

INTERNATIONAL ACADEMY OF EMERGENCY MEDICAL DISPATCH®

Accreditation / Re-Accreditation



APPLICATION & SELF-ASSESSMENT

This document guides desiring agencies through a Self-Assessment Study to be recognized by the Academy as an Accredited Center of Excellence (ACE).

A site evaluation is required for all accreditations and may be required for re-accreditations at the option of the Board of Accreditation. Contact the Academy for the current site evaluation fee, award presentation fee, etc.

Agencies must submit two printed summary copies of all material with supporting files stored on a standard CD or thumb drive.

Accreditation Application

Re-Accreditation Application

For application, processing, and review fee, see insert.

Enroll in Accreditation Maintenance Plan

Currently enrolled in Accreditation Maintenance Plan

For more information, please contact the **Accreditation Planning & Assistance Division**, **Carlynn Page**, Associate Director, at the address and phone listed below, or see insert.

The Academy's accreditation process and the associated Advanced Medical Priority Dispatch System® (MPDS) protocols are based on generally accepted medical dispatch practice standards as published and promulgated by the National Association of EMS Physicians (NAEMSP), ASTM International, the American College of Emergency Physicians (ACEP), the U.S. Department of Transportation (USDOT), the National Institutes of Health (NIH), and the American Medical Association (AMA), among others.

The International Academy of Emergency Medical Dispatch®

110 South Regent Street, 8th Floor, Salt Lake City, UT 84111

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North American English • EMD Accreditation Application • 141029

TWENTY POINTS OF ACCREDITATION

The Accreditation Self-Assessment Study must formally document and describe the following:

- 1. Communication center overview and description**
 - a. Document the total number of stations that are active (calltaking and dispatching) and the number of supervisory or standby stations. Enter on line 9 of the application form.
 - b. Include a floor plan showing the placement of each workstation.
 - c. List any current accreditations and the accrediting body.

- 2. Medical Priority Dispatch System™ (MPDS®) version and licensing confirmation**
 - a. Provide the following, as applicable:
 - i. MPDS protocol version number
 - ii. ProQA® Paramount version number
 - iii. AQUA® version number
 - iv. ED-Q™ Performance Standards edition number
 - b. Include documentation (policy, directive, etc.) stating that the most recent versions of the MPDS (ProQA Paramount and/or cardsets) and the Performance Standards will be implemented within one year of their release.

- 3. Current Academy EMD certification of all personnel authorized to process emergency calls**
 - a. Provide a list of all EMDs including their names, hire dates, last certification dates, next recertification dates, and Academy EMD certification numbers.

- 4. All EMD certification courses are conducted by Academy-certified instructors, and all case review is conducted by Academy-certified ED-Qs**
 - a. If you have an in-house or contracted instructor, include her/his name, next recertification date, and certification number.
 - b. Provide a list of all ED-Qs, including their names, next recertification dates, and Academy ED-Q certification numbers.

- 5. Full activity of quality improvement (QI) committee processes**
 - a. Include copies of agendas and minutes of all Dispatch Review Committee (DRC) and Dispatch Steering Committee (DSC) meetings (at least two DRC meetings and one DSC meeting in the six months immediately preceding the application).
 - b. List the names and titles of all committee members for the following:
 - i. Quality Improvement Unit
 - ii. Dispatch Review Committee
 - iii. Dispatch Steering Committee
 - c. List the objectives and tasks of each of these committees.

- 6. IAED quality assurance and improvement methodology**
 - a. Attach a complete description of the methods used to evaluate EMD performance and correct use of the MPDS as outlined in the ED-Q Course Manual (consistent reviewing practices). The document should outline the following:
 - i. How cases are randomly selected.
 - ii. The minimum number of cases reviewed monthly.
 - iii. Any special case review practices employed. This may include cases the agency has identified that warrant additional reviews, such as cardiac arrest, choking, and childbirth.
 - b. Attach a detailed description of how EMD performance is checked, tabulated, and tracked.
 - c. Include details and dates of when case review began and how scores were shared with each employee.
 - d. Include details and dates of when shift and center scores were posted and how they were posted.

