



Quality & Certification Tool (QCT) Emergency Medical Services (EMS)

User Manual (For Domestic Customers)



Table of Contents

1	Introduction	3
2	About this Manual	3
3	Technical Overview	3
4	Logging in to Emergency Medical Services Tool.....	4
4.1	New User Registration – US and US Territories	4
4.1.1	Participating Agreement	11
4.1.2	Permissions Agreement	11
4.2	Existing User Logging In	13
5	Measures	14
5.1	Enter Data	15
5.2	Upload Data	17
5.3	Edit Data	20
6	Organization User Management	21
6.1	Add a User	22
6.2	Delete a User	24
7	Organization Settings.....	25
7.1	Organization Details	26
7.2	Program Details	29
7.3	Agreement Details.....	31

1 Introduction

Welcome and congratulations on your decision to pursue certification and engage in evidence-based quality improvement efforts with the American Heart Association (AHA).

2 About this Manual

This manual is designed as a reference to provide general knowledge to the End User on QCT – Emergency Medical Services (EMS) tool use, functions, and its operability.

This Manual also covers the elements of EMS including logging in to the tool, navigating the features, and managing your certification or quality improvement program requirements.

3 Technical Overview

The QCT-Emergency Medical Services Tool serves as a portal for maintaining compliance with program requirements, quality measure data entry, and as a general resource for your selected Award. The EMS is specifically designed to enable your organization to:

- Register/Apply for the Emergency Medical Services Award
- Electronically sign your Participating Agreement (contract)
- Submit quarterly quality improvement data to support your program's initiative
- Download your Award Certificate and Marketing Toolkit

4 Logging in to Emergency Medical Services Tool

You can access the EMS tool to engage in AHA certification or quality improvement programs by following the link <https://qct.heart.org/>.

1. Click on the Sign in/Sign up button from the home page.

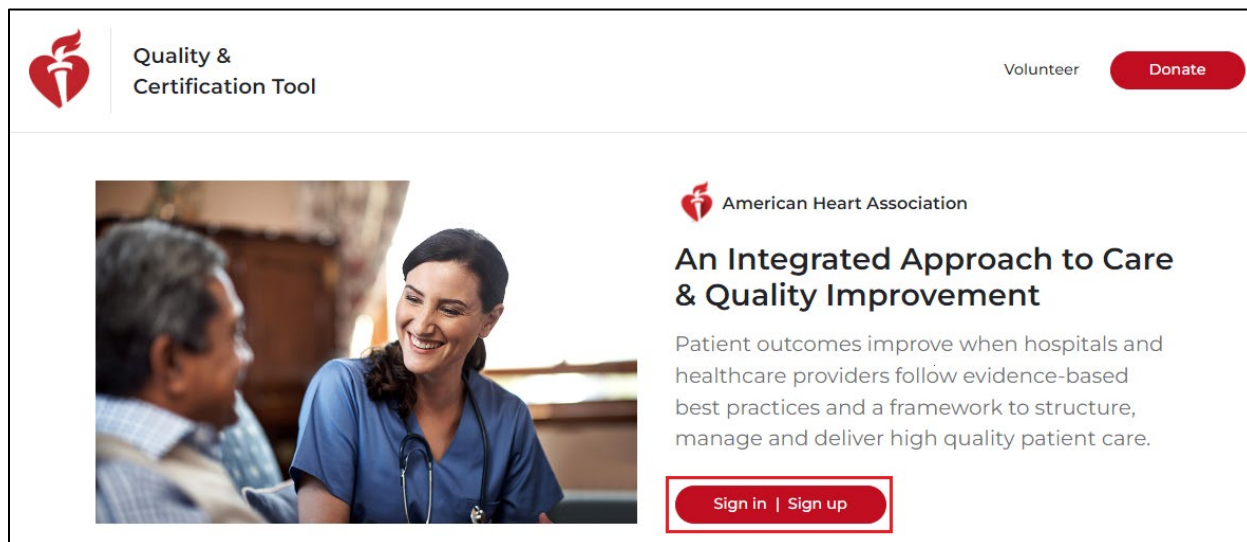


Figure 1 - QCT Login page

4.1 New User Registration – US and US Territories

Follow the steps for registration:

1. Click on Create an account.

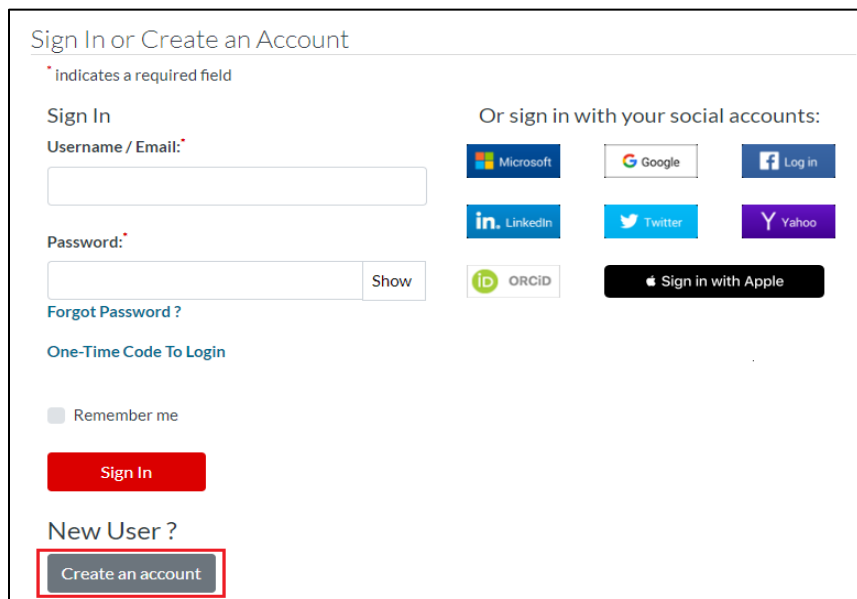


Figure 2 - New User Registration

2. Enter the essential required information in the respective fields and click on Continue after checking on the Terms of Use and Privacy Policy box.

Let's get started

Create an account to access great heart and brain health content with one username and password.

NOTE: If you already have an account with us, please call 1-800-242-8721 to access your info. [Learn More](#)

* indicates a required field

Tell us about yourself

Where do you currently live?*

Select Country ▼

Mobile Number:

By entering your mobile number, you agree to receive a text message from the American Heart Association for our two-step verification process or to reset your AHA password. Standard call, messaging or data rates may apply.

🇺🇸 ▼ 000 000 0000


First Name:*

Last Name:*

Email:*

Confirm Email:*

Upload Profile Image:



Select an image that meets the following criteria:

- File size: max 5 MB
- File type: png, jpg/jpeg or gif
- File name: does not contain the following special characters: \ / : * ? " < > | ' ; =

No file chosen

Password:*

Your password needs to:

- include 7 or more characters
- include upper and lower case letters (for English only e.g. Aa)
- include a number (e.g. 1234)

Re-enter Password:*

I have read and understood the [Terms of Use](#) and [Privacy Policy](#) *

Already have an account?

Figure 3 – Create Account

Once clicked, you will be navigated to the QCT - EMS welcome page followed by the User Dashboard page.

