

**Massachusetts Department of Public Safety
Construction Supervisors
Continuing Education Program**



Provider Information Packet

Administrative Services Provided by Thomson Prometric



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Massachusetts Construction Supervisors Continuing Education Program Provider Information and Application Packet

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Massachusetts Construction Supervisors Continuing Education Introduction

The Massachusetts Department of Public Safety (the Department) has contracted with Thomson Prometric to perform continuing education (CE) provider and course review services on behalf of the Department. Thomson Prometric handles all transactions and inquiries for approving providers and courses. Thomson Prometric also handles roster submissions, calculates compliance and provides transcripts to licensees. **The Department processes all transactions relating to licensee name and address changes and license renewals.**

Providers and licensees may call Thomson Prometric at **800.XXX.XXXX** for information. Thomson Prometric's service staff for licensees is available to handle calls from 8:00 A.M. to 6:00 P.M. Eastern time, Monday through Friday. This Packet as well as other program information is on the Web at **www.experioronline.com**.

Licensee Credit Requirements

Licensees with issue dates on or after July 1, 2006 must earn a total of 18 CE credit hours in each three-year renewal period. Those currently licensed will have pro-rated requirements as follows:

<u>License Expiration Dates</u>	<u>Credits Required</u>
July 1, 2006 through June 30, 2007	None
July 1, 2007 through June 30, 2008	6
July 1, 2008 and later	12

Courses are designated as Category A (specific to building codes and standards) or Category B (business practices). Licensees must earn at least 12 of their credits from courses designated as Category A. The remaining 6 credits may come from Category B courses or other Category A courses. Where the credit requirement is pro-rated, the limits are pro-rated appropriately. For example, a licensee with a six-credit requirement could use only two credits from Category B courses.

Fees

Provider Approval	\$25 (two year approval period)
Provider Renewal	\$20 (two year renewal period)
Course Approval	\$40 (two year approval period)
Course Renewal	\$25 (two year approval period)
Rosters	\$1.00 per credit per student

Use the Fee Worksheet on Page xx to prepare your payment. All payments may be made using American Express, Visa or MasterCard.

Thomson Prometric will send provider and course renewal notices 60-90 days in advance of expiration dates.

For further information, contact Thomson Prometric:

Phone: **800.XXX.XXXX**
Fax: **800.735.7977**
E-mail: **CE-Services@experioronline.com**
Web site: **www.experioronline.com**

Massachusetts Construction Supervisors Program Requirements

These requirements have been adopted by the Massachusetts Department of Public Safety. See Page xx for information about violations and penalties.

General Program Information and Requirements

1. All requests for course approval must be submitted at least 30 calendar days in advance of the requested approval date.
2. Providers must make their refund policy and course materials (outlines, syllabi, handouts, etc.) available to students.
3. If an approved course is canceled or a student cancels in advance, the provider must refund all fees within 45 days of the cancellation unless a different refund policy is printed on the provider's materials.
4. The class must be held in a facility that complies with the Americans with Disabilities Act.
5. Only courses that have been specifically approved by Thomson Prometric on behalf of the Department may be offered for CE credit. **No course may be conducted for credit until it has been approved.**
6. **Partial credit cannot be awarded for partial attendance at classroom courses.**
7. No course may be advertised or otherwise promoted as appropriate for Massachusetts Construction Supervisor CE credit until it has been approved in writing.
8. Once approved, a course may not be substantially altered. A substantial alteration is any change that would modify the content or time allocations stated in the course syllabus or would change any of the course topics.
9. Providers may not change a course's content or outline without prior written approval. Failure to obtain written approval in advance of the course may result in a denial of CE credit for the course.
10. Fifty minutes will qualify for one CE credit hour. Breaks, introductions, lunches, announcements or other non-instruction time do not qualify for CE credit.
11. Providers must maintain accurate attendance records for each course using sign-in/sign-out sheets or other means of recording attendance and identification.
12. Providers are required to report course completion rosters, within 30 calendar days of course completion, to Thomson Prometric online using www.experioronline.com. Rosters may **not** be submitted in hard copy. Providers must distribute course completion certificates to all individuals who meet the requirements of the CE course within seven days of the conclusion of a course. The certificate must contain the name and identification number of the licensee, the name and identification number of the course, the date(s) the course was held, the number of credit hours completed by each licensee, and the name and identification number of the provider.
13. Licensees will earn credit only once for a course completed in the current compliance period regardless of the number of times the same course is taken. However, the licensee may take the same course again and receive credit once in a subsequent compliance period.
14. Applicants to become a provider must have at least five years of experience in the supervision of building construction or design or a four-year undergraduate degree in a related field and shall have at least two years of demonstrable experience as an instructor of education.
15. Course providers must agree that representatives of Thomson Prometric and/or its designees, and employees of the Department and/or its designees, in an official capacity, may audit classroom course instruction, course materials, instructors' presentations, course records, records of examination, attendance rosters and other aspects of instruction. These auditors

