

Information Technology and Telecommunications Network User Access Form (UAF)



Health
Hunter New England
Local Health District

**Once properly completed & authorised, this page MUST be scanned to PDF and emailed to:
HNELHD-ICT-UAF@health.nsw.gov.au**

This form is to be completed for granting and removing access to the HNE LHD PC Network. This form will be returned unprocessed if **ALL** information is not supplied **LEGIBLY AND IN FULL**.

ACTION REQUESTED: (tick applicable action) – if action is delete, please specify date on which account is to be deleted

☐ Add New User ☐ Modify Existing User ☐ Delete Existing User Date to Delete: / /

Personal Details: PLEASE PRINT

All fields Marked * are MANDATORY

*Surname:	*First:	Middle:
*HNE Campus Name:		*Department Name:
*Work Phone:		Mobile Phone:
*Employee ID Number:		*Cost Centre Number:
*Position Title:		

Application Access – Please tick appropriate Box/s		Contact and Phone Number
<input type="checkbox"/>	NEW Network User Logon Account	IT Administration 4921 3800 option 4
<input type="checkbox"/>	Microsoft Outlook Mailbox	IT Administration 4921 3800 option 4
NOTE:	HNELHD Staff with a valid Employee ID will be automatically provisioned a Mailbox. <u>All other staff</u> will need to have creation of a Mailbox requested and authorised on this UAF.	
<input type="checkbox"/>	Internet Access HNE ELT or DELEGATE APPROVAL REQUIRED (see page 2 for further information)	
NOTE:	HNELHD Staff with a valid Employee ID will be automatically provisioned Internet Access. Internet Access for all other staff will need to be requested and authorised on this UAF and will only be granted where a business need is evident. Internet use is monitored.	

Shared Folder Access

This Form is no longer to be used for requesting changes of access to Shared Folders. Shared Folder access changes are now to be requested on a separate form called **Shared Folder Requests-Online**. This form is available in the **IT Forms** Section on the HNELHD Intranet. <http://intranet.hne.health.nsw.gov.au/forms>

CONDITIONS OF ACCESS AGREEMENT

By signing below, I signify that I have read, understand and accept the terms stated in the following documents:

- NSW Health Code of Conduct (PD2005_626) policy http://www0.health.nsw.gov.au/policies/pd/2015/PD2015_049.html
- NSW Privacy Manual for Health Information <http://www.health.nsw.gov.au/policies/manuals/Pages/privacy-manual-for-health-information.aspx>
- NSW Health Use of Communications Systems (PD2009_076) http://www0.health.nsw.gov.au/policies/pd/2009/pdf/PD2009_076.pdf
- HNE LHD User Confidentiality Statement (see page 2 of this document)

User's Signature: * _____ Date: * _____
(not required if notifying of account deletion only)

Management Authorisation - UAF will not be processed if not completed and signed.

Manager *	*	*	*
PRINT Name and Title	Signature	Date	Phone No.

Contact Details – Used for notifications or requests for additional information. UAF will not be processed if not completed.

Contact/Supervisor's Email * _____@health.nsw.gov.au

Internet Access Authorisation – If Internet Access is ticked above, please ensure appropriate signatory or the UAF will be returned

HNE ELT			
Or Delegate	PRINT Name and Title	Signature	Date Phone No.

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Information Technology and Telecommunications

Network User Access

Information Sheet



Health
Hunter New England
Local Health District

The Network User Access Form (UAF) is to be completed when requiring:

1. Creation of a Network User Logon Account.
2. Deletion of an existing Network User Logon Account.
3. Creation of an Outlook Mailbox.

Personal Details Section

- All fields marked with an * are **mandatory** and **MUST** be completed in full for the UAF to be processed.
- Please ensure that **ALL details are PRINTED LEGIBLY**.

Application Access Section

- All requests must be authorised by the appropriate Department, Service or Business Manager.
- Some applications require two levels of access, a network user logon and access within the application. IT & T will provide the network user logon access only. To obtain application level access please contact the **System Administrator** for the particular Application.
- Access to some applications **not** found on this UAF must be authorised by the application administrator. For example, iPM access must be authorised by your manager and sent to the PAS team after your Network User Logon has been created by IT & T Services.
- All UAFs must be scanned as a PDF and emailed to the address shown on the UAF. **DO NOT SEND THIS PAGE.**

Internet Access

- Internet Access for any person without a valid HNELHD Employee ID may only be approved by members of the HNE LHD Executive Leadership Team and Tier 2 Managers or their delegates. Further details on the HNE LHD Executive Staff structure can be found on the Intranet. <http://www.hnehealth.nsw.gov.au/about/Pages/Our-Executive-Leadership-Team.aspx>

HNELHD User Confidentiality Statement

This agreement applies to the following responsibilities:

1. If supplied with a User Name and Password for network access, I acknowledge it's confidential nature and I undertake to prevent disclosure to any third party.
2. I understand that I am responsible for any access gained to any systems using my User Name and Password, and that abuse of this privilege may result in access being withdrawn and any other such redress as may be required.
3. I will not, by any means, install unauthorised software onto the HNE LHD network or any HNE LHD device without lawful authority. I will not save any inappropriate material to any HNE LHD network or local device, nor will I attempt to connect any Router, LAN or other unauthorised network device to the remote access service.
4. I acknowledge the sensitivity of information stored on the HNE LHD network and undertake to utilise that data for lawful purposes only. Any breaches of privacy or confidentiality caused through this access may be the subject of legal proceedings which may incur significant financial penalty.
5. I will not directly or indirectly use, disclose, publish or communicate any confidential personal health information to any person except as allowed by the Health Privacy Principles.
6. I undertake to inform my supervisor immediately if I become aware of any breach of privacy or security relating to the information I access in the course of my duties.

License and Maintenance Charges

Currently, the provision of employee Remote Access via the Citrix Access Gateway (CAG) incurs certain up-front and ongoing costs. These costs must be approved and met by the appropriately authorised Department, Service or Business Manager. Requests for Remote Access via the Citrix Access Gateway (CAG) by use of the Two Factor Soft Token system that has replaced the previously used Hard Token process are to be made on a separate form called XXXXXXXXXXXXXXXX available in the IT Forms Section of the HNELHD Intranet <http://intranet.hne.health.nsw.gov.au/forms>.

PLEASE NOTE: Charges will apply for use of the Two Factor Soft Token Remote Access system. Please see above mentioned form for details.

This page should be retained for your record and does not have to be scanned and emailed.