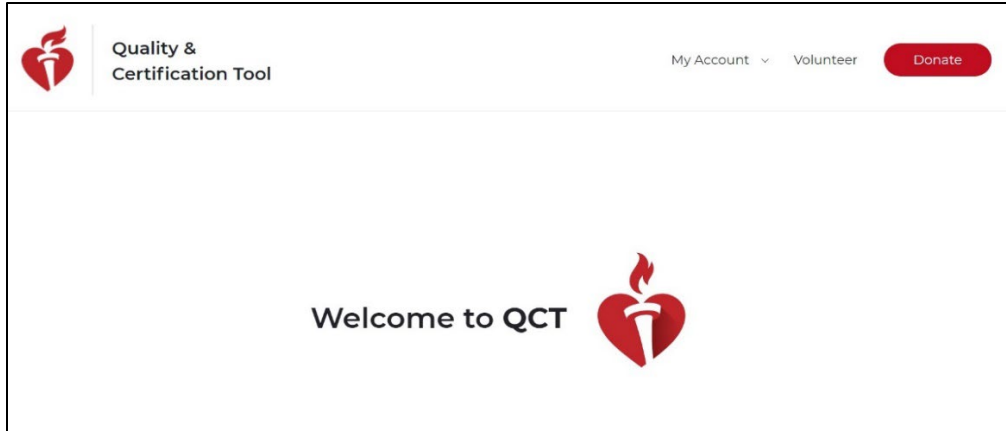


Figure 4 - QCT Welcome Page

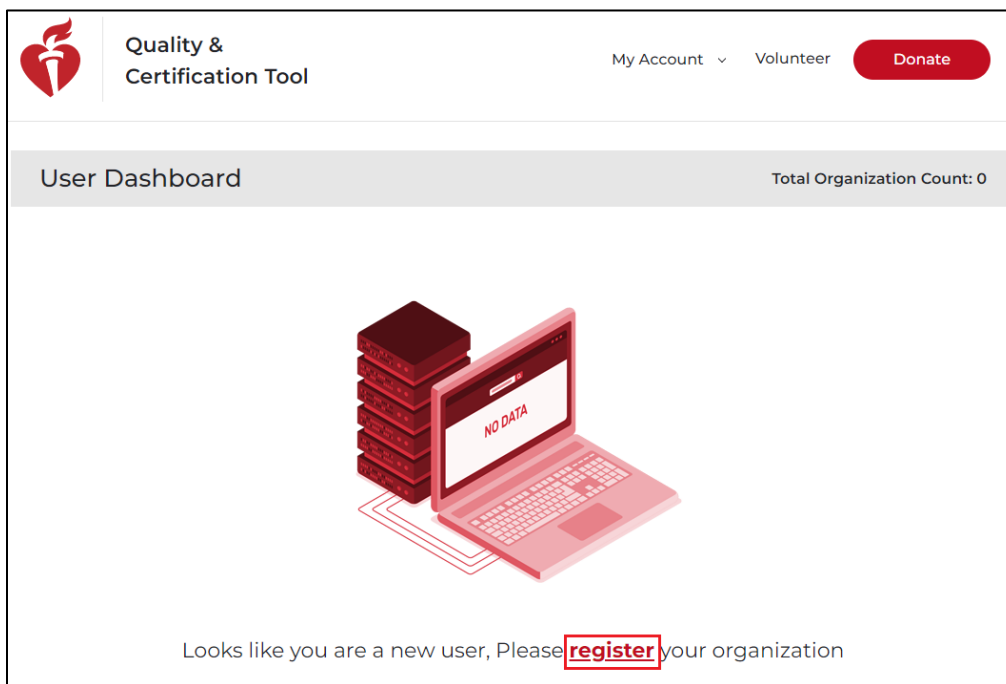


Figure 5 User Dashboard

3. Click on the register link to go to the Registration form.
Or
4. Go to My Account drop down and click on Add New Organization to go to the Registration Form.



Figure 6 My Account dropdown

Registration Confirmation window appears.

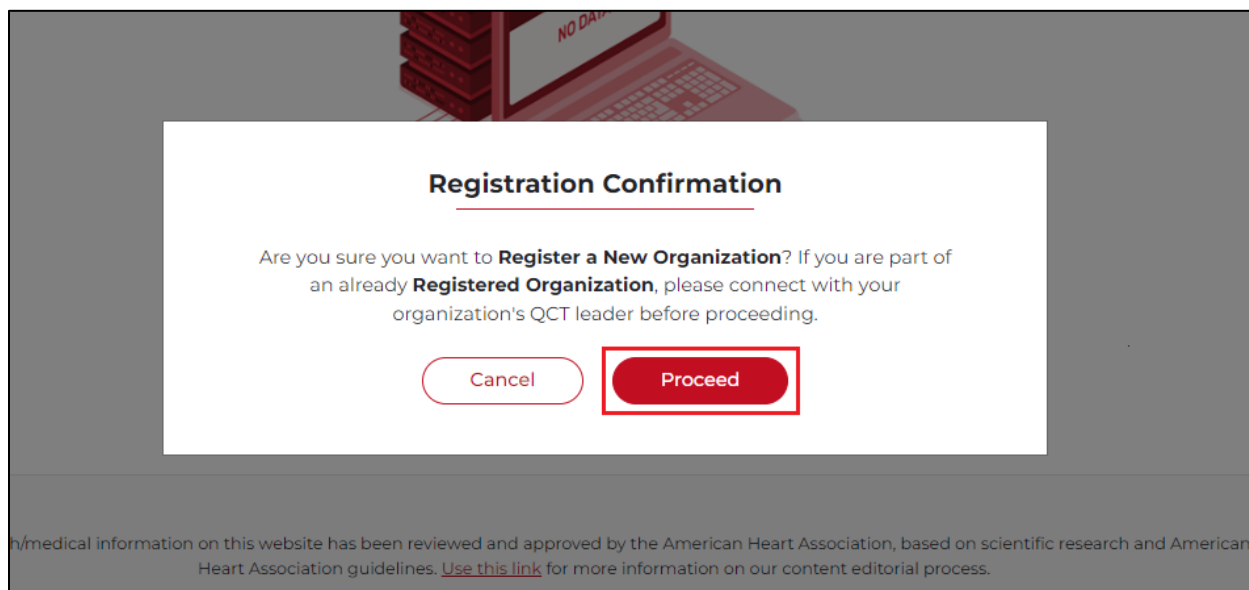


Figure 7 Registration Confirmation

5. Click on Proceed

Note:

- *While signing in as an existing user the register hyperlink does not appear. In such cases, the Add New Organization option from My Account dropdown must be chosen.*

Registration form opens.

6. Fill out the Registration Form and click on Continue. You must select US and US Territories in the Choose Region field.

[Home](#) / [Organization Details](#)

Registration

Please complete the following Registration Form

Information * mandatory fields

Organization Name*	<input type="text"/> <small>(Enter 3 to 200 characters)</small>
Choose Region*	<input checked="" type="radio"/> US and US Territories <input type="radio"/> International
Mailing Address*	<input type="text"/> <small>(Enter 2 to 300 characters)</small>
City*	<input type="text"/> <small>(Enter 2 to 30 characters)</small>
State / Province*	<input type="text" value="Select State"/>
Zip Code / Postal Code*	<input type="text"/> <small>(Enter 2 to 9 characters)</small>
Website	<input type="text"/> <small>(Enter 2 to 30 characters)</small>
Primary Contact Name*	<input type="text" value="Mr."/> <input type="text"/> <small>(Enter 2 to 30 characters)</small>
Primary Contact Phone Number*	<input type="text"/> <small>(Enter 10 to 20 characters)</small>
Primary Contact Email*	<input type="text"/>
Signatory Name*	<input type="text" value="Mr."/> <input type="text"/> <small>(Enter 2 to 30 characters)</small>
Signatory Email*	<input type="text"/>
Medical Director Name (If applicable)	<input type="text" value="Mr."/> <input type="text"/> <small>(Enter 2 to 30 characters)</small>
Medical Director Email (If applicable)	<input type="text"/>
Does your site use an Electronic Health Record(EHR)?* <small>(Select NO if you are an EMS organization.)</small>	<input type="radio"/> Yes <input type="radio"/> No

Figure 8 - Registration Page

Selection of Programs

1. Select the Emergency Medical Services (EMS) program from the available programs and click on the Register button under it.

The screenshot displays the American Heart Association's website interface. At the top, there is a navigation bar with the text "Home / Organization Details / Programs". Below this is a large banner image featuring a group of healthcare professionals in blue scrubs. Overlaid on the left side of the banner is a white box containing the American Heart Association logo and the text "An Integrated Approach to Care & Quality Improvement".


