

Section 5 – Add-on Certifications and Renewal

- ✓ New Certifications for Category 2 (G/J Tube) and Category 3 are considered “Add-on” Certifications to the prerequisite Category 1

Add-on Category 2 or 3 Certifications

1. Create a Course for Cat. 2 or 3
2. Create a Session
3. Find the DD Personnel with existing Cat 1
4. Click on the Personnel's SS# to go to their file
5. Choose "Desired Action" (next to Cat 1 Cert)
6. Choose "Add- on"
7. Move through each page of the "application"
8. Confirm information, start date and status

Topic 1 & 2- Create a Course and Session



Use the Manage Courses Menu to Create Course or Add Sessions to a course

The screenshot shows the user interface of the Ohio.gov Department of Developmental Disabilities web application. At the top, there is a navigation bar with a home icon, a 'Logout' button, and a user greeting: 'Hello Piper Chapman. You have 0 new notifications and 0 new announcements.' A 'View All' button is also present. Below this is a 'Select Application' dropdown menu currently set to 'MAIS'. The main content area features a blue header with the Ohio state seal and the text 'Ohio.gov Department of Developmental Disabilities'. A navigation menu below the header includes 'Certification & Registration', 'Reports', and 'Other Pages', with a 'Home' link on the right. Under 'Certification & Registration', there are three menu items: 'Search For A Person', 'Manage Courses' (highlighted in cyan and pointed to by a red arrow), and 'Secretary Association'. Below the menu items, there are sections for 'Certification Alerts' and 'DODD Messages'. The 'Certification Alerts' section contains a table with columns for 'Certificate', 'Status', 'Expiration Date', and 'Expires In', with one row showing 'RN Trainer', 'Certified', '08/31/2015', and '726 days'. The 'DODD Messages' section contains a table with columns for 'Priority', 'Date', and 'Subject', with one row showing '8/16/2013' and 'Test Message for UAT testers'. At the bottom, there is a link for 'Archived Alerts Messages'.

Logout > Hello Piper Chapman. You have 0 new notifications and 0 new announcements. View All

Select Application MAIS

Ohio.gov Department of Developmental Disabilities

Certification & Registration Reports Other Pages Home

Search For A Person
Manage Courses
Secretary Association

Certification Alerts

Certificate	Status	Expiration Date	Expires In
RN Trainer	Certified	08/31/2015	726 days

DODD Messages

Priority	Date	Subject
	8/16/2013	Test Message for UAT testers

[Archived Alerts Messages](#)

Add a Session to an existing Course or Add a new Course if needed

Search Options

RN License No. :

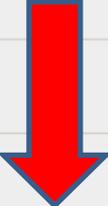
First Name :

Last Name :

Session Start Date :



	RN Instructor Name	Effective Start Date	Effective End Date	Course ID Number	Category A CEs	Total CEs	Level	Category	Course Description	Syllabus	
	piper chapman	8/15/2013	8/31/2013	DODD-55555-3-01-49		18.00	3	Cat - I	Standard DODD 14 hr. curriculum plus 4 hours agency specific details		Add Session
									Standard		



Use the + to see sessions attached to that course

Topics 3 & 4 Find the Person and Go to their file

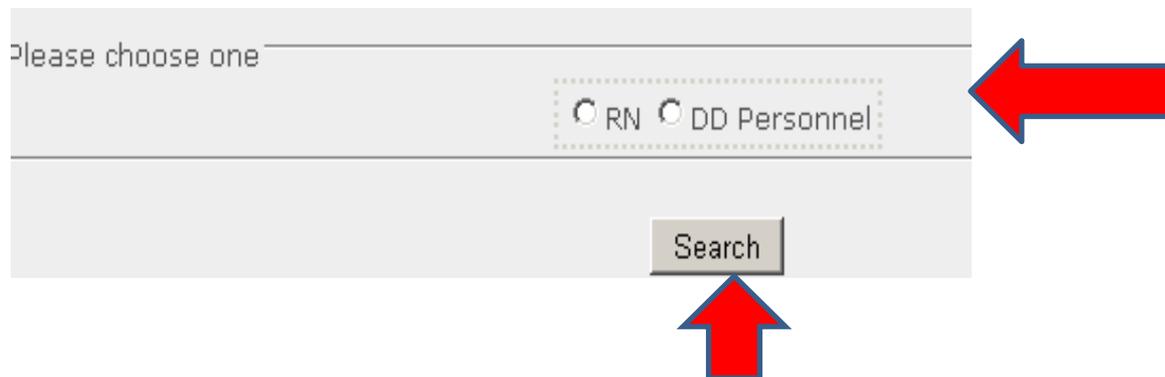


Search for a Person and



2

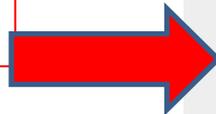
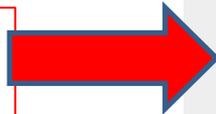
Choose DD Personnel and Search



