

District of Columbia Department of Health
Health Emergency Preparedness and Response Administration
Division of Emergency Medical Services

Online EMS Educational Course Submissions User's Manual

June 2015

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Release Notes

June 2015 – Initial Release

Preface

The EMS Division of the Department of Health has been working on converting a number of paper-based forms to electronic format, in order to improve efficiency and timeliness. The first program was the EMS Certification process, which was followed by the Do Not Resuscitate (DNR) Order Requests. The next program in this conversion process is the submission of EMS Course Requests.

This new format allows you to complete the submission of an EMS Course Request through the web site instead of completing a paper form. The request is submitted directly to the EMS Division so that it can be processed in a timely fashion. It provides for the use of attachments so that you can include listings of additional instructors or dates.

Once the application is received, it will be processed and you will receive an authorization letter with a course number as has been done in the past.

We hope that you find this new method of submitting courses quicker and more advantageous. If you need assistance or if you have any issues with the new system please let us know.

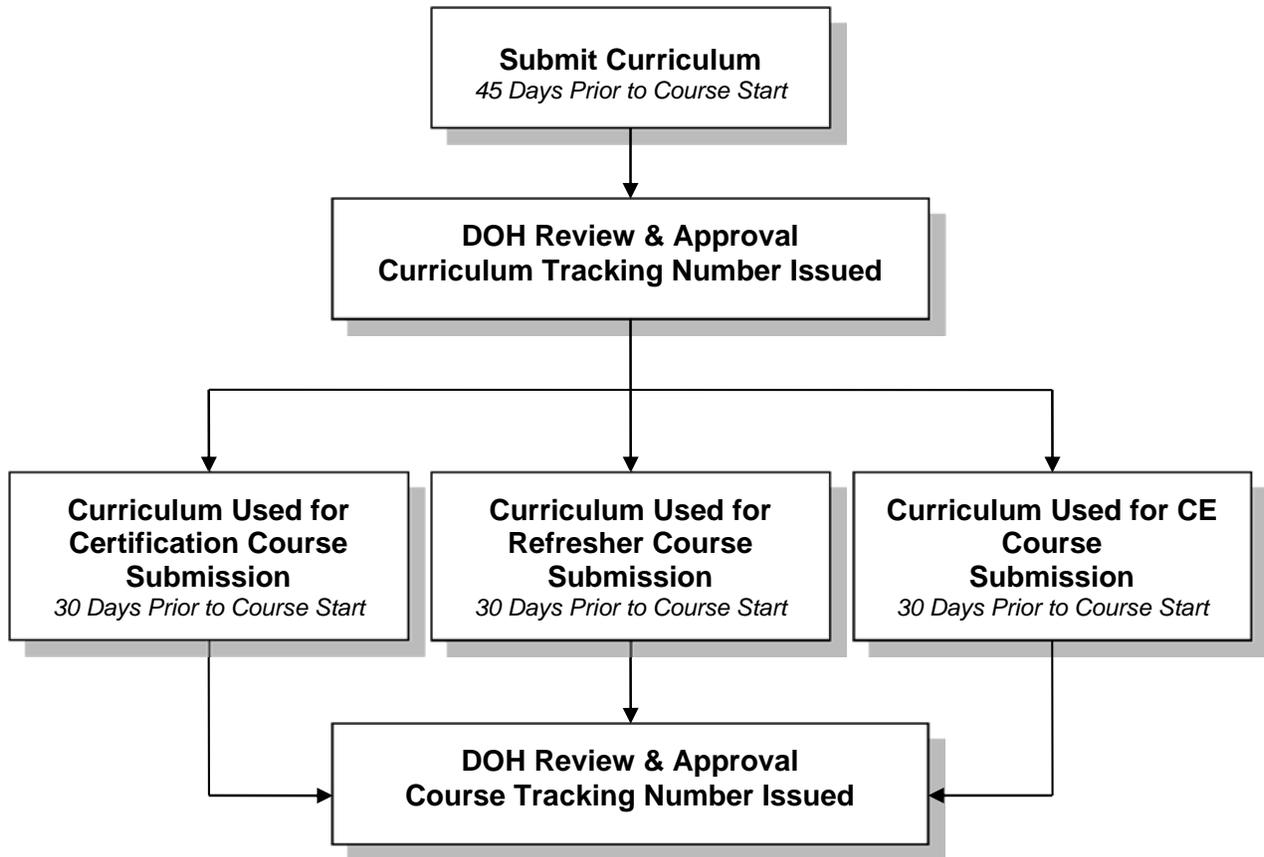
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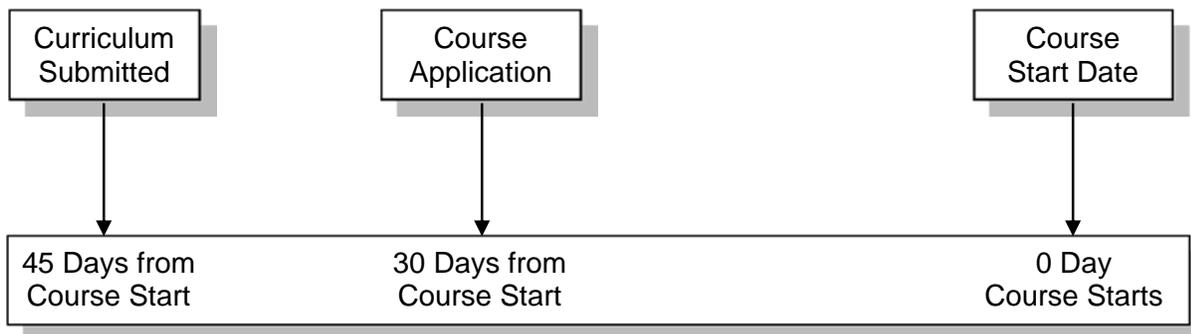
Overview