Below the banner, the section "Our Programs" is visible. It contains three program cards, each with a title, a description, and a "Register" button:

- Healthy Senior Living Certification**: Promoting cultures of health in independent and assisted living facilities to help facilities move toward improved health and quality of life for their residents and help consumers make better-informed choices about facilities. The Certification helps facilities create environments where getting and staying healthy is top of mind. Facilities will be evaluated on how they educate residents and provide opportunities to work toward improved health in these categories: smoking status, physical
- Post Acute Stroke Certification**: High-quality guideline directed rehabilitation and secondary prevention interventions, customized to patient needs, have been shown to dramatically improve recovery of function lost during stroke and reduce the risk of secondary effects. AHA's Post-Acute Stroke Program assists post-acute care facilities to evaluate current standards, performance, and outcomes to identify areas where practice improvement is needed to increase quality of care.
- Emergency Medical Services (EMS)**: Mission: Lifeline EMS recognition is the American Heart Association's program that recognizes prehospital emergency agencies for their quality of care for heart attack and stroke patients. The recognition program focuses on transforming care quality by connecting all heart attack and stroke care components into a seamlessly integrated care system. Fundamental tenets of these care systems reinforce evidence-based guidelines and measure performance, identify gaps, and

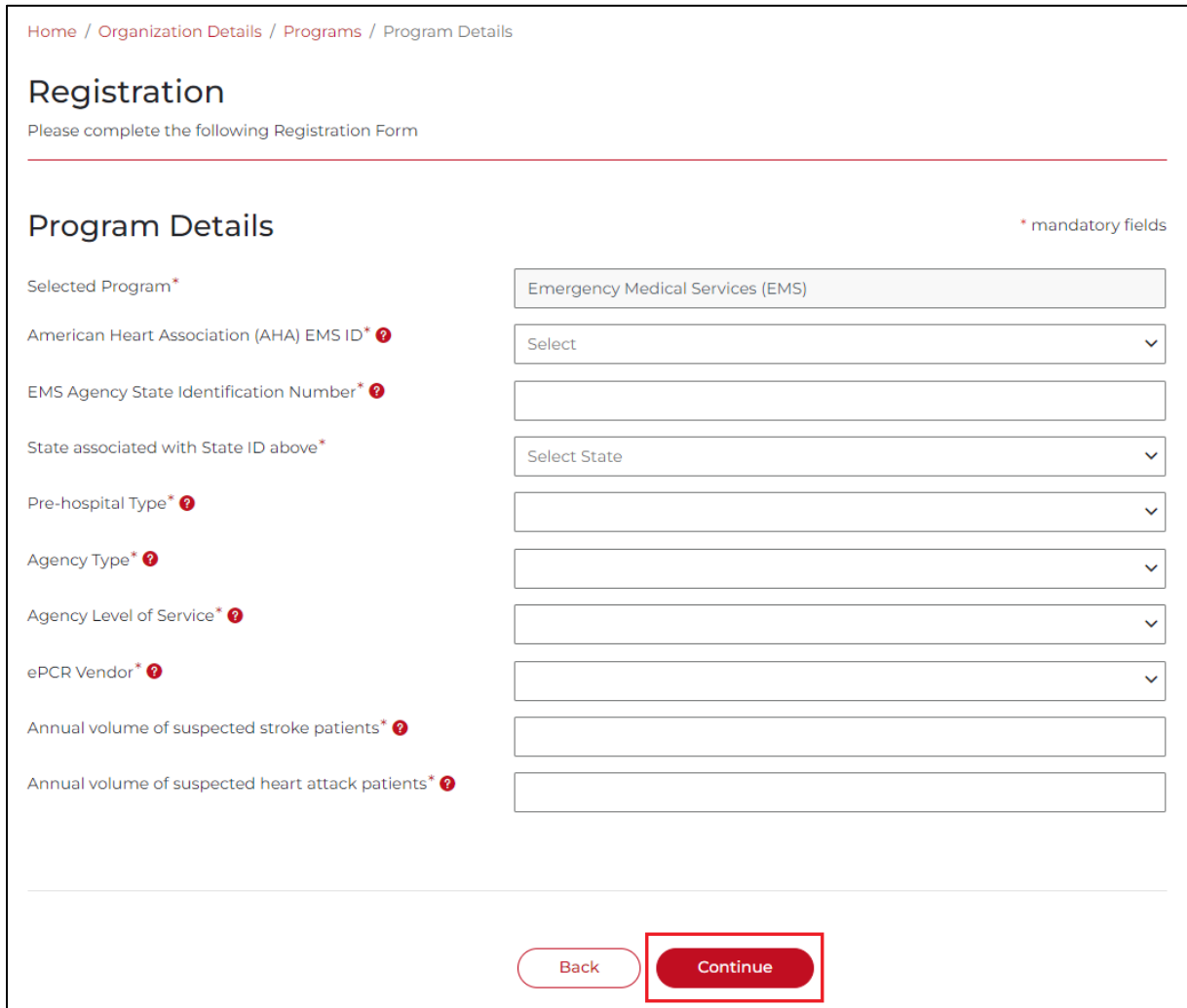
The "Register" button for the EMS program is highlighted with a red border.

Figure 9 - Program Selection

2. Under Program details:

- Select the appropriate AHA EMS ID suitable for the organization from the American Heart Association (AHA) EMS ID dropdown.
- Provide the required essential details in the respective fields using the help texts displayed when hovered over the  icon.

3. Click on the Continue button when all the required details are entered.



Home / Organization Details / Programs / Program Details

Registration

Please complete the following Registration Form

Program Details * mandatory fields
















Selected Program*	Emergency Medical Services (EMS)
American Heart Association (AHA) EMS ID* 	Select 
EMS Agency State Identification Number* 	<input type="text"/>
State associated with State ID above*	Select State 
Pre-hospital Type* 	<input type="text"/> 
Agency Type* 	<input type="text"/> 
Agency Level of Service* 	<input type="text"/> 
ePCR Vendor* 	<input type="text"/> 
Annual volume of suspected stroke patients* 	<input type="text"/>
Annual volume of suspected heart attack patients* 	<input type="text"/>

Figure 10 – Registration - Program Details

Note:

- Only one organization can be mapped against one AHA EMS ID.
- If there is any organization mapped with the selected EMS ID, an error message will be displayed as shown below.

 AHA EMS ID 42_Abingdon Ambulance Service_Abingdon_VA already mapped to another organization

4.1.1 Participating Agreement

Check on the agreement box as an acknowledgment for Participating in the Agreement.

Home / Organization Details / Programs / Program Details / Agreement

Emergency Medical Services (EMS)

Please complete the below agreement process

Click the below statement to accept the Agreement

I agree that the Program Participant will be bound by the Terms and Conditions of the Agreement, and that I have full authority to bind the Program Participants to the terms and conditions of such Agreement. Signature of Authorized Program Participant Representative

Figure 11 – Participation Agreement Acceptance

4.1.2 Permissions Agreement

The AHA may recognize the Center’s Certified status on our website or in its program materials only with your organization's permission.

Kindly de-select the permissions those your organization does not agree to allow the AHA to publish.

1. Enter the required essential details and click on Submit.

Permissions Agreement:

I Agree to give the American Heart Association/American Stroke Association permission to use our name for the following recognition opportunities. Remove checks for any situations which your organization does not give permission.

- Recognition Events
- AHA website, digital media, mobile apps
- Conference banners and signage
- Program promotion as permitted

Enter Exact Organization Name for Publications* (Min length 3 and Max length 200)

Signature of Authorized Program Participant Representative *mandatory fields

Organization Name* (Min length 3 and Max length 200)

First and Last Name of Signer*

Title of Signer*

Email of Signer*

Date*

Figure 12 – Permissions Agreement

Note:

- All fields above will be prepopulated except 'Title of Signer'.

2. Once submitted, the registration details will be sent for Admin approval with a completion message on the screen.

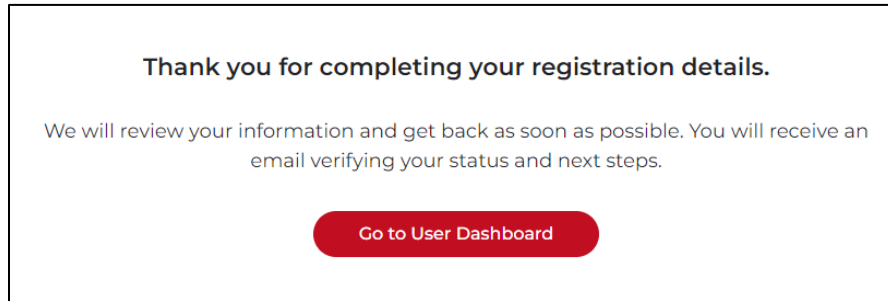


Figure 13 – Registration confirmation window

3. Click on Go to User Dashboard to go back to User Dashboard. The newly registered program will be listed under My Organizations with its status as Pending.