will not be interfered with while conducting or attempting to conduct an audit. Audits will be conducted with a minimum of disruptions. Providers agree that auditors may attend any course offered for the purpose of the audit without paying any fee. Providers grant Thomson Prometric and the Department the right to audit and/or inspect these records at the premises of the provider or at the physical location of these records.

16. Providers must be able to verify who attended and completed each course for a minimum of four years following the completion of a course.
17. Providers must keep all records pertaining to their CE activities for a minimum of four years.
18. A list of approved courses is available at www.experioronline.com.

Qualifying/Non Qualifying Course Subjects

19. The following subjects/topics may qualify:

Category A

Content that is directly pertinent to the job function of a licensed construction supervisor as it relates to the understanding of the provisions of the state building code and \or its reference materials. Such materials may include, but are not limited to, *780 CMR, The Massachusetts State Building Code* (the Code) including special rules and regulations. Examples are the National Fire Prevention's (NFPA) Standards 13 or 72, the American Concrete Institute (ACI) Standard 318 or the Massachusetts State Plumbing and Gas Code. In addition, courses which concentrate on building plan reading and review and hands-on applications of specific construction specialties (such as fireplace design and construction) may qualify.

Category B

Content that is delivered by an accredited academic institution (high school, community college, junior college, college, university, technical or vocational school) which enhances the licensee's knowledge of business practices. Such courses may include, but are not limited to, computer/Internet literacy, bookkeeping and accounting, ethical business practices, construction law or consumer rights. Category B content can also be delivered by an entity that is a recognized builder or contracting association, a unit of municipal, state or federal government or a recognized legal or business operation.

Self-study courses

20. Self-study courses must include an examination that is conducted on a closed-book basis with a disinterested third party as monitor. The monitor must complete an affidavit that certifies that the student took the exam without use of study materials or assistance. Self-study exams must contain at least 25 questions. The number of questions must increase proportionately as the amount of material increases up to a suggested maximum of 75 questions for very large courses. It is suggested that all questions should be four-alternative multiple choice or completion format and that the use of True/False questions be avoided. All course materials are required to be submitted with the application. Credit hours will be determined by the estimated time it will take a student to study the material, adjusted by the percent of the course content that is acceptable as CE. **Credit will be allowed only if the student receives a grade of 70 percent or greater on the examination.**
21. The completion date for a self-study course will be the date the exam was taken and passed.
22. Self-study courses presented via the Internet must adhere to the same requirements as other self-study methods. The same monitoring requirement for students is in effect. Providers must provide Thomson Prometric with the means to verify the exam procedures.

Massachusetts Construction Supervisors Continuing Education Appeal Procedures

A CE provider may dispute a decision regarding a course or provider application. If a disagreement arises, the Department recommends the following procedures be followed in the sequence listed below.

1. Call Thomson Prometric and discuss the disagreement with a CE evaluator/auditor, who will discuss the findings and try to resolve the issue by phone.
2. If the dispute cannot be resolved by phone, write to Thomson Prometric with the reason(s) for disagreement and reconsideration of the decision. Thomson Prometric will respond to the request within 15 business days of receipt. Send requests to:

**Thomson Prometric
Attn: Mass Const Supv CE Reviews
1260 Energy Lane
St. Paul, MN 55108**

3. If you disagree with Thomson Prometric's response to your written request, you should then address your request, in writing, to the Department. State your reason for disagreeing with the Thomson Prometric response and include copies of any correspondence. Send your request within 30 days of receiving Thomson Prometric's action to:

**Construction Supervisors Licensing -CE
Massachusetts Department of Public Safety
One Ashburton Place, Room 1301
Boston, MA 02108**

**Massachusetts Construction Supervisors Continuing Education
Violations and Penalties**

[Insert text on violations and penalties here]

Massachusetts Construction Supervisors Continuing Education Instructions for Completing the Provider Approval Application

Organizations providing CE credit must be reviewed and approved by Thomson Prometric. Thomson Prometric assigns a provider number that will allow courses to be tracked by provider.