Regardless of the type of course that an institution wishes to teach, it all begins with the submission of a curriculum. Once the curriculum is approved and issued a number, it can be used as part of a certification course, refresher course, or a continuing education course. ***Curriculums are still submitted using the paper-based form.***

Course Approval Flow Chart



Curriculum and Course Application Timeline

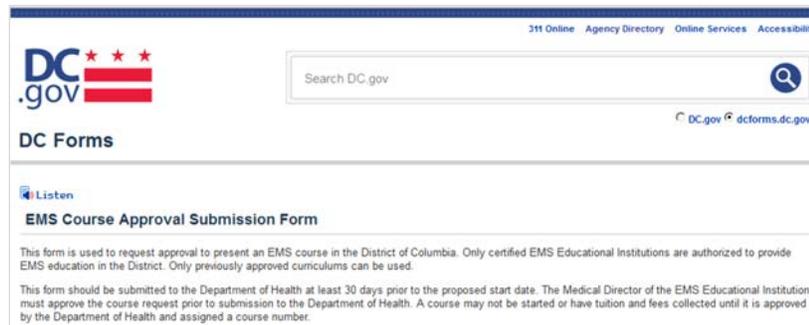


Submission and Approval of an Education Course

This process is for locally developed and/or instructed courses. These courses are typically for initial certification, refresher, continuing education, or pilot programs. Any EMS course taught in the District must be reviewed and approved by DOH. There is no need to submit for approval those courses that are nationally recognized and provide their own certification (such as the American Heart Association's Advanced Cardiac Life Support course or the National Association of EMT's Prehospital Trauma Life Support). Once a curriculum or series of curricula have been approved, the educational institution can apply for approval of a course by the Department of Health. ***You can only use DOH approved curricula during the course.***

The EMS Division has transitioned from paper based-applications to an electronic format. The new online EMS Course Approval Submission Form is located on the DOH EMS web site at <http://dcforms.dc.gov/webform/ems-course-approval-submission-form> (see below). **You should no longer use the paper-based form, DC DOH-EMS Form 2011-0015B.**

Online EMS Course Approval Application Screen



An EMS Course Approval Submission Form must be submitted anytime an institution wishes to teach a locally developed EMS course, regardless of the type of course. It must be submitted to DOH at least 30-days prior to the first day of the course. The form is divided into six sections:

- Educational Institution Information
- Course Information
- Curricula Used
- Instructional Staff
- Certification
- Attachments

Educational Institution Information

Similar to the previous paper-based form, the online form begins with basic information on who is submitting the course for approval (see sample on the right). This includes the name of the institution, the Program Coordinator and contact information, such as phone number and an e-mail address. This information will allow us to contact the Program Coordinator if any questions arise about the course.