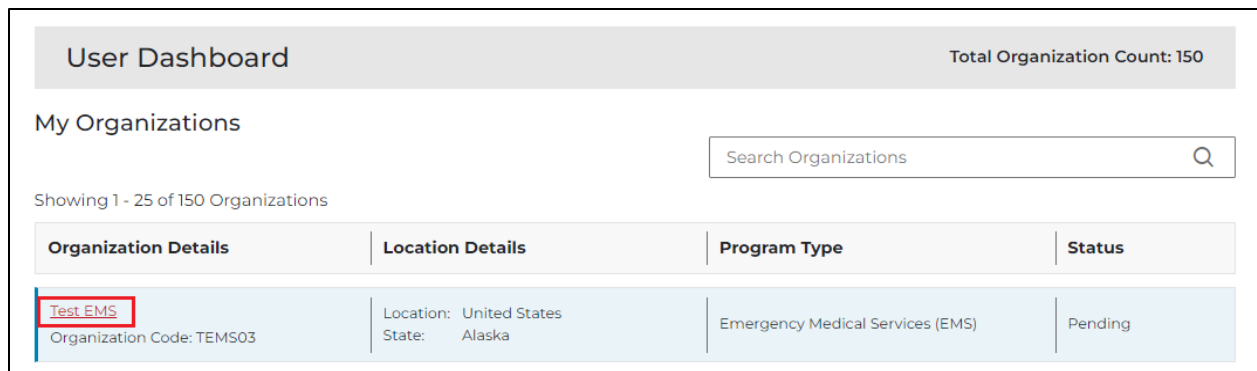


Figure 14 – User Dashboard

4.2 Existing User Logging In

If you have a registered account:

1. Enter the Sign In credentials in the Sign In or Create an Account page and click on the Sign In button.

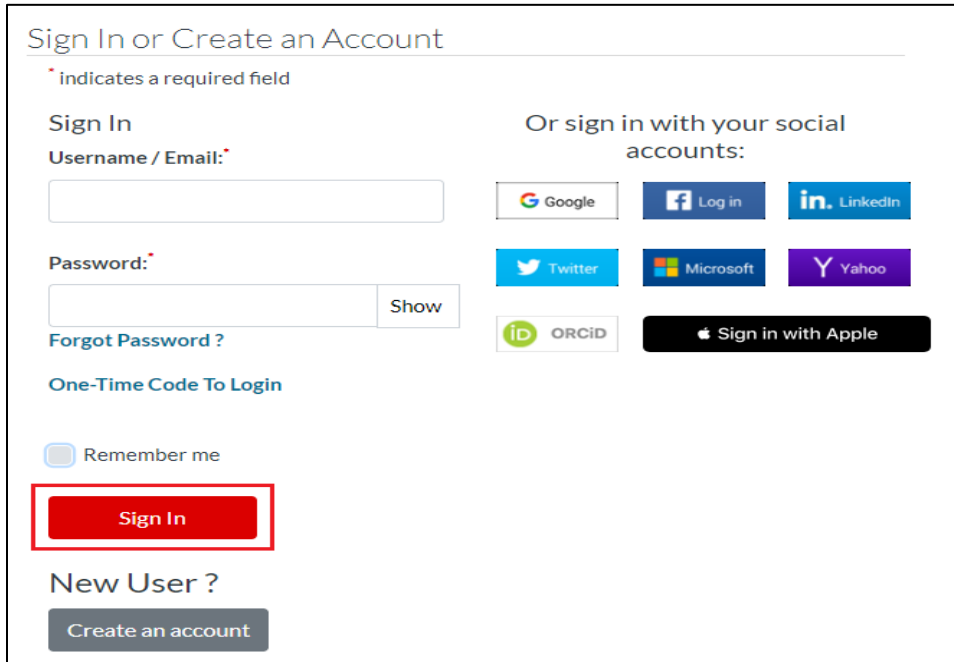


Figure 15 - Existing User Logging In

Once signed in, the User Dashboard page appears.

2. Go to My Account drop down and click on Add New Organization to go to the Registration Form.



Figure 16 - My Account dropdown

3. Once clicked, the Registration form opens. Continue with the registration as shown in section 4.1.

5 Measures

Measures are aggregate summary data for comparative analysis captured as Numerator and Denominator values against a listed scenario under a specific program.

Follow the steps to create the measures:

1. In the User Dashboard, click on the organization name hyperlink under Organization Details column.

The screenshot shows the 'User Dashboard' with a 'Total Organization Count: 150' indicator. Under 'My Organizations', there is a search bar and a table listing organizations. The first organization, 'EMS mesaures', is highlighted with a red box. The table has the following data:

Organization Details	Location Details	Program Type	Status
EMS mesaures Organization Code: EMES01	Location: United States State: Alabama	Emergency Medical Services (EMS)	Approved

At the bottom right, there is a pagination control showing '1' in a red box, indicating the current page.

Figure 17 – User Dashboard

2. Under Measures, click on Create Measures button.

The screenshot shows the 'Measures' page for the organization 'EMS mesaures'. The page includes the following information:

- Organization Code: **EMES01** | AHA EMS ID: **925** | Program: **Emergency Medical Services (EMS)**
- Location: **United States** | Registered on: **2024-Jan-19**

Under the 'Measures' section, there is a 'Create Measures' button highlighted with a red box. Below the button, a message states: 'No measures available. Click below to add'.

Figure 18 – Create Measures

Once clicked, the Measures page is displayed.

The Measures can be created by two methods:

- Enter Data
- Upload Data

5.1 Enter Data

Enter Data method allows you to enter the required details directly into the provided space and save the inputs. The Enter Data page consists of Measure table that has two set of measures; Required and Optional. The measure table consists of the following columns.

- Measures ID
- Measures Name
- Description
- Type (N, D, %)
- Quarters (Q1, Q2, Q3, Q4)

To enter data:

1. Select Enter Data tab.
2. In the measure table, enter the Numerator (N) and Denominator (D) values against each measure under the Quarter (Q1, Q2, Q3, Q4) columns. The % is calculated based on the entered N and D values.

Note:

- *All the measures under the Required set of measures must be given N and D values to submit.*
3. Click on the Save as Draft button if you want to save the currently entered data and return later for further editing.

OR

3. Click on the Submit button to submit the entered data.

If you want to cancel the entering of data, click on Cancel Edit.



The screenshot shows the 'Measures' page interface. At the top, the title 'Measures' is displayed. Below it, the text 'Emergency Medical Services (EMS)' is shown. To the right of this text is a 'Select Year' dropdown menu with '2023' selected. At the bottom of the page, there are three buttons: 'Enter Data' (a red button), 'Upload Data' (a white button), and 'Cancel Edit' (a white button with a red border, which is highlighted with a red box in the image).

Figure 19 – Cancel Edit

Measures

Emergency Medical Services (EMS)

Select Year
 2023 ▼

Enter Data
Upload Data

Cancel Edit

N (Numerator), D (Denominator), % (Percentage)

Measures ID	Measures Name	Description	Type	Q1	Q2	Q3	Q4
Mission: Lifeline EMS Award Achievement Measures (Required)							
AHAEMS1	Pre-Arrival Notification for Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with a primary or secondary impression of stroke whom a pre-arrival alert for stroke was activated during the EMS encounter.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS2	Documentation of Last Known Well for Patients with Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with suspected stroke for whom Last Known Well was documented during the EMS encounter.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS3	Evaluation of Blood Glucose for Patients with Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with suspected stroke for whom blood glucose was evaluated during the EMS encounter.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS4	Stroke Screen Performed and Documented	The percentage of EMS patients aged 18 years and older transported from the scene with a suspected stroke for whom a stroke screen was performed and documented during the EMS encounter.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS5	12-lead ECG performed ≤ 10 minutes for Suspected Heart Attack	The percentage of EMS patients aged 18 years and older transported from the scene with chest pain or a suspected MI for whom a 12-Lead ECG was performed ≤ 10 minutes of first medical contact.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS6	Aspirin Administration for STEMI-positive ECG	Percent of EMS patients aged 18 years and older transported from the scene with a STEMI positive ECG who were administered aspirin.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS7	Pre-Arrival Notification ≤ 10 Minutes for STEMI-positive ECG	The percentage of EMS patients aged 18 years and older transported from the scene with a STEMI positive ECG for whom pre-arrival notification was activated ≤ 10 minutes of positive ECG.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
Mission: Lifeline System of Care Target Heart Attack Award (Optional)							
AHAEMS8	EMS FMC to PCI ≤ with STEMI 90 Minutes for Patients	The percentage of patients directly transported to a STEMI receiving center, with EMS First Medical Contact to PCI ≤ 90 minutes.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				
AHAEMS9	FMC to Thrombolytic Administration ≤ 30 Minutes for Patients with STEMI	The percentage of patients with STEMI treated and directly transported to the destination hospital, with a door-to-thrombolytic time of ≤ 30 minutes.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				