Enter SS# or DDP Code#

Select the person to go to their page

Enter at least
last 4 SS# or
DD
Personnel
Code



Please choose one RN DD Personnel

Search Options

Last 4SSN:

Date of Birth:

First Name:

Last Name:

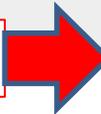
Employer Name:

Application ID:

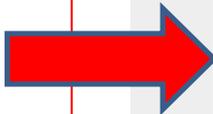
Application Status:

DDPersonnel Code:

Search



Click on
SS# to
choose
that
person



Last 4 SSN	Last Name	First Name	Middle Name	Home Address	County	Date Of Birth	CAT 1	CAT 2	CAT 3	APP ID
6616	Bear	Keri		1 cool place home town OH 43081	FRANKLIN	3/8/1973	DDPersonnel - 08/13/2014	DDPersonnel - 08/26/2014	NONE	

View Personal Information Page

[Update Existing Page](#)

[Go To Search](#)

Personal Information

Personal Information

First Name:	Keri	Last Name:	Bear	Middle Name:	
Last 4 SSN:	6616	Date of Birth:	3/8/1973	Gender:	<input checked="" type="radio"/> M <input type="radio"/> F
Address Line 1:	1 cool place	Address Line 2:		City:	home town
State:	OH	Zip:	43081	County:	FRANKLIN COUNTY

Personal Contact Information

Personal Contact Information

	Home	Work	Cell/Other
Telephone Number:	800-055-5121		
Email Address:	Kbear@hotmail.com		

Employer Information

Employer Information

Employer Type	Employer Name	CEO Name	Supervisor Name
DODD Agency Provider	Jewish Vocational Service	Peter Bloch	Joy Dailey
Self Employed	Rebecca Lucht	Rebecca Lucht	Rebecca Lucht

Current Certification Information

Certification History

Role	Category	Level	Status	Start Date	End Date	
DDPersonnel	Cat - II	3	Certified	8/27/2013	8/26/2014	Desired Action
DDPersonnel	Cat - I	3	Certified	8/14/2013	8/13/2014	Desired Action

Topics 5 & 6 - Choose “Desired Action” Category 1 Certification and Choose “Add-on”



Click “Desired Action” next to Cat-I Certification to get Add-on option

DODD Agency Provider	Jewish Vocational Service	Peter Bloch	Joy Dailey
Self Employed	Rebecca Lucht	Rebecca Lucht	Rebecca Lucht

Current Certification Information

Certification History

Role	Category	Level	Status	Start Date	End Date	
DDPersonnel	Cat - II	3	Certified	8/27/2013	8/26/2014	Desired Action
DDPersonnel	Cat - I	3	Certified	8/14/2013	8/13/2014	Desired Action

Add-on is a DESIRED ACTION FOR CAT-I ONLY

Select “Add-on” menu

DDPersonnel	Cat - I	3	Certified	8/14/2013	8/13/2014	Desired Action
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Select Desired Action Below

Initial Certification or Registration

Choose this if current certification status above is denied or expired.

(To inquire about Revocation,Suspention,Voluntary Withdrawal,Revocation contcat DODD medication administration).

[Add-On](#)

Choose this to add additional certifications, registrations or categories of training to an existing current certification.

Renewal

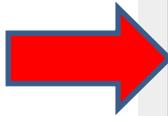
Choose this to renew current certification.

[Update Profile](#)

Choose this to Add new employer,Name change,Change/Add supervisor,New work location.

[Add/Update/View Notations](#)

Choose this to add,update or view notations for certified person.