Institution Information

Sponsoring EMS Educational Institution	<input type="text"/>
Program Coordinator	<input type="text"/>
Phone	<input type="text"/>
E-mail	<input type="text"/>

If the course is to be held at the institution, click on the 'Yes' button and then proceed to the *Course Information* section (There is no need to complete the *Course Location* box if it is being held at your facility). If the course is to be taught at another location, click on the 'No' button and complete the items in *Course Location* box. This includes the complete address of the facility where the course will be taught.

Course Location Information Screen

At Institution
 Yes
 No

Course Location

Address

City

Zip

State
- None -

Course Information

The next section provides basic information about the course. The name of the course should be entered on the top line. This can be any title that makes sense to you and your institution's record keeping.

Course Information Screen

Course Information

Course Title

Training Level
- None -

Course Type
- None -

Course Start Date
Month Day Year

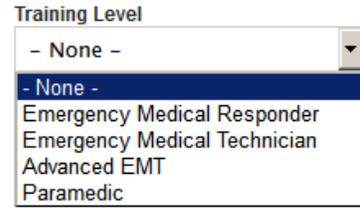
Course End Date
Month Day Year

Hours

Days of the Week Course Held
 Sunday
 Monday
 Tuesday
 Wednesday
 Thursday
 Friday
 Saturday

You need to identify the training level for which the course is designed. A drop-down box contains the four certification levels as identified by the NREMT and DC DOH:

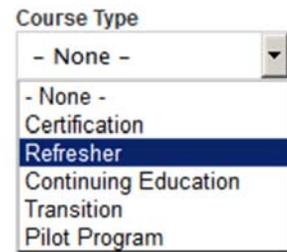
- Emergency Medical Responder (EMR)
- Emergency Medical Technician (EMT)
- Advanced EMT (AEMT)
- Paramedic



Select only one certification level. Your selection will help determine what level of Continuing Education (CE) credits are awarded.

The next item to identify is the type of course being held. Once again, a drop-down box has been provided that contains the five types of courses that can be submitted:

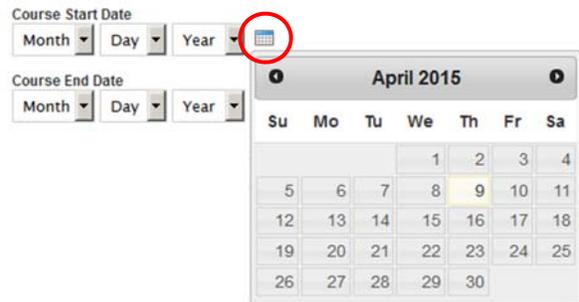
- Certification
- Refresher
- Continuing Education
- Transition
- Pilot Program



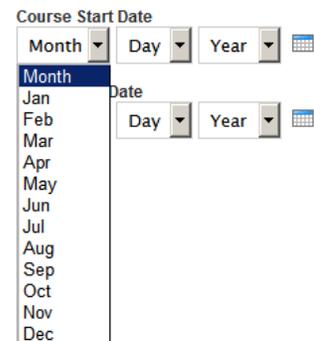
Like the Training Level discussed above, only one type of course can be selected.

The next two entries provide information about when the course will be held. This includes the projected start and ending dates for the course. There are two ways that this can be done.

The first method is to click on the 'calendar' icon at the far right side of the course date (circled in red). This will bring up a calendar showing the current date. Use the buttons at the top of the calendar to scroll through the months. Once you find the month, click on the date on the calendar. That date will be entered into the Course Start or End Date.



The second method is to utilize the drop-down boxes for month, day and year. Simply click on the arrow to reveal the month, then select the month from the available list. Repeat this for the day and the year.



The next data entry is the number of hours for the course. *You do not need to provide a number of hours for certification courses. **You only need to complete this if you are teaching Continuing Education or Refresher courses.*** The number entered here is the number of hours approved when the curriculum was submitted. If conducting a class that uses multiple curriculums, the hours should be added together.