Save as Draft
Submit

Figure 20 –Enter Data - Measure Details

V 1.3, 18/03/2024

16

Note:

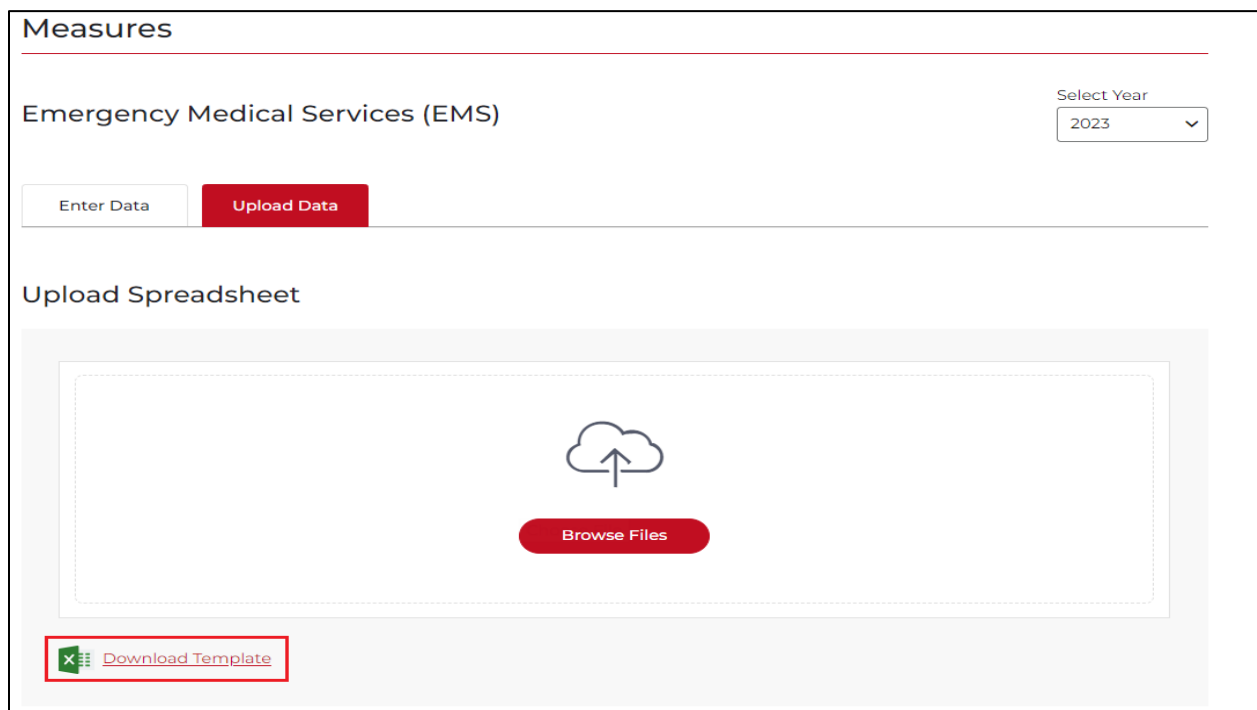
- *The Numerator (N) value must be always less than the Denominator (D) value.*
- *A maximum of six digits are allowed in the N and D values. The number can be ≤ 999999 .*
- *Save as Draft option only saves the info and does not submit. This saved data is not visible to the Admin. Only submitted data is visible to the Admin.*
- *Helping texts to fill the N and D values are available for each measure. Click the  icon to view the help texts.*

5.2 Upload Data

Upload Data method allows you to upload the data through an excel file which is rendered by the tool and the extracted details are fed to their respective fields.

To upload:

1. Select Upload Data tab.
2. Click on Download Template.



The screenshot displays the 'Measures' section for 'Emergency Medical Services (EMS)'. At the top right, there is a 'Select Year' dropdown menu currently set to '2023'. Below the header, there are two buttons: 'Enter Data' and 'Upload Data'. The 'Upload Data' button is highlighted in red. Underneath these buttons is the 'Upload Spreadsheet' section. This section features a large dashed rectangular area containing a cloud icon with an upward-pointing arrow, and a red 'Browse Files' button. At the bottom left of this section, there is a 'Download Template' button with a red border.

Figure 21 – Upload Data – Download Template

Once clicked, the template spreadsheet file gets downloaded in your system folder.

3. Enter the data into the spreadsheet as per the mentioned format and save the filled spreadsheet file in your organization system.
4. Click on Browse Files button and upload the saved spreadsheet file from the saved organization system location.

The screenshot shows the 'Measures' section for 'Emergency Medical Services (EMS)'. At the top right, there is a 'Select Year' dropdown menu currently set to '2023'. Below this, there are two buttons: 'Enter Data' and 'Upload Data'. The 'Upload Data' button is highlighted in red. Underneath, the 'Upload Spreadsheet' section features a large dashed-line box containing a cloud icon with an upward arrow and a red 'Browse Files' button. At the bottom left of this section, there is a 'Download Template' link with a small Excel icon.

Figure 22 – Upload Data – Browse Files


5. Once the uploading is completely processed, click on the Submit button.




This screenshot shows the 'Upload Spreadsheet' section after a file has been selected. The file name 'AHA_EMS_2024_Upload_Template.csv' and its size 'File Size: 2.58 KB' are displayed. A green progress bar is shown at 100% completion. Below the progress bar is a red 'Submit' button. The 'Enter Data' and 'Upload Data' buttons from the previous screen are still visible at the top.

Figure 23 – Upload completion

6. Once clicked, the spreadsheet gets uploaded with a success message on the screen.

A green notification bar at the bottom of the page contains a checkmark icon and the text: 'AHA_EMS_2024_Upload_Template.csv has been successfully uploaded.'

These uploaded spreadsheets are listed under the Uploaded Spreadsheet list to keep a track of all the files uploaded. You can download the file to view its details by clicking on the  icon under the Action column.

Uploaded Spreadsheet			
Date	File	Status	Action
2024-Jan-22	AHA_EMS_2024_Upload_Template.csv	Success	
2024-Jan-22	AHA_EMS_2024_Upload_Template.csv	Failed 	

« 1 »

Figure 24 – Upload Spreadsheet list

- Once successfully uploaded, the data from the spreadsheet are assigned to their respective fields.







Enter Data		Upload Data		Edit Data				
N (Numerator), D (Denominator), % (Percentage)								
Measures ID	Measures Name	Description	Type	Q1	Q2	Q3	Q4	
Mission: Lifeline EMS Award Achievement Measures (Required)								
AHAEMS1	Pre-Arrival Notification for Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with a primary or secondary impression of stroke whom a pre-arrival alert for stroke was activated during the EMS encounter.	N  D  %	1 3 33.33%	3 4 75.00%	4 5 80.00%	6 9 66.67%	
AHAEMS2	Documentation of Last Known Well for Patients with Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with suspected stroke for whom Last Known Well was documented during the EMS encounter.	N  D  %	2 3 66.67%	2 5 40.00%	3 5 60.00%	3 8 37.50%	
AHAEMS3	Evaluation of Blood Glucose for Patients with Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with suspected stroke for whom blood glucose was evaluated during the EMS encounter.	N  D  %	2 7 28.57%	2 3 66.67%	4 6 66.67%	4 6 66.67%	

Figure 25 – Uploaded data from the spreadsheet

Note:

- The Numerator (N) value must be always less than the Denominator (D) value.
- A maximum of six digits are allowed to be entered in the N and D values. Highest number can be 999999.