Topics 7 & 8 -Move through the pages of the Application, Attest & Select Status



Decide the Type of Add-on

Add-On

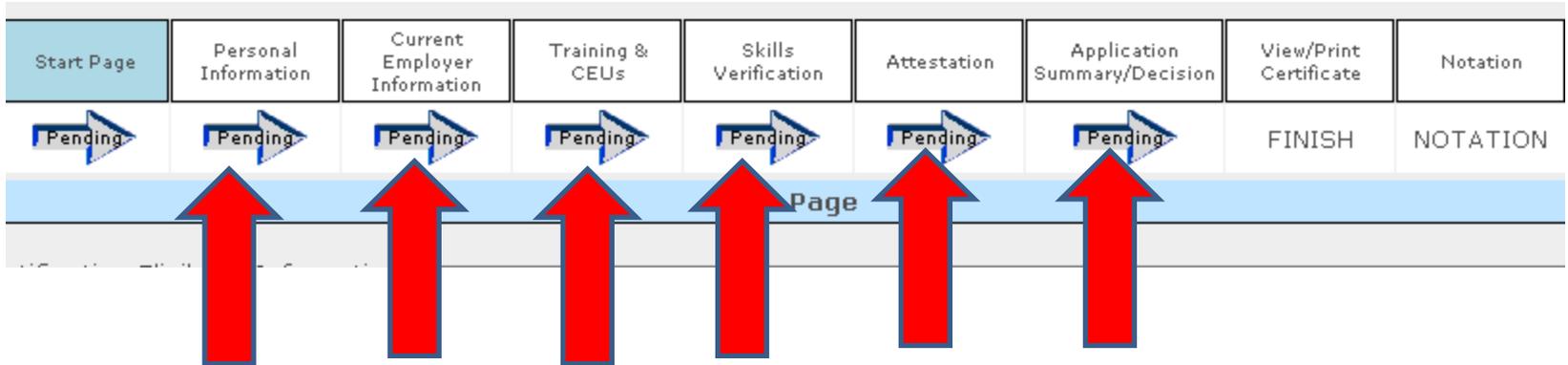
Add-On

- RN TRAINER
- RN INSTRUCTOR
- RN MASTER INSTRUCTOR
- QA RN
- 17 + BED
- DD PERSONNEL CATEGORY - 2
- DD PERSONNEL CATEGORY - 3



**Category 2 (g/j) or
Category 3 (Insulin)**

Move through each page of the application – exactly as with a Cat-1



Use the Pending arrows to select any page

Enter or Update Information on each page and SAVE before leaving that page

Address 1: [redacted] Address 2: [redacted] City: [redacted]

State: * OH County: * FRANKLIN

Zip: * 43081 - [redacted]

Previous Save Save and Continue

If you leave this page without Saving you will lose all unsaved information: Please Save or Save and continue.

communications, certificates and expiration notices will be emailed to the certified person identified on this page. Certified persons must provide at least one valid email address. A home email address is preferred.

Attest and agree to your obligations

Start Page	Personal Information	Current Employer Information	Training & CEUs	Skills Verification	Attestation	View/Print Certificate
Completed	Completed	Completed	Completed	Completed	Completed	Pending

Attestations

Question 1
Applicant mailing address, contact and employer information has been updated as needed.
 Yes No

Question 2
RN Trainer has validated DD personnel current employment with an active certified DODD provider and background checks complete (per OAC 5123:2-2-02) or self-employment as an active current certified DODD Independent Provider.
 Yes No

All RNs must read the statements below, and sign their initials



Agreement
If you have questions about any of the items that you need to attest to, please email provider services at ma.database@dodd.ohio.gov or contact 1 (800) 617-6733.

RN's Initials

You have successfully clicked the Agree button and completed your attestation.



Read the summary carefully

Certification & Registration **Reports** **Other Pages** [Home](#)

LoginUser: Piper Chapman Name: Bear,Keri RNLICENSE# or DDPERSONNELCODE: DD00506314 Application ID: 219

Start Page	Personal Information	Current Employer Information	Training & CEUs	Skills Verification	Attestation	Application Summary/Decision	View/Print Certificate	Notation
Completed →	Completed →	Completed →	Completed →	Completed →	Completed →	Pending →	FINISH	NOTATION

Summary Page

Use the arrow buttons to go back and correct any misinformation on any page

Personal Information

Personal Information

First Name:	Keri	Last Name:	Bear	Middle Name:	
Last4SSN:	6616	DOB:	3/8/1973	Gender:	<input checked="" type="radio"/> M <input type="radio"/> F
Address Line 1:	1 cool place	Address Line 2:		City:	home town
State:	OH	Zip:	43081	County:	FRANKLIN COUNTY

Contact Information

Personal Contact Information

	Home	Work	Cell/Other
Telephone Number:	800-005-5512		
Email Address:	kbear@hotmail.com		

[View Employers](#)

[Glossary](#)

Finalize the Application Status

Confirm
or
adjust
the start
date



DODD Independent Provider.
 Yes No

Attestation Completed By piper.chapman

Notations for Application

Notations

Print Application

Certification Dates
Start Date End Date

Select Application Status/Decision:

- Pending
- Pending
- Did Not Meet Requirements
- Meets Requirements
- DODD Review
- Voided Application

Previous Save and Continue

Decide and save the appropriate status



New Category 2 & 3 Certifications are always an “Add-on” to Category 1

- Now you will take a short Quiz on Add-on Certifications
- Then you will learn renewals, do security, and finish this training

