

CE Registry Electronic Course Offering Reporting File Specifications

Background

ASHA Approved CE Providers may submit participant information to the CE Registry in one of two ways;

Hard Copy: Submit individual scan forms for each participant and report form for each course offering. ASHA CE Staff scan the forms to create load files and post the information to update both the participants' transcripts and the Provider's course offering record.

Electronic: Send 2 files in ASHA-specified format. One of the files contains the data that updates the system directly (Load File); the other file contains supporting information that is used by CE to resolve problems locating or updating participant accounts (Reference File).

Load File

File Layout

The file is an ASCII comma delimited file. It has three kinds of records in it:

- Header row
- A1 rows for course offerings
- P1 rows for participants in those course offerings

Header Row

The header row is always the same; it is:

Form_Type, Provider_code, CourseNumber, Part_forms, Offering_complete_date, number_attending, Partial_credit

A1 Rows: Course Offering

The A1 row is the row that defines the start of a new course offering; all of the participant records after an A1 row and before the next A1 row will be loaded as participants for that course offering.

You may include up to 25 separate course offerings (A1 rows) in a single load file. More than one course offering may be reported in the same load file simply by inserting a new A1 row.

Field	Description
Form_type	The "A1" code that identifies this as a course offering row. This value is always A1 regardless of whether the course offering on the row is the first course offering reported or not.
Provider_code	The Provider Code, 4-digit alphabetic code assigned by ASHA.
CourseNumber	The course number, 7-digit number made up of the course number (4 digits) and the offering number (3 digits). Leading zeroes in each section (e.g. 0134001) must be included. This field will be treated as alphanumeric but there should be no hyphens or punctuation in the field
Part_forms	The number of participants who have earned and requested ASHA CEUs (the number of P1 rows for this course offering in this file), 4 digits with leading zeros,
Offering_complete_date	The course offering's end date (MMDDYY format),
number_attending	The number of attendees (not all attendees submit forms), 5 digits with leading zeros,
Partial_credit	Y or N for whether partial credit was approved for the course-reference the course registration confirmation letter. If the course was registered for partial credit, indicate Y regardless of whether the credit recommended for individual participants actually varies.

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P1 Rows: Participants

The P1 row provides the identifying information for course offering participants. The records should be sorted in ascending alphabetical order by Customer_Name within their course offering (A1) row. All participants for the same course offering should be reported under a single course offering (A1) row.

Field	Description
Form_type	The "P1" code that identifies this as a participation row. This value is always P1 regardless of whether the individual on the row is the first person reported or not.
Customer_Name	This should be the last name of the individual ONLY; there are 30 characters allotted. Hyphens and apostrophes are allowed. Suffixes (Jr. Sr. III) should be excluded.
SSN	Leave blank, ASHA is no longer using SSN as an identifier.
ASHA ID	If available from the participant; 8 digits with leading zeros.
Units	The number of CEUs recommended for individual if not the maximum for the course; the field is 4 digits with leading zeroes and two (2) implied decimal places. For example, 6 and 1/2 hours would be reported as 0065 <ul style="list-style-type: none"> o If partial_credit in the corresponding A1 row is N then this field is left blank. o If the partial_credit value in the corresponding A1 row is Y then this number only needs to be provided if recommending the individual for less than the maximum number of CEUs for the course.

Example:

Provider: AADA

Course Number: 0038-001

Completed on 3/1/2011

Offered partial credit up to .60 CEUs

There were 7 people who attended.

There were 7 people included for electronic submission.

Course Number: 0015-002

Completed on 2/10/2011

There were 7 people who attended.

There were 4 people included for electronic submission.

Note: In the example, 2 people participated in both activities and are listed once under each course.

Sample layout

Form_Type, Sponsor_code, CourseNumber, Part_forms, Course_complete_date, number_attending, variable_credit

A1, AADA, 0038001, 0007, 030111, 00007, Y

P1, Behn, , 00127863,

P1, Hey, , 01082562,

P1, Hummel, , 09112563,

P1, Kanaczet, , , 0055

P1, Phillips-Davis, , ,

P1, Pratte, , ,

P1, Sirr, , 12016532, 0050

A1, AADA, 0015002, 0004, 021011, 00007, N

P1, Behn, , 00127863,

P1, Evans-Knoblock, , 00205586,

P1, Kanapkey, , 12106527,

P1, Sirr, , 12016532,

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Reference File

File Layout

The file is an ASCII comma AND double quote delimited file (the inclusion of address information, which may legitimately contain commas, requires that we further delimit the file). It has two kinds of records in it:

- Header row
- Participant row

A Reference File should accompany each Load File.

