EMS Registry Job Aid for EMSVO and EMSVO QRS

If you are a current PA EMS Provider, you must request EMSVO as an add-on through your provider record

You will need to upload your Driver's License and EVOC Certificate - before you begin have those documents available on your computer to upload

- 1. Using Internet Explorer, access the site: <u>https://ems.health.state.pa.us/emsportal/</u>
- 2. On the left hand side, click on "New Provider Application".



3. In the "User Type" drop down box, select either Emergency Medical Services Vehicle Operator (EMSVO) or Emergency Medical Services Vehicle Operator QRS Only (EMSVO QRS).



4. Read the Functional Position Description. You will need to scroll within that box all the way to the bottom to click on "I have read and understand the Functional Position Description (FPD)."

	EMERGENCY MEDICAL SERVICES VEHICLE OPERATOR QUICK RESPONSE SERVICE (QRS)				
NTI	RODUCTION			1	
me Qu	rgency Medical Services Vehicle Operator (EMSVO) is an individual who is certified by the department to operate a ground EMS vehicle exclu JIck Response Service (QRS) operated by an EMS agency	vely for			
RS	S, is an operation in which EMS providers of an EMS agency respond to an actual, reported or perceived emergency and provides EMS to pati ding the arrival of other EMS providers and resources that have been dispatched to the scene	nts			
0/	ALIFICATIONS				
he	Department will certify as an EMSVO an individual who meets the following qualifications:				
Co	mpletes an application for EMSVO certification				
18	years of age or older				
Μι	ist has a current driver's license				
Sh	all have no addiction to alcohol or drugs.				
Sh	all be free from physical or mental defect or disease that may impair the person's ability to drive a ground EMS vehicle				
Su	ccessfully completed an emergency vehicle operator's course of instruction approved by the Department.				
Ha	s not been convicted within the last 4 years prior to the date of application of driving under the influence of alcohol or drugs.	1		1	
Ha ear	ve no convictions for reckless driving or had a driver's license suspended due to use of drugs or alcohol or a moving traffic violation within the la s prior to the date of application	st			
Sh ers	all successfully completed an EVOC following a disqualification from certification because of a conviction as identified above, regardless of whet on successfully completed the course previously	ther the	V		
RES	PONSIBILITIES		1		
he	EMSVO is responsible:		~		



5. The screen will refresh; read the text and then click on "Continue to EMS Application."

I have read and understand the Functional Position Description (FPD): 🗹
I have read and understand the Functional Position Description (FPD) for the level of certification selected above. I meet all the competencies listed on the FPD with or without reasonable accommodations and I have no other condition that would preclude me from safety and effectively performing all the skills and tasks of the certification level for which I am applying for as indicated above.
If an accommodation is required, I understand that I generomine the accommodation on the application to be sent to the Bureau of Exergency Medical Services for considerable
Continue to EMS Application

6. You will be directed to the Applicant Data – General Information Tab. Complete all fields in the General Information Tab.

A	
General Information	EMS plication Education Release and Consent
Applicant Data	
Name	Select Suffix V
	Eard Nerrs Mi
Address:	
	Street Address 1 Street Address 2
	City City Construction 210 - 210-210-4
County of Residence:	Belect County V
Phone Numbers.	
Empli Addross:	Primary Phone Secondary Phone
C IN ADDITION	
Date Of Birth:	
	In lieu of a Social Security Number, Lam providing a PA drivers license, PA Photo ID, or VISA number
Social Security Number	M1.
Gender.	Select Gender 🖌
Race.	Select Race
Education:	Select Education
Criminal History/Dis	ciplinary Actions
of an an a story to s	
NOTE: If you have pre NOT check YES below	viously reported a conviction or disciplinary action and you have been issued an Authorization Letter from the Bureau of EMS, v
○ Yos ○ No	Have you ever been convicted of a crime other than a summary or similar offense?
⊖ Yos ⊖ No	Have you been subject to disciplinary action or had a certification or license or authority to practice any protession or occupation revoked, suspended or restricted?
Additional Informati	n
	De Verseerte een fer Gestienten be Sederen 20
0	Do You want to apply for Centrication by Endorsement?

7. Social Security # - Enter your Social Security number. If you have a Social Security number, but choose not to provide it, check the appropriate box and enter either your ID number (PA driver's license or PA Photo ID) or VISA number. Another tab titled, "Disclosures" will populate and you will be asked to authorize the PA Department of Health to obtain your Social Security number from the PA Department of Transportation. Your application will not be processed until the PA Department of Health receives your Social Security number. This may possibly delay the issuance of your EMSVO Recognition.