7. Consistent case evaluation that meets or exceeds the Academy’s minimum expectations

- a. The minimum case evaluation requirement is based on agency size, as follows:
 - i. Agencies whose annual call volume is above 500,000 are required to audit 1% of their cases.
 - ii. Agencies whose annual call volume is between 43,333 and 500,000 are required to audit a percentage ranging between 3% and 1%. Use the sliding scale calculator on the Academy’s Web site to calculate your agency’s required percentage and provide a printed screenshot of the calculation and total.
 - iii. Agencies whose annual call volume is between 1,300 and 43,332 are required to audit 1,300 cases (25 per week).
 - iv. Agencies whose annual call volume is below 1,300 are required to audit 100% of their cases.
- b. List the total number of emergency medical calls the center received in the six months immediately prior to the accreditation application.
- c. List the total number of cases reviewed in the same time period.

8. Historical baseline QA data from initial implementation of structured Academy QA processes (first QI Summary Report, if available*)

- a. A baseline QI Summary Report, Agency ACE Performance Report (or equivalent) that includes the following:
 - i. Case Entry compliance
 - ii. Key Question compliance
 - iii. DLS compliance
 - iv. Chief Complaint selection compliance
 - v. Final coding compliance
 - vi. Total compliance level
 - b. Determinant Drift Reports (or equivalent) for the center
- *Indicate on cover letter if these items are not available.

9. Monthly average case evaluation compliance levels for the communication center for the six months preceding the accreditation application, with compliance levels at or above accreditation levels for at least the three months immediately preceding application

- a. Include Accreditation report showing compliance at or above the following expected minimum performance levels for at least the three months preceding the application:

	ACE
High Compliance	
Compliant	
Partial Compliance	10%
Low Compliance	10%
Non-Compliant	7%

Percentage of Deviation Accepted	Critical Deviation	Major Deviation	Moderate Deviation	Minor Deviation
	3%	3%	3%	3%

- b. Include a Communication Center Determinant Drift Report for the three months preceding the application showing that under-response and over-response each occur in no more than 5% of cases.

10. Verification of correct case evaluation and QI techniques, validated through independent Academy review

- a. Provide copies of 25 case review audio files with completed Case Evaluation Records and Incident Performance Reports for Academy assessment.
 - i. Include 22 calls from the one-month period immediately preceding the application. These calls must be selected purely at random; they must not be cases specifically marked for feedback or other review.
 - ii. State the process for random selection of these calls.
 - iii. Include an additional 3 cases involving Pre-Arrival Instructions. These cases should include the first case with Pre-Arrival Instructions reviewed in each of the three months immediately preceding the application.

11. Implementation and/or maintenance of MPDS orientation and case feedback methodology for all field personnel

- a. Describe your MPDS field personnel orientation process.
 - i. Include copies of handouts, presentations, and any other materials used.
 - ii. List the number of Field Responder Guides distributed, along with the dates these were given out.
- b. Describe your EMD case feedback methodology.
- c. Include a blank copy of the field feedback form utilized by your agency.
 - i. Include documentation of the dates field feedback forms were distributed to all field stations.

12. Verification of local policies and procedures for implementation and maintenance of the MPDS. Include all policies relating to EMD practices, which must include the following:

- a. Implementation and application of MPDS.
- b. Medical Director approval of all MPDS protocols, including those requiring local approval, for example:
 - OBVIOUS DEATH and EXPECTED DEATH
 - OMEGA referrals (if applicable)
 - HIGH RISK Complications for childbirth
 - Protocol 33 ACUITY Levels (if applicable)
 - Aspirin Diagnostic and Instruction Tool
 - STROKE Treatment Time Window
 - Cardiac Arrest Pathway
- c. Protocol compliance.
 - i. Quality improvement
 - ii. CDE requirements
 - iii. Performance management and remediation
 - iv. Customer service skills (how customer service scores are addressed by your agency)
 - v. Language translation processes
- d. A policy stating that all emergency medical calls are only processed by EMD-certified personnel, and that employees are removed from their calltaking duties if their certification is expired, suspended, or revoked.