You may apply as a provider when you send your first course for review.

Completing the Approval Form

Provider Name

Print or type the full legal name of the organization providing the education.

Names and Titles of Owners or Officers

List the name and title of each individual who has a significant financial interest in your organization. For partnerships, list all partners. For corporations, name all officers, as well as any shareholders, who have a 10 percent or greater interest.

Address

Provide the complete physical street address, including ZIP code, of the location at which continuing education records will be maintained.

Authorized Provider Official

Provide the name and title of one individual with whom we should communicate for all business matters. Where several people may be applicable, give the name of the one who knows the contact person for each type of issue that may arise such as course rosters, course materials, schedules, etc. This person must have the authority to execute agreements on behalf of the provider.

Voice Phone

Give the voice phone number, including the area code, where the Authorized Provider Official may be reached. Also provide a fax number and e-mail address.

URL

Give the company's URL.

Type of Organization

Check the type that best describes your organization. The "Other" category is intended to cover organizations that do not fit into the previous categories. If you use the "Other" category, briefly describe your organization; your application may be assigned to another category.

Former Names and Locations

If your organization has ever operated under a different name, list all names. If a sole proprietorship or partnership, indicate the names of all training companies for which the proprietor or any partner has been a proprietor, partner or held at least a 50 percent ownership interest. If a corporation, for each owner who holds at least 50 percent of the voting stock, please list all training companies for which any of these owners has been proprietor, partner or has held at least 50 percent of the voting stock.

Certification

You must certify that your organization will abide by all Massachusetts laws and Department of Public Safety regulations, policies and guidelines regarding insurance continuing education. The Authorized Provider Official must sign this certification.

Submission

Submit the approval form, refund policy (see Page xx, items 3 and 4) and the \$25 fee in the form of a company check, cashier's check, money order or credit card authorization to:

**Thomson Prometric
Attn: Mass Const Supv CE
1260 Energy Lane
St. Paul, MN 55108**

***You may pay the fee using American Express, Visa or MasterCard.
If your card is denied, the transaction will not be processed.
Use the Fee Worksheet on Page xx to prepare your payment.***

Massachusetts Construction Supervisors Continuing Education Program Provider Approval Application

PLEASE PRINT OR TYPE. PHOTOCOPY AS NEEDED.

Provider Name			Leave Blank	
Names and Titles of Owners or Officers: <i>Name</i>		<i>Title</i>		
Address				
City		State	ZIP Code	
Authorized Provider Official			Title	
Voice Phone #: () -	Ext.	Fax #: () -	E-mail Address	
URL: http://www.				
Type of Organization: (check one)	Professional Association Contractor	Training Company College/University/VoTech	Other _____	
Have you operated under any other name?	Yes	No		
If yes, provide:	<i>Name</i>	<i>Address</i>		
<p>I hereby certify that I have read the Program Requirements regarding Continuing Education. The provider, instructors, monitors and other personnel will comply fully with these requirements relating to the conduct of Continuing Education courses. I further certify that all instructors/speakers will meet the established minimum requirements and that the provider will comply with the Americans with Disabilities Act and all applicable EEO statutes. I understand that I must notify the Department of Public Safety, in writing, within 15 days of all changes and modifications to all applications. I also certify that the information provided is true and correct to the best of my knowledge. I understand that any omission, inaccuracy or failure to make a full disclosure constitutes grounds for denial of approval/revocation of approval.</p>				
_____			_____	
Provider Official's Signature			Date	

Massachusetts Construction Supervisors Continuing Education

Instructions for Completing the Course Approval Application

Credit is given only for courses that have been approved. You may not advertise or otherwise promote courses as appropriate for CE credit until they have been approved. You may not conduct courses for CE credit until you receive written approval from Thomson Prometric.

Completing the Form

Provider Name

Print or type the full legal name of the organization providing the course.

Provider Number

Enter the provider number assigned to your organization by Thomson Prometric. If you do not have a Thomson Prometric provider number, leave this space blank.

Course Title

Enter the title (maximum 40 characters).

Course Number

Leave blank; Thomson Prometric assigns a number.

Course Type

Mark the formats that will apply for this course. Classroom includes single- and multiple-session classroom courses, seminars, conferences and conventions at which attendance is monitored. Self-study courses are courses for which attendance is not monitored. Self-study courses must be followed by a monitored, closed-book exam. Credit may be given for self-study courses only when the student passes an exam.

