


## Security Services-Access and ID Card Policy DBHSC

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 <b>MCMASTER UNIVERSITY DAVID BRALEY HEALTH SCIENCES PROCEDURE MANUAL</b>	<b>Procedure:</b>  <b>Access and ID Card Policy DBHSC</b>	<b>Procedure #</b>
<b>Approval:</b> Jennifer Atkinson Building Manager DBHSC	<b>Approval Signature:</b>  _____ Building Manager DBHSC	<b>Date:</b> Created: 2020.12.02 Revised: 2023.10.24

### **Policy**

The purpose of this policy is to ensure a process is in place to manage the production and distribution of identification cards and access control cards at the David Braley Health Science Centre (DBHSC) located at 100 Main Street West, Hamilton ON L8P 1H6

### **Procedure**

- 1) The party requesting an Access/Identification Card shall;
  - email [cr\\_mhsc@mcmaster.ca](mailto:cr_mhsc@mcmaster.ca) to request an ID/Access card.
- 2) The requesting party shall;
  - produce their signed Photo ID & Card Access form (see Appendix A) and employee number (if a McMaster Employee) in their email along with a photo. The photo for security purposes; the employee swipe card must be:
    - clear, sharp and in focus
    - taken with a neutral facial expression
    - eyes open and clearly visible
    - mouth closed, no smiling
    - uniform lighting and with no shadows, glare or flash reflections
    - face and shoulders to the camera: straight-on, centered and squared
    - a plain white or light-coloured background with a clear difference between your face and the background. Photos must reflect/represent natural skin tones.
    - The face must be fully centred with top of head and neck present in photo (shoulders may be seen but not the rest of the body)
    - an image of your current appearance, taken within the last six months
    - JPG format with size between 1 MB and 3 MB
    - may be taken from an existing photo of government issued id (driver's license or passport photo), include one photo that shows entire document page
  - produce government issued photo identification upon pickup of the access card

- 3) DBHSC Operations Office shall;
- Prepare the card with the persons information that was provided on the form and notify requesting party once ready for pickup from room 1007.
  - Once the ID Card Form is completed the requesting party will bring completed form to person with signing authority.

**Persons with signing authority are as follows:**

- a. **DFM – Education:** Nancy Devlin
- b. **DFM – Faculty:** Cathy Stampfi
- c. **DFM – Staff:** Jean Paul Bartha or Sarah Collier
- d. **DFM – Clinic/Mat/Derm:** Jennifer Frid or Jill Berridge
- e. **Public Health/City of Hamilton:** Angel-Anne Vecchiola
- f. **Education Services – FMPE:** Karen Birthelmer
- g. **Education Services – CPD:** Danielle Stayzer
- h. **Education Services – MERIT:** Samantha Applewhaite
- i. **Education Services – MacCare:** Carrie Grigg
- j. **Café on Bay, Pharmacy, Garda, Commercial Cleaning, Contractors to DBHSC:** Samantha Hillgartner or Jennifer Atkinson

- 4) The person with signing authority shall;
- email [axiomrep@mcmaster.ca](mailto:axiomrep@mcmaster.ca) to request the access points that need to be included to the Access and Identification Card as outlined below.
  - In the event additional access points are required, they shall be listed in Appendix A.
- 5) Access and Identification Cards for DBHSC that are reported lost or stolen are the responsibility of the individual that has been assigned to. Persons that have been assigned an Access and Identification Card shall;
- Call Security Services at 905-525-9140 extension 24281 to report a lost or stolen Access and Identification Card
  - Lost or Stolen Access and Identification Cards will be the subject of an investigation to determine how the Access and Identification Card was lost or stolen.
  - A replacement card will be the responsibility of the person who lost it to pay DBHSC Operations Office a fee of \$20.

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- 6) Upon completion of employment/contract all signing authorities/HR Teams must cancel the persons card by emailing [axiomrep@mcmaster.ca](mailto:axiomrep@mcmaster.ca), [doylesa@mcmaster.ca](mailto:doylesa@mcmaster.ca) or [geekiej@mcmaster.ca](mailto:geekiej@mcmaster.ca)
- 7) Persons with an approved access card may only use the access card that was made for them. Sharing of access cards is not permitted.

Appendix A



**Photo ID & Card Access  
David Braley Health Sciences Centre  
100 Main Street West, Hamilton ON**

If you require building access on this Photo ID Card for the David Braley Health Sciences Centre located at; 100 Main Street West in Hamilton, please have this form signed by your area's signing authority. The signing authority will email the completed form to, **axiomrep@mcmaster.ca** as well as, **cr\_mhsc@mcmaster.ca** and standard access to your department will be granted and will include the fourth floor lunchroom and stairwells on this request.

In the event additional access beyond what is normally provided please identify this requirement below.

**First & Last Name:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Employee Number or Student Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Access Required:**

- |  |  |
|--|--|
| <input type="checkbox"/> DFM   | <input type="checkbox"/> FMPE/CHSE/Merit/MacCare |
| <input type="checkbox"/> Clinic (1 <sup>st</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup> Floors) | <input type="checkbox"/> Other: _____            |
| <input type="checkbox"/> City of Hamilton Public Health                                      |  |

**Reason additional access required in your department**

**Location/door:**  
**Reason:**

<b>DBHSC Operations Office:</b> <b>Card #:</b> _____ <b>Date:</b> _____ <b>Initials:</b> _____
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