You will also need to identify what day(s) of the week the course will be held. Simply check the appropriate boxes beside the day of the week.

If the course is for BLS certification (EMR and EMT), the educational institution will need to conduct a practical exam. If there is a need to hold a practical exam, click the 'Yes' button under 'Practical Exam Needed.'

When 'Yes' is selected enter the proposed date(s) for the exam. You can enter up to three dates in the three text boxes. DOH will work with you to have a DOH representative present at your practical exam. The DOH representative will record the results of the exam and will report those results to the National Registry.

Near the end of this section, there are two data fields that must be completed. Check the appropriate button identifying if the course is open to the public. If it is open to the public, please check the 'Yes' button. Otherwise, click on the 'No' button. Then enter the number of students you estimate will be in attendance.

Curricula Used

The next section allows you to list up to four approved curricula that you will use in the course. If you are using more than four curricula, simply attach a listing of the additional curricula to the application (see section below on *Attachments*). It is important to include the curriculum name and number with your application. Failing to include these will delay processing of your application.

Hours

Days of the Week Course Held

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

Practical Exam Needed

- Yes
- No

Practical Exam Dates

Practical Exam Date 1

Practical Exam Date 2

Practical Exam Date 3

Open to Public

- Yes
- No

Projected Number of Students

Curricula Information

Title

Number

Title

Number

Instructional Staff

In this area list all of the instructors who will be participating in the course. Include the instructor's name, e-mail address, phone number and DOH instructor number (if applicable). There are enough spaces to list 5 instructors. If you need to list additional instructors, simply attach a listing of the additional instructors to the application (see section below on *Attachments*).

Instructors	
Name	<input type="text"/>
Email	<input type="text"/>
Phone	<input type="text"/>
Number	<input type="text"/>

Medical Director

In this section the Program Coordinator enters the name of Educational Institution's Medical Director. The Program Coordinator will also click 'Yes' or 'No' to indicate that the Medical Director has approved the course. DOH will contact the Medical Director via e-mail to confirm the course has been approved. If the Medical Director indicates the course has not been approved for submission, DOH will automatically deny the request without further review.

Medical Director	
Name	<input type="text"/>
Approved	<input type="radio"/> Yes <input type="radio"/> No

Attachments

The online application can accept up to four separate attachments, allowing you to submit additional materials with the application. As we noted earlier, this section may be used to attach a listing of additional instructors and/or additional course dates. ***Attachments are limited to 2MB in size.***

Multiple Courses

Depending on your situation, you may be able to submit for multiple course approvals on a single application. For example, if you are planning to teach 12 refresher courses over the coming year and the same material will be used for every course, then the only thing that changes is the course dates and possibly the instructors. When this occurs, you can submit a single application with the following modifications:

- Complete the *Educational Institution Information* section as usual.
- Complete the *Course Information* section as usual except leave the start and ending dates blank.
- Complete the *Curricula Used* section as usual.
- If you will be using the same instructors for all of the courses, you can complete the *Instructional Staff* section.
- Complete the *Certification Section* as usual.
- Attach a listing of the class dates on a separate sheet. If you will be using different instructors on different course dates, list the instructors scheduled for each date.

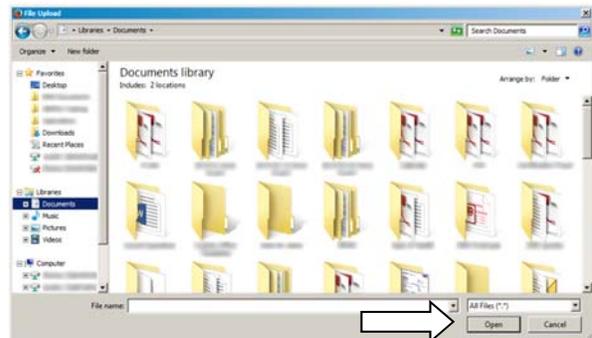
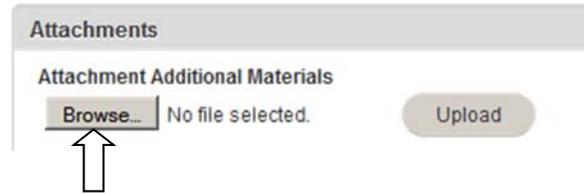
Each course will receive a separate course number, along with a separate approval letter.