Category of Approval Sought

See the Program Requirements section for information about the categories.

Comprehensive Outline

Attach a comprehensive course outline providing details of what will be taught. Annotate this outline to provide the information necessary to evaluate the course properly. Specifically:

1. Divide the outline into sections of approximately 30 minutes each. List the minutes of instruction devoted to each section. The total number of minutes should equal the length of the course.
2. Include case studies with the outline. Credit will not be assigned for case studies without detail.

Certification

Certify by signing that all of the information on the form and in the attachments is true and correct, to the best of your knowledge, and that this course will be conducted in accordance with all applicable Department policies and guidelines and Massachusetts statutes and regulations.

Attachments

For classroom courses: annotated course outline. Case studies must be included if used.

For self-study courses: copies of all study materials, exam procedures, examinations and affidavits for self-study courses.

Submission

Send your application form and attachments, along with the \$40 fee in the form of a company check, cashier's check, money order or credit card authorization to:

Thomson Prometric
ATTN: Mass Const Supv CE
1260 Energy Lane
St. Paul, MN 55108

You may pay the fee using American Express, Visa or MasterCard.

If your card is denied, the transaction will not be processed.

Thomson Prometric will review and approve or disapprove course approval applications within **30 days of receipt**. If a course application is not approved, you will be informed of the reason(s). If a course is approved, Thomson Prometric will send a course approval certificate indicating the assigned credits.

Massachusetts Construction Supervisors Continuing Education Program Course Approval Application

Provider Name		Provider Number
Course Title (maximum 40 characters)		Course Number (Leave Blank)
Course Type: <i>(check one)</i> <input type="checkbox"/> Self-study <input type="checkbox"/> Classroom	Number of credit hours requested _____	
Category of Approval Sought: Category A Category B		
<p>For all courses: Attach refund policy and tuition.</p> <p>For Classroom courses: Attach a comprehensive course outline and bibliography. Annotate the outline indicating, for each section, the number of minutes of instruction that will be offered and the method of presentation for each component.</p> <p>For Self-Study courses: Include study materials, exam procedures and sample exam.</p>		
I, the undersigned, do hereby certify that all information provided herein is true and correct.		
_____ Printed/Typed Name of Authorized Provider Official	_____ Signature	_____ Date

PLEASE PRINT OR TYPE. PHOTOCOPY AS NEEDED.

**TO BE REPLACED WITH APPROPRIATE
CONSTRUCTION SUPERVISOR MATERIAL**

SAMPLE ACCEPTABLE COURSE OUTLINE

DIRECTORS AND OFFICERS LIABILITY

- | | | |
|------------|---------------|--|
| 25 minutes | 8:30 - 8:55 | I. Recent history of D&O liability exposure <ul style="list-style-type: none">A. Trends in D&O claim frequency and severityB. Major problem areas<ul style="list-style-type: none">1. Federal securities laws2. Mergers/acquisitions3. Pollution claims4. Financial institutions claims5. Third-party claimsC. Recent large settlements and judgments |
| 25 minutes | 8:55 - 9:20 | II. Legal concepts underlying the D&O exposure <ul style="list-style-type: none">A. Basic legal duties of Directors and Officers<ul style="list-style-type: none">1. Duty of obedience2. Duty of loyalty3. Duty of careB. To whom duties are owedC. Common defensesD. Recent legislation limiting director liability |
| | 9:20 – 9:30 | BREAK |
| 50 minutes | 9:30 - 10:20 | III. Common exclusions <ul style="list-style-type: none">A. Public policy exclusions<ul style="list-style-type: none">1. Dishonesty2. Gaining an illegal profit or advantage3. Section 16(b) of the Securities Exchange Act4. Return of excessive remunerationB. Intended to be covered elsewhere<ul style="list-style-type: none">1. Libel and slander2. Nuclear energy3. Employment practice |
| | 10:20 – 10:30 | BREAK |
| 50 minutes | 10:30 - 11:20 | IV. Case study
Review of ABC Corporation's stockholder lawsuit alleging mismanagement by the corporation's board of directors and senior management. Study includes review of facts, company's defense and participation in defense by the insurer. |

Reasons for acceptability:

1. Sufficient detail on subject matter covered.
2. Sufficient detail on amount of time spent on each topic.
3. Content that qualifies for credit.
4. Breaks are noted on the outline. Ten minutes per hour of instruction are recommended.
5. Case study is described. It is useful to include the case study materials with the outline.