13. Copies of all documents pertaining to your continuing dispatch education (CDE) program

- a. Submit the CDE schedules and topics for the past six months.
- b. Submit EMD attendance records.
- c. Submit a CDE schedule draft for the next six months.

Check this box if utilizing the *EMD Advancement Series*.

14. Secondary Emergency Notification of Dispatch (SEND) orientation

- a. Include documentation of the distribution of SEND Protocol information to all police and fire dispatchers and to other agencies routinely forwarding emergency calls.
 - i. List the other agencies as applicable.
 - b. Include documentation of agencies trained, copies of attendance records, and any training materials used for this process.
- Check this box if utilizing the *Special Procedures Briefing CD on SEND*.

15. Established local response assignments for each MPDS Determinant Code

- a. Include a description of the process for developing response assignments.
- b. Include a list of all MPDS Determinant Codes and each locally determined response assignment.
- c. Include copies of the specific Dispatch Steering Committee (DSC) minutes with verification that all response assignments are approved.

16. Maintenance and modification processes for local response assignments to MPDS Determinant Codes

- a. Provide documentation describing how local MPDS response assignments are regularly reviewed and how recommended changes are approved.

17. The communication center's incidence (number of occurrences) of all MPDS codes and levels for the six months immediately preceding application

- a. Each Chief Complaint (1–37).
- b. Each individual Determinant Code (approximately 393).
- c. Each Determinant Level (Ω , A, B, C, D, and E).

18. Appointment and appropriate involvement of the Medical Director to provide oversight of the center's EMD activities

- a. List the name, address, license number, and country/state/province (or equivalent) in which the Medical Director is licensed to practice.
- b. Include a copy of the documentation appointing the Medical Director.
- c. List the approved roles and responsibilities of the Medical Director within the dispatch system.

19. Agreement to share nonconfidential EMD data with the Academy and others for the improvement of the MPDS and the enhancement of EMD in general

- a. Include written verification, signed by the agency's senior executive, agreeing to the above requirement.
- b. Include written verification, signed by the agency's senior executive, agreeing to submit the semiannual compliance summary reports to the Academy (submitted electronically through the Academy's Web site).

20. Agreement to abide by the Academy's Code of Ethics, Code of Conduct, and the standards set forth for an Accredited Center of Excellence

- a. Include written verification, signed by the agency's senior executive, agreeing to the above requirement.
- b. Provide the date, location, and verification of the prominent posting of the Code of Ethics and Code of Conduct.

ACCREDITATION/RE-ACCREDITATION APPLICATION



FOR OFFICE USE ONLY:

Date Application Received: _____ Board-Assigned Reviewer: _____
Date Payment Received: _____ Date Review Paperwork Received: _____
Date Call Samples Received: _____ Date Re-Accreditation Approved/Denied: _____

Accreditation **Re-Accreditation**

GENERAL CONTACT INFORMATION: *(Please type or print. Attach additional paper as necessary.)*

1) Name of Agency or Organization: _____

2) Primary Contact Person: _____ Title: _____

Daytime Phone Number: _____ Fax: _____

Mailing Address: _____ E-mail Address: _____

City: _____ ST/Prov: _____ Postal Code: _____ Country: _____

3) Chief or Executive Officer (or management equivalent): _____

Address (if different from above): _____

City: _____ ST/Prov: _____ Postal Code: _____ Country: _____

4) Medical Director/Advisor (or equivalent): _____

Address (if different from above): _____

City: _____ ST/Prov: _____ Postal Code: _____ Country: _____

Specialty: _____ License #: _____ ST/Prov(s) in which licensed: _____

DISPATCH SERVICE INFORMATION:

5) Type of PSAP: Primary Secondary 6) Scope: EMS Only Consolidated with Police/Fire

7) Total Population Served (approx.): _____ 8) