



DHA

(Dubai Health Authority)

Document Specification: Volunteer Program

Version 1.0

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1. Introduction

This document will guide you how to register for volunteer program

2. General Notes

Following are general notes which you need to know and understand before using the system



Note:

- In all forms * means mandatory field.
- While using the system and filling any application, detailed error messages (in red) will be shown if required explaining the error for you and the solution

3. User Registration

This function will help the volunteer to register online for the RH volunteer program. The user should register first in DHA Single Sign On and then s/he will have the ability to apply for volunteer program. Also, the user will have the ability to apply for the other services which provided by DHA when s/he register on DHA Single Sign on.

3.1. Register in **DHA Single Sign On**:

Step 1: The user has two options to enter into **DHA Single Sign On**:

a. Option One:

1. The user enters into **DHA Website (www.dha.gov.ae)** and then clicks on the **Facilities >> Rashid Hospital**



2. The user clicks on **Volunteering Program** option in the RH menu.



3. The user clicks on **Application form** option.



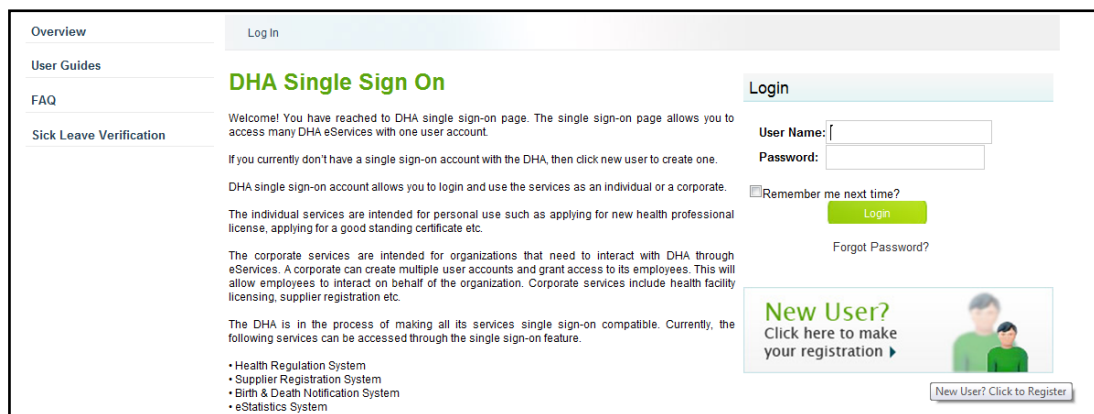
The **DHA Single Sign On** page will be opened

b. Option Two:

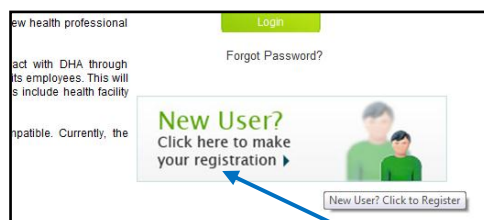
1. The user enters into **DHA Website (www.dha.gov.ae)** and then clicks on the **Licensing Services**.



Then the user will enter **into DHA Single Sign On** system.



Step 2: The user registers in **DHA Single Sign On** by clicks on **New User** icon.



Step 3: The user fills the **registration form** and then clicks on **Create User** button.

The image shows two screenshots of a web registration form. The top screenshot shows the form with all fields empty. The bottom screenshot shows the form filled out with the following information:

- * Password: [masked]
- * Confirm Password: [masked]
- * E-Mail: fralmehrezi@dha.gov.ae
- * Security Question: what is your favourite car?
- * Security Answer: nissan

Below these fields, there is a note: "Please enter information as per your **Passport**."

The bottom section of the form contains the following fields:

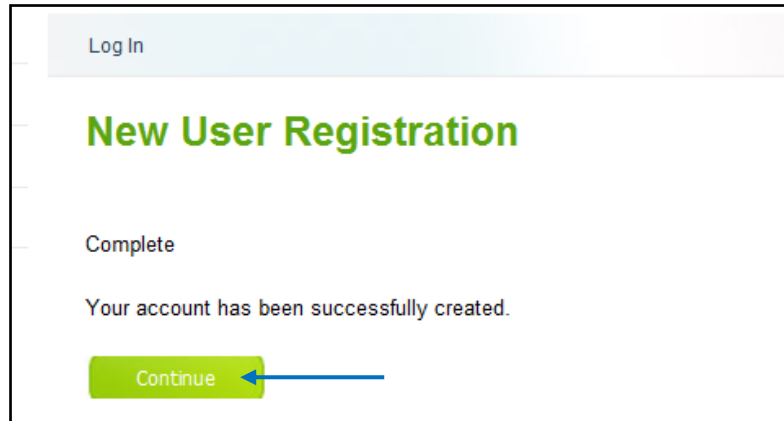
- * First Name: Fatima
- Middle Name: [empty]
- * Last Name: Al Mehrezi

A green "Create User" button is located at the bottom right of the form, with a blue arrow pointing to it.