**TO BE REPLACED WITH APPROPRIATE
CONSTRUCTION SUPERVISOR MATERIAL**

SAMPLE UNACCEPTABLE COURSE OUTLINE

ADVANCED WORKERS COMPENSATION SEMINAR

- 8:00 a.m. – noon
- I. Introduction
 - II. Policy coverages
 - A. Benefits to injured workers
 - B. Employer liability
 - III. Writing workers' compensation coverages with Middle Atlantic Life and Casualty
 - A. Sales support to licensees
 - B. Price and service comparisons to competitors
 - IV. Use of technology by licensees to service clients
 - A. Wonder Wizard Claim Reporting Software
 - B. Visit the Middle Atlantic Life and Casualty interactive Web site
- Working luncheon
- Noon – 1:00 p.m.
- V. Reserving
- 1:00 p.m. – 4:00 p.m.
- VI. Loss control activities
 - VII. Case studies
 - VIII. Panel discussion with experts

Deficiencies in this outline:

1. Insufficient detail on subject matter covered.
2. Insufficient detail on amount of time spent on each topic.
3. Sales and marketing topics are not eligible for credit.
4. Company-specific procedural or marketing content is not eligible for credit.
5. Course material may not be presented concurrently with meals.
6. Where case studies are used, a description of the case study must be included with the course outline.
7. Where panel discussions are used, a description must be provided along with a description of the topic(s) to be addressed and backgrounds of the panel members.
8. Breaks are not noted on the outline.

SAMPLE

**AFFIDAVIT OF PERSONAL RESPONSIBILITY
To be Signed by Student**

I declare that I personally completed this exam without any outside assistance including course material, other source material or assistance from any person(s).

Signature (sign in ink only)

Date

**AFFIDAVIT OF EXAM COMPLETION
To be Completed and Signed by Exam Monitor**

I declare that I personally observed the above named individual during the completion of this examination and also observed that the student received no outside assistance in completing the examination.

Name of Student

Name of Course

Address where exam was taken

Date exam was taken

Beginning time

Ending time

MONITOR: DISINTERESTED THIRD PARTY

Print name of person administering test

Job title of person administering test

Company/Organization name

Business phone number

Business mailing address

Signature of person administering test
(sign in ink only)

Date

SAMPLE

**Massachusetts Construction Supervisors Continuing Education
COURSE COMPLETION CERTIFICATE**

Name of Student: _____
License Number: _____

**This certifies that the individual named has successfully completed
the course requirements for:**

Course Name: _____
Course Number: _____
Number of Credits: _____
Date of Course Completion: _____

Provider Name: _____
Provider Number: _____
Address: _____
Phone Number (including area code): _____

Signature of Authorized Provider Official: _____
Title: _____
Date: _____

Providers may create their own forms for course completion certificates, provided all of the same information indicated above is clearly reflected on the certificate.

For self-study courses, use the date of the exam as the course completion date.

Massachusetts Construction Supervisors Continuing Education Instructions for Roster Reporting

Providers are required to submit rosters on the Web at Thomson Prometric's site:
www.experioronline.com.

- The fee is \$1.00 per credit submitted. For example, the fee for a roster with 3 students completing taking a 4 credit course would be \$12.
- Rosters must be submitted within 30 calendar days of the course's completion.
- For self-study courses, use the exam date as the completion date.
- Rosters will use the student's license number as the identification number.
- If an instructor is a licensee, credit may be awarded by adding the instructor to the roster.
- Fees will be collected through the Web site by credit card. Visa, MasterCard and American Express are accepted.
- Thomson Prometric will mail a hard copy confirmation of the roster processing upon posting of the credits. Providers should review them carefully be sure that all entries were posted.
- If an error is made by the provider on the roster submission, the provider is responsible for resubmitting the corrected roster with an additional reporting fee.

Massachusetts Construction Supervisors Continuing Education Fee Worksheet

This form is for convenience in preparing submissions. Using it is optional.

Provider Approval (\$25)		\$ _____
Course Fees	<u>Number</u>	<u>Subtotal</u>
Course Approval	_____ @ \$40	\$ _____
	TOTAL	\$ _____

One check may be written to cover all fee types.

Payment may be made by check or money order payable to Thomson Prometric.

You may pay using American Express, Visa or MasterCard.

Card number: _____

Name on card: _____

Expiration date: _____

If your card is denied, the transaction will not be processed.