Header Row

The header row is always the same; it is:

Customer_Name, ASHA_ID, Address1, Address2, Address3, City, State, ZIP, Country, Primary_Phone, Email, Provider_RefNum

These are the names of the fields in the Reference File for each participant.

Participant Rows

These rows contain information that will allow ASHA CE staff to research and resolve account discrepancies (missing customers, potential duplicate customers, mismatched ASHA IDs). The information will be used to communicate directly with the participant and/or with the Provider.

There should be only one (1) record per participant, regardless of the number of activities for which the provider may be reporting earned CEUs for that single participant. The participants should be sorted in ascending alphabetical order.

Field	Description
Customer_Name	Last name-space-first name-space-middle initial or name;
ASHA_ID	ASHA ID, if available, as in Load File
Address1	first line of address
Address2	second line of address
Address3	third line of address
City	City
State	U.S. state or Canadian province, may be name or code since the file is not loaded but used as reference
ZIP	U.S. ZIP Code or other postal code
Country	Country name - required only if person resides outside U.S.
Primary_Phone	if available
Email	if available
Provider_RefNum	This is an optional field in which the Provider may put his/her customer id for this participant, presuming that the SSN does not serve as the ID. This will be used ONLY to expedite communications with the Provider about problems with specific participants' data.

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Example:

“Customer_Name”,“ASHA_ID”,“Address1”,“Address2”,“Address3”,“City”,“State”,“Zip”,“Country”,“Primary_Phone”,“Email”,“Provider_RefNum”

“Behn Christine R”,“09139378”,“53 Warren Ave”,“”,“”,“Mansfield”,“MA”,“02048-1328”,“”,“”,“crbehn@cs.com”,“C1234”

“Evans-Knoblock Kathryn Anna-Ma”,“12001708”,“ASHA”,“Information Systems”,“10801 Rockville Pike”,“Rockville”,“MD”,“20852”,“”,“800-274-2376 x 4173”,“kevansknoblock@asha.org”,“C1455”

“Hey Mary L”,“00981860”,“Bradley Hospital”,“1011 Veteran's Mem Pkwy”,“”,“East Providence”,“RI”,“02915”,“”,“”,“mhey@lifespan.org”,“C34556”

“Hummel Lauren J”,“09112563”,“Acting Director”,“Bradley Hospital”,“10 Janet Ave”,“Bellingham”,“MA”,“02019”,“”,“”,“C44454”

“Kanaczet Tina C”,“”,“”,“1 S Pond Dr”,“”,“Coventry”,“RI”,“02816”,“”,“(401) 826-8848”,“britinmax@wmconnect.com”,“C505000”

“Kanapkey Brian K”,“12106527”,“UNC Hospital ENT Clinic”,“”,“101 Manning Drive”,“Chapel Hill”,“NC” “27514”,“”,“(919) 966-8690”,“”,“C6540”

“Phillips-Davis Carla Joanne”,“”,“”,“913 Ash Street”,“”,“Winnipeg”,“MB”,“R3N 0S1”,“Canada”,“(204) 475-5514”,“cjpgdavis@aol.com”,“C0876”

“Pratte Catherine A”,“”,“158 Sea Breeze Lane”,“”,“”,“Bristol”,“RI”,“02809”,“”,“”,“capratte@aol.com”,“C8888” “Sirr Kathryn A”,“12016532”,“”,“”,“”,“”,“”,“(401) 432-1440”,“”,“C6662”

File Names

The files should be named specifically based on type of file and should be named in pairs:

Load File Name

[provider_code]yyyymmdd##.csv

where

[provider_code] is the 4-digit ASHA assigned CE Provider code (e.g. AADA)

yyyymmdd is the 8-character year-month-day that the file was created

is a 2-digit sequence used when the provider creates more than one file of participants in a given day; the number should default to ‘01’ for single-file submission.

Reference File Name

[provider_code]yyyymmdd##ref.csv

where

[provider_code] is the 4-digit ASHA assigned CE Provider code (e.g. AADA)

yyyymmdd is the 8-character year-month-day that the file was created

is a 2-digit sequence used when the provider creates more than one file of participants in a given day; the number should default to ‘01’ for single-file submission.

Ref indicates this is the reference rather than the load file

The Reference file whose name matches the Load file should contain only those participants in the corresponding Load File and only one record per participant.