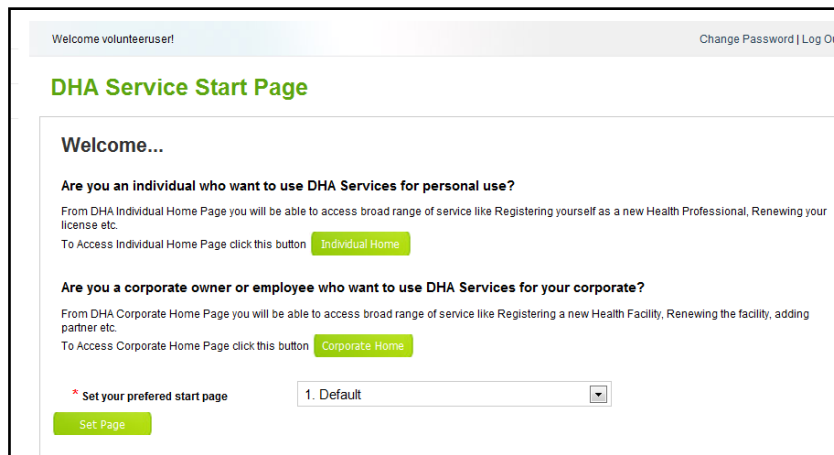


Note:
All * fields are mandatory.

The system will display a complete message for registration. The user should clicks on **Continue** button.

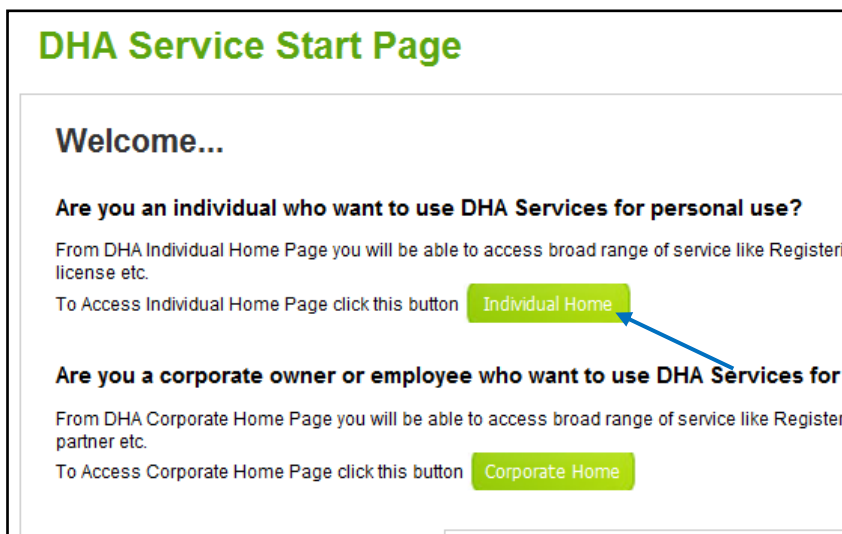


The system will take the user into the main page of **DHA Single Sign On**.



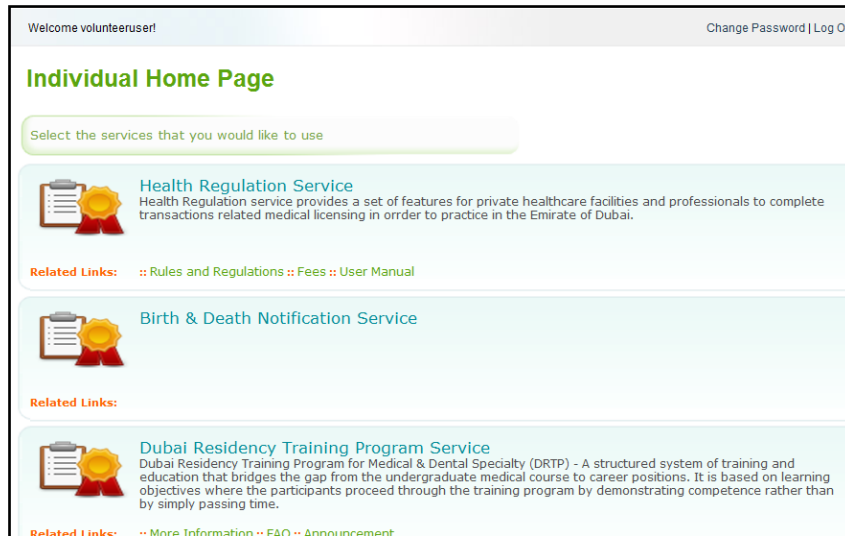
3.2. Register in Volunteer program:

