



Please email completed form to LTCSolution_Office@ihis.org

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PointClickCare

Long Term Care Solution - PointClickCare (PCC) User Access Form

Request Type			eMail (ihis.org)						
First Name			Surname						
Live	Effective Date	End Date		Employee/Student I	D	Laptop ITSS ID	1		
Train	Effective Date	End Date		Work Phone	Personal Phone				
Department - Position				Student User					
Primary LTCF (check boxes for access to other LTCF)				РЕН	Beach Grove		Colville		
Riverview	Summerset	Wedgewood		Maplewood	SMH		MSEH		
Additional Information									
Manager 1	Name								

Manager Signature

Signature Date

This section is to be completed by the Long Term Care Solution Office Staff

PointClickCare Security Role	Enterprise User	eMAR Backup	Remote User

LTC Solution Office Signature

Signature Date

User Initials