5.3 Edit Data

To modify the data entered for the measures; in the Enter Data page:

1. Click on Edit Data link.

Measures

Emergency Medical Services (EMS) Select Year
2023

Enter Data
Upload Data
Edit Data

Figure 26 – Edit Data link

2. Do the required modification and click on the Submit button.

Emergency Medical Services (EMS)

Select Year
2023

Enter Data
Upload Data
Cancel Edit

N (Numerator), D (Denominator), % (Percentage)

Measures ID	Measures Name	Description	Type	Q1	Q2	Q3	Q4
Mission: Lifeline EMS Award Achievement Measures (Required)							
AHAEMS1	Pre-Arrival Notification for Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with a primary or secondary impression of stroke whom a pre-arrival alert for stroke was activated during the EMS encounter.	N ?	<input type="text" value="1"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="6"/>
			D ?	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="9"/>
			%	33.33%	75.00%	80.00%	66.67%
AHAEMS2	Documentation of Last Known Well for Patients with Suspected Stroke	The percentage of EMS patients aged 18 years and older transported from the scene with suspected stroke for whom Last Known Well was documented during the EMS encounter.	N ?	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="3"/>
			D ?	<input type="text" value="3"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
			%	66.67%	40.00%	60.00%	37.50%
AHAEMS9	FMC to Thrombolytic Administration ≤ 30 Minutes for Patients with STEMI	The percentage of patients with STEMI treated and directly transported to the destination hospital, with a door-to-thrombolytic time of ≤ 30 minutes.	N ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			D ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			%				

Submit

Figure 27 – Edit Data

6 Organization User Management

A primary user can add a secondary user. The secondary user can do the further activities or functionalities on behalf of the primary user. A maximum of 4 users can be added.

The Organization User Management tab is available only for the approved organizations.

1. In the User Dashboard, click on the organization name hyperlink in the Organization Details column.

User Dashboard Total Organization Count: 150

My Organizations

Showing 1 - 3 of 3 Organizations

Organization Details	Location Details	Program Type	Status
domestic Test data Organization Code: DOTA05	Location: United States State: Pennsylvania	Skilled Nursing Facility Heart Failure Certification	Pending
domestic Test data Organization Code: DOTA02	Location: United States State: Oregon	Emergency Medical Services (EMS)	Approved

Figure 28 – User Dashboard

2. In the organization page, click on Organization User Management from My Account dropdown.

Quality & Certification Tool

Measures Award

Home / domestic Test data

My Account Volunteer Donate

- My Organizations
- Organization User Management**
- Organization Settings
- [Sign Out](#)

Figure 29 – My Account dropdown

Once clicked, the User Management page opens.

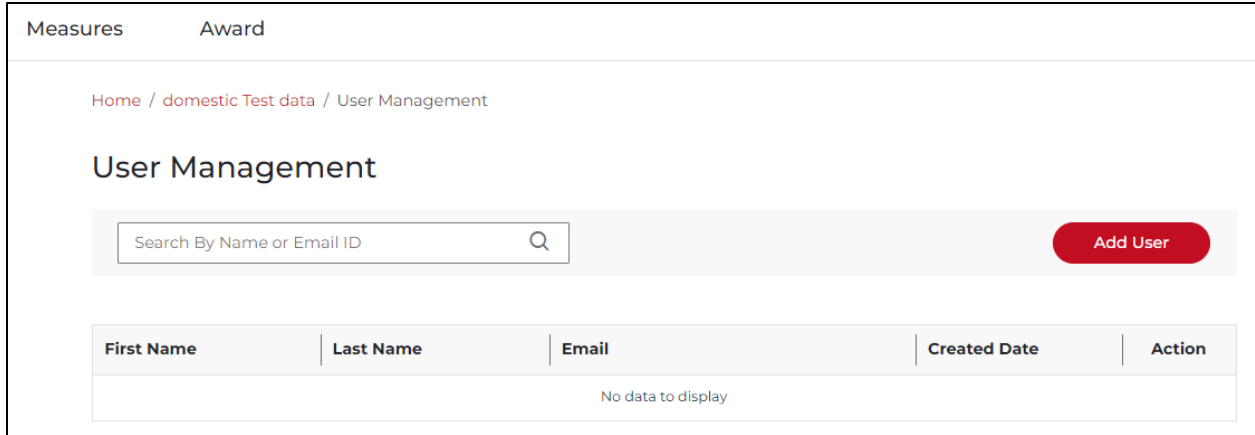


Figure 30 – User Management

6.1 Add a User

If a user does an SSO registration, the user needs to share the credentials with the primary user, so that they get access to the organization. To add secondary user, after doing the SSO registration,

1. Click on Add User button in the User Management page.

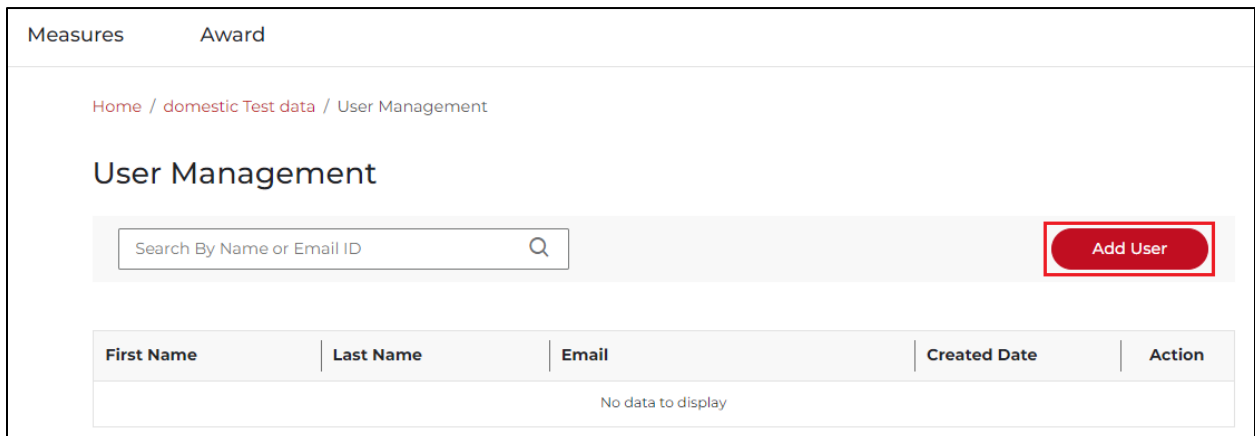


Figure 31 – Add User

2. Enter the SSO registered mail id.
3. Click on the Validate button.

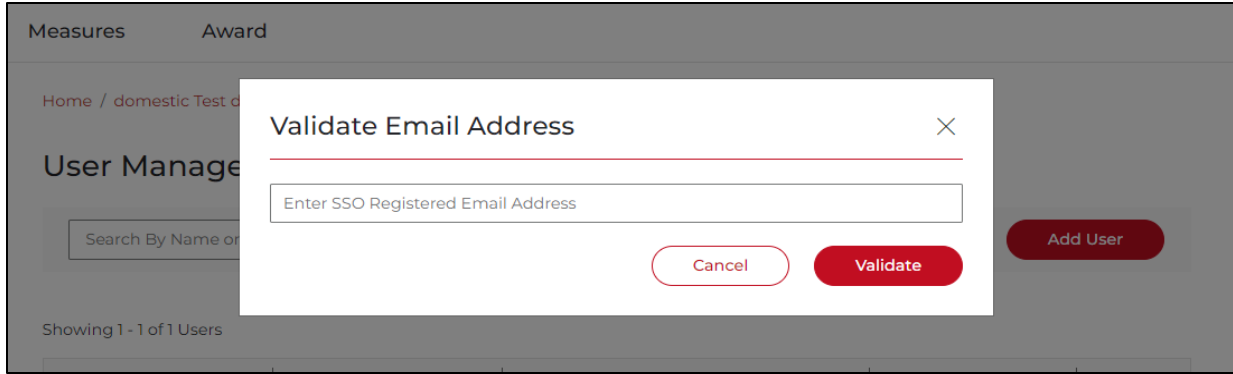


Figure 32 – Email validation popup.

Note:

- If the user does not have the SSO ID, they need to sign up in the SSO first in-order to be added to the organization.
- Then enter this valid SSO registered email address in the Add User popup.
- On entering invalid/non-SSO registered email address an error message is displayed on the screen.