Step1: The user clicks on **Individual Home** button to enter into the service page.



The

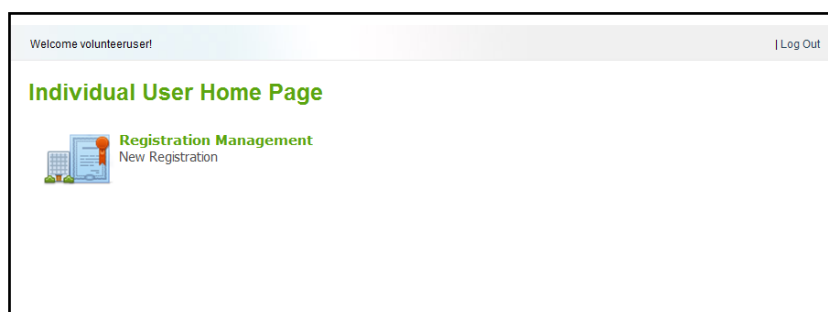
system will display all the services provided by DHA to the user.



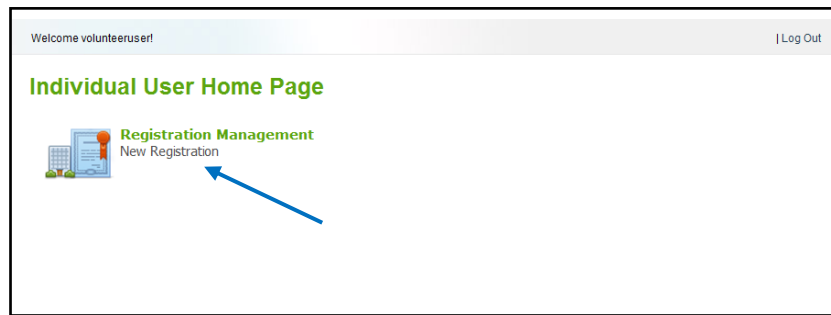
Step 2: The user clicks on **Volunteer Program Service** option.



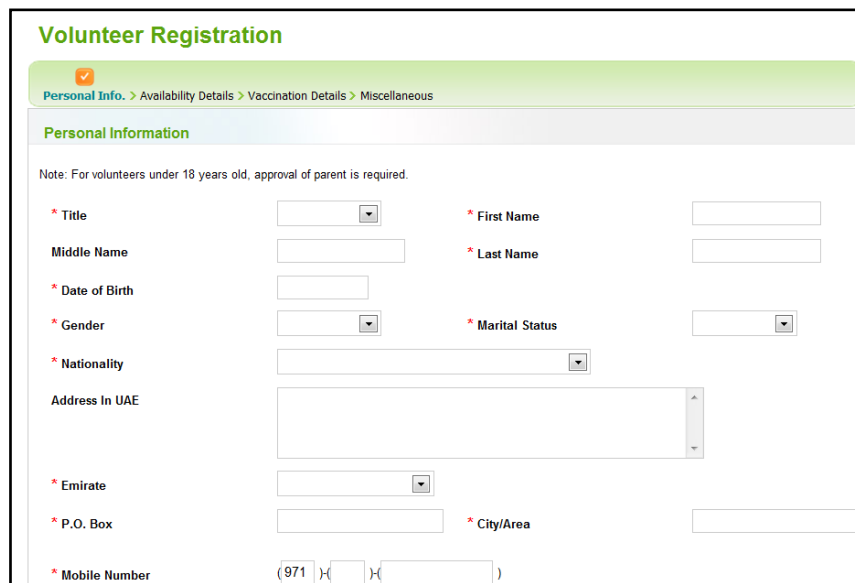
The system will open the main page of volunteer program.



Step 3: The user clicks on **New Registration** option.



