



## Online EMS Education Approval System



### Application to Conduct EMS Training

Effective May 1, 2020, all applications to conduct EMS training (initial and continuing education) shall be submitted using the DPH online system available at <https://dphsubmissions.ct.gov/EMSSystems>. This replaces the current T-1 and T-2 form, however it does not eliminate the need for supplemental documentation.

Applications must still include supporting documents such as:

- Course syllabus, lesson plan or outline.
- Schedule including dates, times, instructors
- Medical director approval (letter or T-3 form)
- Sample course completion certificates

This system will improve the efficiency of the approval process. Upon applying, the instructor will receive a confirmation of the submission. Once reviewed, the instructor will receive an approval, denial or request for additional information.

#### Directions:

1. Assemble the files to be attached (as described above). Whenever possible, use an easily read format such as PDF. Word and Excel documents are acceptable. Please avoid sending photographs of documents and low-quality scans.
2. Navigate to the online application at <https://dphsubmissions.ct.gov/EMSSystems>
3. Enter data in the following fields:

Field	Information
Instructor Email Address	Your primary email address for OEMS communications
Program Sponsor	Name of the agency, school or location hosting the program. This may be a hospital, EMS service, private business or even an individual.
City or Town	City or Town in which most of the education will occur. "Online" and "other" are options.
Contact Website or Email	Public contact for registration or information
Contact Phone #	Public contact phone number
Type of Course	Select the correct type of course. Please note that "CME" includes all continuing education that is not part of the established NCCR curriculum
Course Title	If an initial course or NCCR course, this may be left blank. For all CME topics, enter a title.
Course Hours	Number of class or CME hours (For an ongoing class, note the number of hours for each instance of the program, for example a monthly 2-hour drill would be 2 hours, not 24 hours)
Method of Education	Select the most appropriate method: <b>F0</b> – Initial course (may include classroom and online elements) <b>F1</b> – One-time CME program (such as a seminar or conference) <b>F2</b> – Ongoing or repeating CME program (such as an NCCR or monthly training event) <b>F3</b> – Distributive learning CME – online or other asynchronous CME activity. <b>F5</b> – Video Instructor Led Training – Live, two-way video and audio CME activity, such as video conferencing. Please consult the EMS Education and Training Manual for further information on these categories

<b>Start Date</b>	For <u>traditional</u> courses, this is the first meeting date of the course. For <u>ongoing</u> courses, this is the first date the course is available (In accordance with Sec. 19a-170-17 of the Regulations of Connecticut State Agencies, all EMS training programs must submit for approval 30 days in advance of starting training)
<b>End Date</b>	For <u>traditional</u> courses, this is the last meeting date of the course. For <u>ongoing</u> courses, this is the last date the course is available
<b>First Name</b>	Instructor First Name
<b>Last Name</b>	Instructor Last Name
<b>EMS-I Certification</b>	Instructor EMS-I certification number (if none, see "Other Instructor Qualification, below)
<b>EMS-I Exp. Date</b>	Expiration date of current EMS-I certification
<b>Other Instructor Qualification</b>	If the instructor does not hold current EMS-I certification, indicate how the instructor is qualified as a subject matter expert. Include resume, CV or other credential in supporting documents.
<b>Medical Director Name</b>	Sponsoring medical director name.
<b>Medical Director Email</b>	Sponsoring medical director email address.
<b>Medical Director Contact Phone #</b>	Sponsoring medical director phone.
<b>Affirmation EMS</b>	By clicking "Yes", the applicant hereby affirms that EMS Instructors are required to maintain course records including but not limited to rosters, attendance sheets, quizzes, after-training course reviews and other records as listed in the current EMS Education Manual available online at <a href="http://www.ct.gov/dph/EMS">www.ct.gov/dph/EMS</a> .
<b>Affirmation Submission</b>	By clicking "Yes", the applicant hereby affirms that the course listed herein complies with and will continue to comply with all relevant federal and state laws including but not limited to current US Department of Transportation EMS Educational Standards, the State of Connecticut General Statutes, Regulations of State Agencies and the Office of Emergency Medical Services Education Manual. For EMR, EMT, AEMT and paramedic NCCR core modules, applicant affirms that the NREMT outline will be followed. Upon course completion, I will attest that each graduating student has demonstrated the required level of competency as required in current standards.
<b>Upload Documents</b>	Click "Yes" to enable uploading of documents. (If you have not yet filled all previous required fields, this option will not be available). Attach one or more supporting documents. Please ensure that you have attached ALL documents as this is a one-time submission.
<b>Submit</b>	Once complete, click Submit.

After submission, you will receive an automatically generated confirmation of your submission. This is **NOT** your approval, rather confirmation that the system has received your application.

After review of your application, you will receive an approval, denial or request for additional information. Future improvements to this system will add automation features as will be described in future communication.