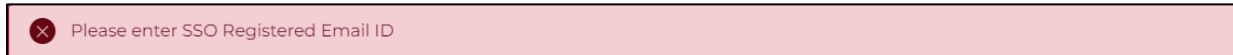


Figure 33 – Invalid email address error message.

- Once validated, the user will be added to the User list with a success message displayed on the screen.

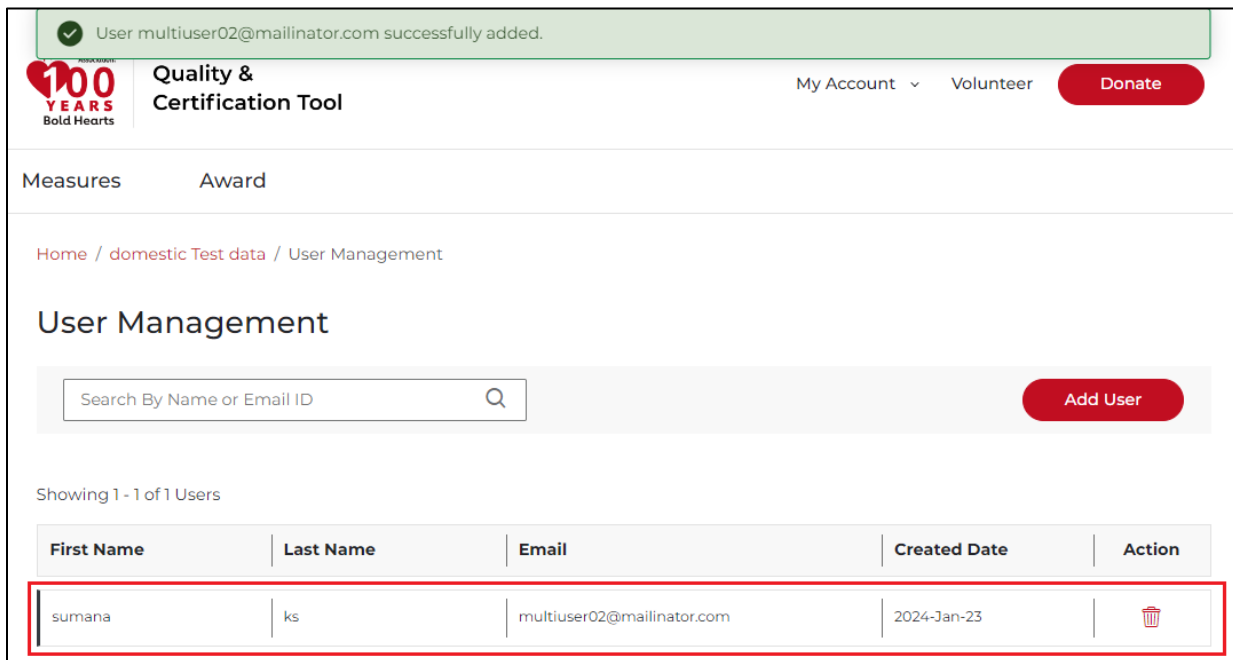


Figure 34 – User added list

6.2 Delete a User

A user cannot delete his or her own account. There should be minimum one more account to delete the first account. The unwanted user must be deleted to stop them from accessing the account.

To delete a user:

1. Click on the Delete icon in the Action column against the user in the User list.

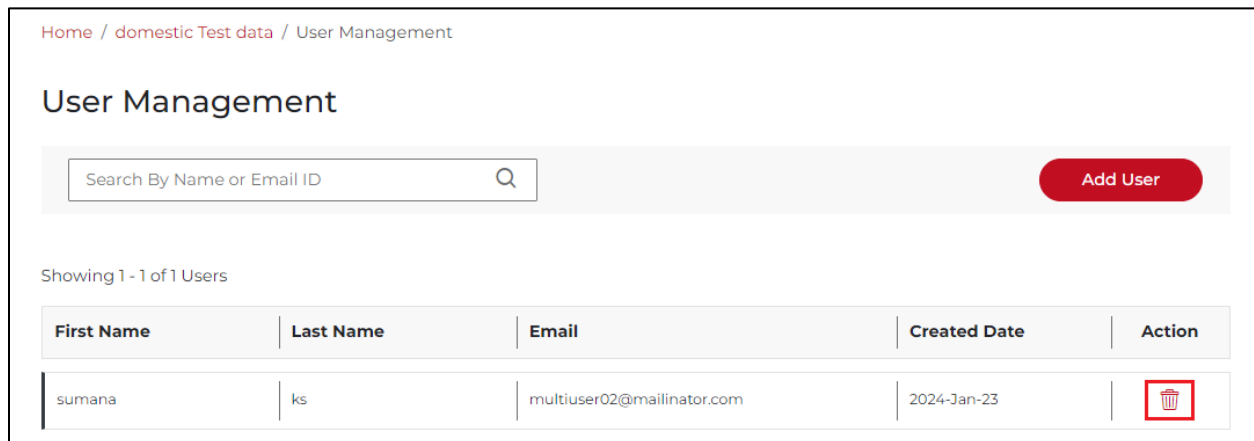


Figure 35 – User list

2. Click on the Yes button to confirm the deletion.

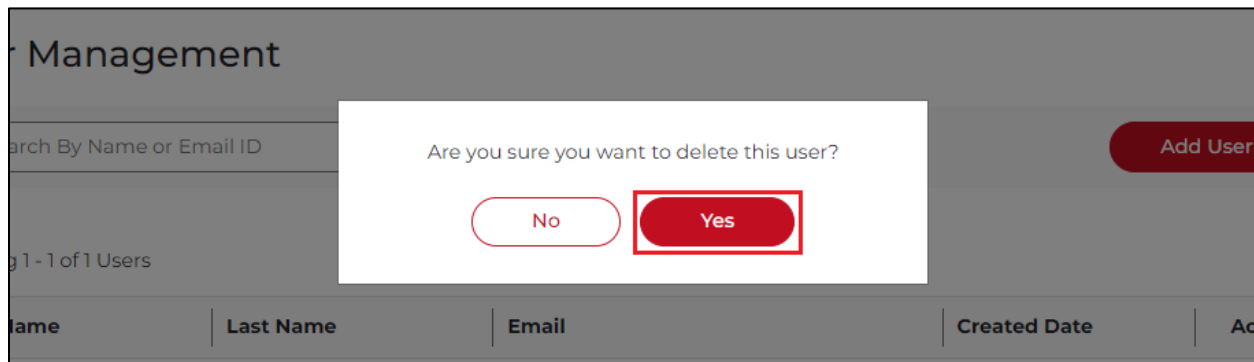


Figure 36 – User deletion confirmation popup

3. Once confirmed, the user will be deleted from the user list with a success message displayed on the screen.

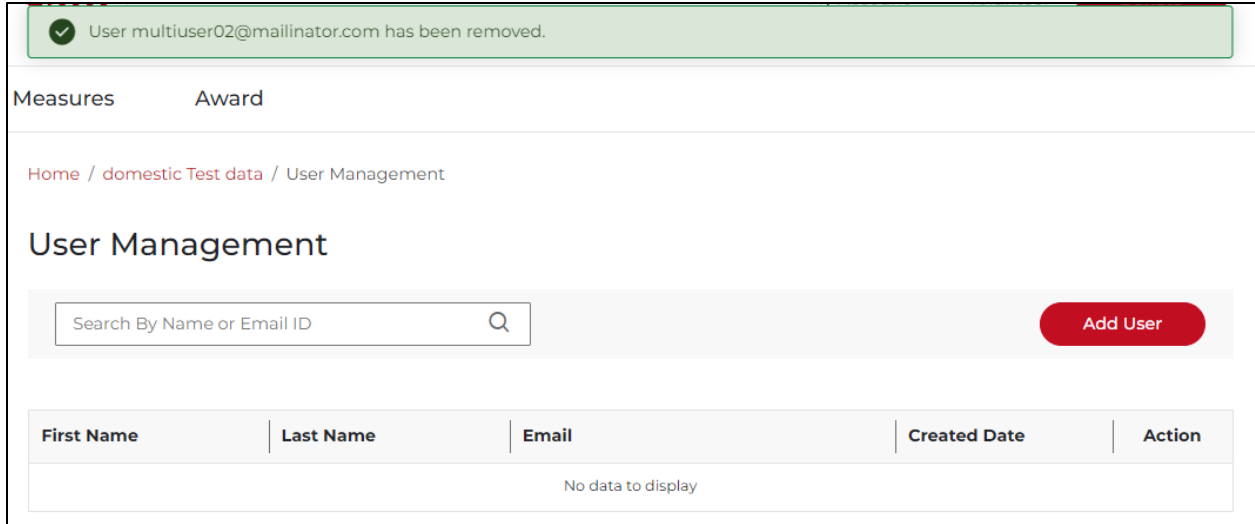


Figure 37 – User deletion success

7 Organization Settings

The Organization Settings displays the organization details and all the registered programs. This tab is available only for the approved organizations.