The system will display the **volunteer registration form**

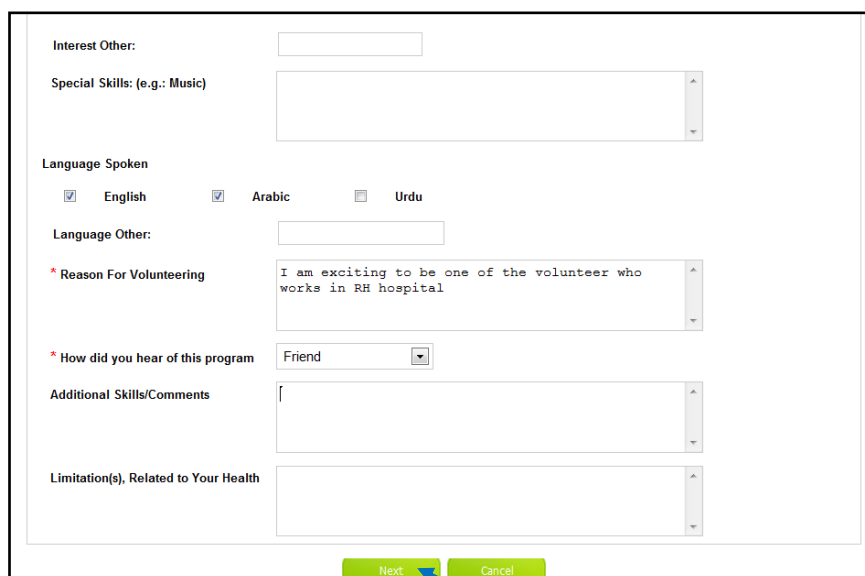


The screenshot shows the 'Volunteer Registration' form. The form is titled 'Volunteer Registration' and has a breadcrumb trail: 'Personal Info. > Availability Details > Vaccination Details > Miscellaneous'. The 'Personal Information' section is highlighted. A note states: 'Note: For volunteers under 18 years old, approval of parent is required.' The form contains the following fields:

- * Title (dropdown)
- * First Name (text)
- Middle Name (text)
- * Last Name (text)
- * Date of Birth (text)
- * Gender (dropdown)
- * Marital Status (dropdown)
- * Nationality (dropdown)
- Address In UAE (text area)
- * Emirate (dropdown)
- * P.O. Box (text)
- * City/Area (text)
- * Mobile Number (text, with a placeholder '(971) () ()')

Step 4: The user fills the **volunteer registration form:**

1. First, s/he fills his/her **personal info.** and then clicks on **Next** button.



The screenshot shows the 'Volunteer Registration' form with the following sections:

- Interest Other: (text)
- Special Skills: (e.g.: Music) (text area)
- Language Spoken: English Arabic Urdu
- Language Other: (text)
- * Reason For Volunteering: (text area, containing 'I am exciting to be one of the volunteer who works in RH hospital')
- * How did you hear of this program: (dropdown, containing 'Friend')
- Additional Skills/Comments: (text area)
- Limitation(s), Related to Your Health: (text area)

At the bottom of the form, there are two buttons: 'Next' and 'Cancel'. A blue arrow points to the 'Next' button.

2. Second, s/he fills his/her **availability details info**. And then clicks on **Next** button.

Volunteer Registration

Personal Info. > **Availability Details** > Vaccination Details > Miscellaneous

Availability Detail

Available Volunteering Months

January February March April May June

July August September October November December

Available Volunteering Days

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

When the user selects the available volunteering days, s/he should specify the available times also.

Available Volunteering Days

Sunday

Available From: Hour: 8 Minute: 0

To: Hour: 12 Minute: 0

Monday

Available From: Hour: 8 Minute: 0

To: Hour: 12 Minute: 0

Wednesday

Thursday

Friday

Saturday

Emergency Contact Information

* Title: Mr.

* Full Name: Rashid

* Relationship: Father

* Emirate: Dubai

* Mobile Number: (971) (50) (1234567)

Telephone: () () ()

Previous Next

3. Third, s/he fills the **vaccination details** and then clicks on **Next** button.

Volunteer Registration

Personal Info. > Availability Details > **Vaccination Details** > Miscellaneous

Vaccination Detail

* Have you ever had a Mantoux or PPD skin test to check for tuberculosis?

Have you ever had immunizations or vaccinations to protect you from the following?

