions of the Service Provider's agreement with the Ministry.

Revocation of Access to EOIS

13. The Ministry may revoke my access to either EOIS-CaMS for any reason, including a breach of these Terms and Conditions, without notice to me and without liability to me.

Modification of Terms and Conditions

These terms and conditions may be amended from time to time by the Ministry upon notice to me and the Service Provider and such changes will be posted at <u>myEOIS</u>.

Notice of Collection

The personal information you provide on this form is necessary for the purpose of issuing you an EOIS-CaMS Enrolment Number and PIN and authorizing you as an EOIS-CaMS Service Provider Staff User. The information will be used to verify your identity and ensure that the EOIS-CaMS Enrolment Number and PIN correctly identifies you and no one else. The personal information on the form will not be used or disclosed for any other purpose, unless authorized or required by law and will be retained by the Service Provider for 7 years beyond the date the user's account is closed.

The personal information is collected in compliance with s. 38(2) of the Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31, as amended. If you have any questions about the collection and use of your personal information, please contact the Service Delivery Manager at your local Ministry office.

I (the Applicant) declare that I have read and understood the "Terms and Conditions" in Section 2 of this form and agree to be bound by it. I declare that I have provided my original identifying documents and that all information contained in the documents and in the form is true.

Applicant Signature (must be signed in the presence of the Authenticating SPRA):	Date:
X	

Section 3: Authentication of Applicant's Identity (to be completed by the Authenticating SPRA)

The Applicant must provide at least two (2) pieces of identification including one (1) Primary document and at least one (1) Secondary document. If the Primary document does not contain a photograph, then the Applicant must provide two (2) pieces of Secondary documents and one of the secondary documents must contain a photograph. All identification documents must be originals (no copies). Note: S.I.N. and Ontario Health cards will not be accepted as authentication of identity.

Primary Document

Document Description	Full Name of Applicant on Document (if different from Section 1)	SPRA Initials			
1 st Secondary Document					
Document Description	Full Name of Applicant on Document (if different from Section 1)	SPRA Initials			
2 nd Secondary Document (required if Primary does not contain photo)					
Document Description	Full Name of Applicant on Document (if different from Section 1)	SPRA Initials			

Section 4: Declaration of the Authenticating SPRA

I confirm that I currently have the SPRA designation in EOIS-CaMS. I have met with the individual who is requesting access to EOIS-CaMS, was present when the Applicant signed this form, have viewed his/her identification documents including a document with a photo of the Applicant, and provided the Applicant with a copy of this completed form.

I am satisfied that the true identity of the Applicant is reflected in the identification documents that I have recorded in Section 3 of this form.

Full name of SPRA:	Work e-mail address:
SPRA Signature:	Date:
X	

Description of Service Provider EOIS-CaMS Application User Roles

Caseworker

- Create, view, update and close Client profiles (except all financial data).
- Create, view, update and close Service Plans.

Administrator

- Create, view, update and close Client Profiles (except all financial data).
- Create, view, update and close Service Plans.
- Create, view and update Resource and Information data.

Description of Service Provider EOIS-CaMS Reporting User Roles

Staff

• Access to staff level predefined Service Provider reports.

Manager

- Access to staff level predefined Service Provider reports.
- Access to manager level predefined Service Provider reports.