Attaching Documents

Up to four documents can be attached to the application. Although there is no restriction on the type of file that can be attached, Microsoft Word or Adobe Acrobat are the preferred formats for documents.

To attach a document, begin by clicking on the 'Browse' button. This will open up a file dialog box.

Navigate to the folder that contains the file you intend to upload. Highlight the file and then click on the 'Open' button.



The file you selected is now listed next to the 'Browse' button. If the file is correct, click on the 'Upload' button to attach it to the application.



If you have additional documents to attach, repeat this process in the next open 'Attachments' box.

Certification

Once you have entered all the information and uploaded your attachments, you are ready to submit the application to the Department of Health. Read the Certification Statement prior to submission. If you do not agree with the statement, do not submit the application to the Department of Health.

Finally, type the text displayed in the Captcha box prior to clicking on the 'Submit' button.

Certification Statement

I hereby certify that the information contained within this application is true and complete to the best of my knowledge and belief. I verify that the Medical Director of the sponsoring EMS Educational Institution has reviewed and approved this course application, and that this is subject to verification by the Department of Health. I further understand and acknowledge that the making of a false statement in connection with this application is punishable by criminal penalties, and may also subject me to civil penalties and to the denial, termination or revocation of certification of this course.

This question is for testing whether you are a human visitor and to prevent automated spam submissions.



Type the text

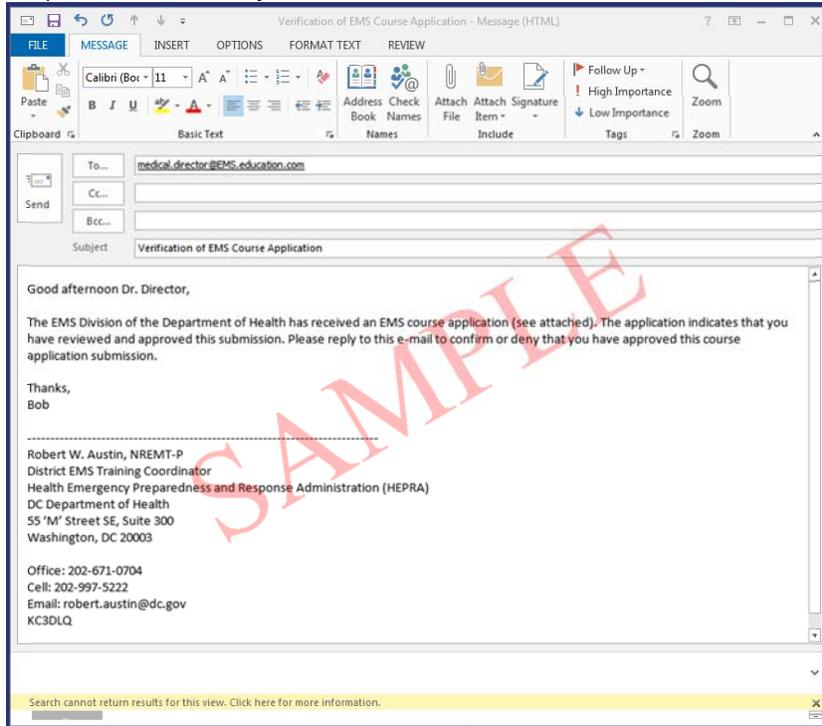
Privacy & Terms

Submit

Medical Director Verification

Once the application is received, the Medical Director of the Educational Institution will be contacted by e-mail to verify they have approved the course application submission. If the Medical Director verifies they have reviewed and authorized the submission of the course application, the application will be processed. If, however, the Medical Director indicates they have not approved the course application submission, the application will be denied without further review.

Sample Medical Director Verification E-mail



Processing the Application

Once the verification is received from the Medical Director, the course application will be processed. If any irregularities are discovered, the Program Director listed on the application will be contacted. Once the application is successfully processed, the EMS Educational Institution will receive an Authorization Form for the course (this is the same form as has been used in the past). The Authorization Form will include the DOH course number. This form will be sent to the Program Coordinator using the e-mail address listed on the application.