* ChickenPox:

* Measles:

* Mumps:

* Rubella:

* Tetanus:

* Hepatitis:

Medical History

* How would you consider your general health at this time?:

Under Vaccination Detail section, if the user chooses the **Yes** option, s/he should specify the **vaccinated date**.

Vaccination Detail

* Have you ever had a Mantoux or PPD skin test to check for tuberculosis?

Have you ever had immunizations or vaccinations to protect you from the following?

* ChickenPox: * Vaccinated On:

* Measles:

Under Medical History section, if the user chooses the **Yes** option, s/he should specify the **details**.

Medical History

* How would you consider your general health at this time?:

* Are you currently taking any medication?:

* Have you been under a physician's care in the past year?

* Have you been a patient in the hospital at any time in the past year?

* Do you have physical limitations?

* Have you ever injured your neck or back?

* Is there any change in your breathing since last year? * Details:

* Is your general health different this year from last year?

* Do you have any known allergies?

4. Finally, the user fills **miscellaneous details**.

Volunteer Registration

Personal Info. > Availability Details > Vaccination Details > **Miscellaneous**

Document Detail

Volunteer Attachments: Attach File

No records have been added.

Agreement

- Please check to make sure you have completed all necessary fields in this form.
- We do not collect personal information for other than this volunteering application request.
- After submitting this form, we will contact you based on the information you provided.

* I affirm that the information and responses I have provided are accurate and true to the best of my knowledge.

* I give permission for this medical information to be held in my volunteer file at Rashid Hospital and provided to a physician in case of emergency.

Previous Submit

If the user wants to add documents, s/he should click on **Attach File** button and attach the documents.

The user should click on the Agreement statements before submitting the application.

Personal Info. > Availability Details > Vaccination Details > **Miscellaneous**

Document Detail

Volunteer Attachments: Attach File

Title	FileName		
volunteerAttach.	Chrysanthemum - Copy.jpg	View File	Delete

Agreement

- Please check to make sure you have completed all necessary fields in this form.
- We do not collect personal information for other than this volunteering application request.
- After submitting this form, we will contact you based on the information you provided.

* I affirm that the information and responses I have provided are accurate and true to the best of my knowledge.

* I give permission for this medical information to be held in my volunteer file at Rashid Hospital and provided to a physician in case of emergency.

Previous Submit



Note:
All * fields are mandatory.

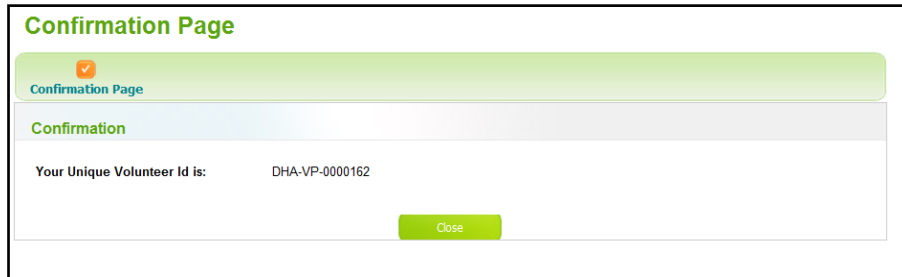
Step 5: The user clicks on **Submit** button.

I affirm that the information and responses I have provided are accurate and true to the best of my knowledge.

* I give permission for this medical information to be held in my volunteer file at Rashid Hospital and provided to a physician in case of emergency.

Previous Submit

When the user submits the application, the system will display a message with the **volunteer Unique ID**.



The system will send a notification message by email for the registered user and volunteer program staffs.

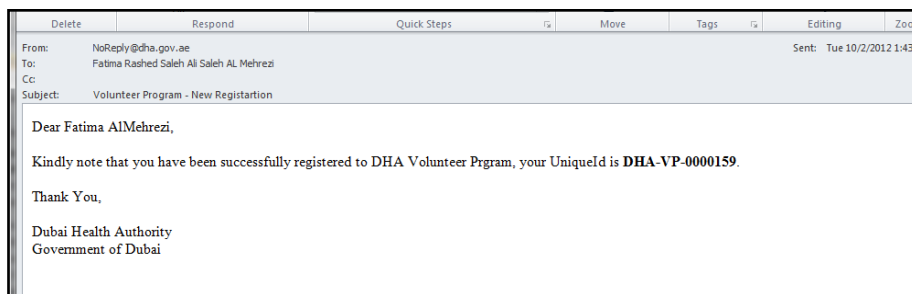


Figure1 : Email sent to the user