ID Number: Visa Number:	In lieu of a Social Security Number, I am providing a PA drivers license, PA Photo ID, or VISA number
Applicant Data General Information	EMS Application Education Disclosures Ratase and Consent

8. If you do not have a Social Security number, check the appropriate box. Another tab titled, "SSN Waivers" will populate and you will be required to complete the waiver statement.

ID Number: Visa Number:	In lieu of a Social Security Number. I am providing a PA drivers license, PA Photo ID, or VISA number
Applicant Data	ion EMS Application Education Disclostres SSN Waivers telease and Consent

"Yes" for Criminal History,

9. If you check another tab titled, "Criminal History" will populate and you will be required to complete additional information. If you have questions relating to convictions, click on the blue help bubble.

Criminal History/Di	sciplinary Actions
NOTE: If you have pr NOT check YES belo	eviously reported a conviction or disciplinary action and you have been issued an Authorization Letter from the Bureau of EMS, DO w.
	Have you ever been convicted of a crime other than a summary or similar offense? 🞔
⊖ Yes ⊖ No	Have you been subject to disciplinary action or had a certification or license or authority to practice any profession or occupation revoked, suspended or restricted?
Applicant Data Cri Failure to supply the therefore delay your as a Pennsylvania C	minal History because were complete and factual criminal history documentation will result in a delay evaluating and processing your application and will eliphility for Pennykana EMS certification and may result in the Department taking action to deny, suspend or revoke your certification entitled EMS Provider.

10. If you check "Yes" for Disciplinary Action, another tab titled, "Disciplinary Action" will populate and you will be required to complete additional information.

Criminal History/Di	sciplinary Actions
NOTE: If you have po NOT check YES belo	eviously reported a conviction or disciplinary action and you have been issued an Authorization Letter from the Bureau of EMS, DO w.
No Ves	Have you ever been convicted of a crime other than a summary or similar offense? ${f p}$
🖲 Yes 🔾 No	Have you been subject to disciplinary action or had a certification or license or authority to practice any profession or occupation revoked, suspended or restricted?
Applicant Da	ta Criminal History
	ametica EMO Application Education Disciplings Actions Decase and Concert
General Inf	
General Inf	ermation Ewis Application Education Disciplinary Actions Release and Consent

11. In the Additional Information section, check "No" for the Certification by Endorsement question.



12. Click on the "EMS Application" Tab and complete the information only if it pertains to you; otherwise, you can leave it blank.



13. Click on the Driving History Tab.



14. Driver's License Section: Upload your Driver's License. Click browse to locate the file on your computer. Upload the document. The document will import into the box.



15. Click the "Add" box and a grid will generate with your document.

	Browse	Add		
			A	
After browsing for y	our file, you must click add in order for the fill	to be attached to ye	our rectau.	
After browsing for y	our file, you must click add in order for the fill	to be attached to ye	our rectad.	
After browsing for y	our file, you must click add in order for the fil	to be attacher to ye	our rectud.	(

16. EVOC Section: Upload your EVOC Certificate. Click browse to locate the file on your computer. Upload the document. The document will import into the box.



17. Click the "Add" box and a grid will generate with your document.

	Browse	Add		
After browsing f	or your file, you must click add in order for the	to be attached to vo	ur rec. rd.	
and brotholing i			di lociato.	

18. General Questions Section: Answer the questions in this section.



19. Driving History Section: Answer the questions in this section. If you answer yes to any of the questions, please follow the instructions for uploading required documents.



20. Click on the Release and Consent Tab.

Applicant Data	\frown	
General Information EMS Application Education	Release and Consent	
Student Release and Consent		

21. Read the Release and Consent Statement. Check the box. Click Submit.



- 22. If you have not completed required fields, a box will appear at the top of the application page indicating what fields you need to complete. Complete those fields, click on the Release and Consent Tab again and click Submit.
- 23. A message box will pop-up asking if you are sure you want to submit your application. Click yes. You will receive a message that your application is in progress. After your application has been submitted, the screen will refresh to the User Type screen. You will then receive an email indicating your application has been received and is being reviewed.

Submit Confirmation	×
Are you sure you want to submit a new EMS Application?	
Yes	no
\sim	

24. When your application is processed, you will receive an email indicating the status of your application and provide further instructions. If your application is processed without needing further action by you, the Regional EMS Council will mail your EMSVO letter and wallet card.

02/22/2018