1. In the User Dashboard, click on the organization name hyperlink in the Organization Details column.

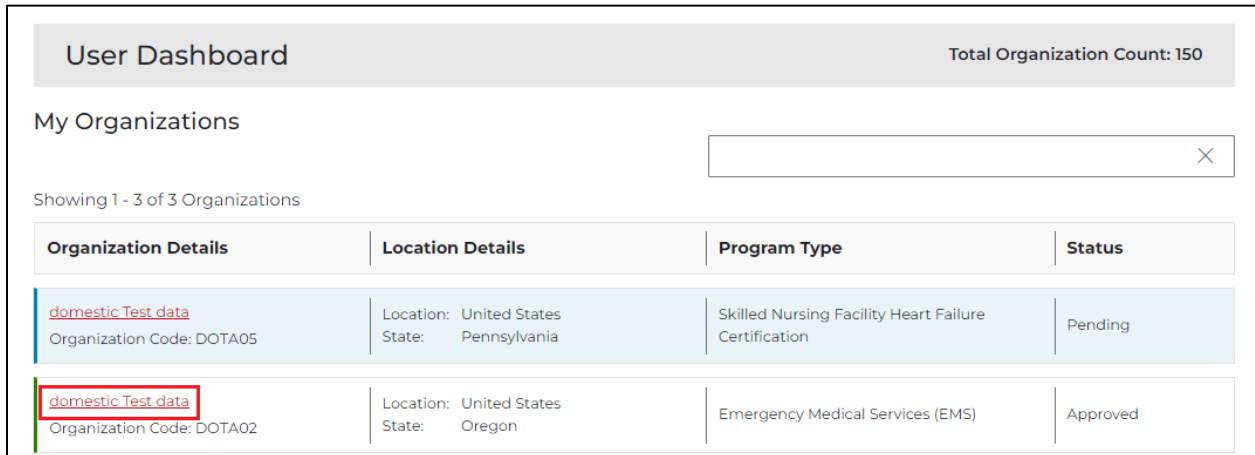


Figure 38 – User Dashboard

2. In the organization page, click on Organization User Management from My Account dropdown.



Figure 39 – My Account dropdown

Once clicked, the Organization Settings page opens.


7.1 Organization Details

All the details about the organization are available in the Organization Details tab. You can view the organization details and edit them if required.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data
Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details 

Organization Name: domestic Test data

Location: United States

Mailing Address: Baltimore, MD 21218, United States

City: Maryland

State / Province: Oregon

Zip Code / Postal Code: 44657789

Website: N/A

Primary Contact Name: Miss. John

Primary Contact Phone Number: 01234567890

Primary Contact Email Address: john@mailinator.com

Signatory Name: Mrs. Smith

Signatory Email Address: john@mailinator.com


Medical Director Name: Dr. tttttt

Medical Director Email Address: N/A

Electronic Health Record: No

Figure 40 – Organization Details

To edit the organization details:

1. Click on the Edit  icon.
2. Edit the required details and click on the Save button.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data
 Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details

Program Details

Agreement Details

Organization Details Cancel Edit

* mandatory fields

Organization Name*
(Enter 3 to 100 characters)

Location*

Mailing Address*

City*

State / Province*

Zip Code / Postal Code*
(Enter 2 to 9 characters)

Website

Primary Contact Name*
 Phone*
(Enter 10 to 20 characters)
 Email*

Signatory Name*
 Email*

Medical Director Name (if applicable)
 Email

Does your site use an Electronic Health Record(EHR)?*
(Select NO if you are an EMS organization.)
 Yes No

Figure 41 – Edit Organization Details

- Once clicked, the changes will be saved throughout the application with a success message displayed on the screen.

Note:

- Organization Name and Location fields are not editable.

7.2 Program Details

This tab displays the details of program associated with the organization. You can view the details of the program and edit them if required.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data
 Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details

Program Details


Agreement Details

Program Details

Selected Program	Emergency Medical Services (EMS)
American Heart Association(AHA) EMS ID	2072_Chesterfield Fire and Emergency Medical Services_Chesterfield_VA
Prior Year Award (2023)	Gold
EMS Agency State Identification Number	demo1234AAA&%\$
State associated with State ID above	Alabama
Pre-hospital Type	Governmental, Non-Fire
Agency Type	Response (Scene) without Transport Capability
Agency Level of Service	Licensed Practical Nurse (LPN)
ePCR Vendor	Documed Systems International, Inc.
Annual volume of suspected stroke patients	1
Annual volume of suspected heart attack patients	2

Figure 42 – Program Details

To edit the program details,

1. Click on the Edit  icon.
2. Do the required changes and click on the Save button.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data

Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details

Program Details

Agreement Details

Program Details Cancel Edit

* mandatory fields

American Heart Association(AHA) EMS ID ? *	<input type="text" value="2072_Chesterfield Fire and Emergency ..."/>
Prior Year Award (2023) *	<input type="text" value="Gold"/>
EMS Agency State Identification Number ? *	<input type="text" value="demo1234^^^&%\$"/>
State associated with State ID above *	<input type="text" value="Alabama"/>
Pre-hospital Type ? *	<input type="text" value="Governmental, Non-Fire"/>
Agency Type ? *	<input type="text" value="Response (Scene) without Transport Capa..."/>
Agency Level of Service ? *	<input type="text" value="Licensed Practical Nurse (LPN)"/>
ePCR Vendor ? *	<input type="text" value="Documed Systems International, Inc."/>
Annual volume of suspected stroke patients ? *	<input type="text" value="1"/>
Annual volume of suspected heart attack patients ? *	<input type="text" value="2"/>

Figure 43 – Edit Program Details

- Once clicked, the changes will be saved throughout the application with a success message displayed on the screen.

Note:

- American Heart Association (AHA) EMS ID and Prior Year Award fields are not editable.*

7.3 Agreement Details

This tab displays all the agreement details registered with the organization. You can view the details and edit them if required.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data
 Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details

Program Details

Agreement Details

Agreement Details

First and Last Name of Signer Smith edit bug ok admin

Title of Signer Testing

Email of Signer john@mailinator.com

Date 2023-Nov-20


Permissions Agreement:

- Recognition Events
- AHA website, digital media, mobile apps
- Conference banners and signage
- Program promotion as permitted

Exact Organization Name for Publications test123rjgsdchd

Figure 44 – Agreement Details

To edit the agreement details:

1. Click on the Edit  icon.
2. Do the required changes and click on the Save button.

Home / domestic Test data / Organization Settings

Organization Settings

domestic Test data
Registered Program(s): **Emergency Medical Services (EMS)** AHA EMS ID: **2072**

Organization Details
Program Details
Agreement Details

Agreement Details Cancel Edit

* mandatory fields

First and Last Name of Signer*

Title of Signer*

Email of Signer*

Date

Permissions Agreement:

- Recognition Events
- AHA website, digital media, mobile apps
- Conference banners and signage
- Program promotion as permitted

Enter exact agency name for publications*
(Enter 3 to 200 characters)

Figure 45 – Edit Agreement Details

- Once clicked, the changes will be saved throughout the application with a success message displayed on the screen.

Note:

- Date and Permissions Agreement fields are not editable.*

Version Control

Title	Version Number	Version Date	Created By	Reviewed By
Quality and Certification Tool – User Manual (For Domestic Customers)	1.0	11/12/2023	Girish Malagimani	
	1.1	24/01/2024	Girish Malagimani	
	1.2	15/02/2024	Girish Malagimani	
	1.3	18/03/2024	Brady Leaver	

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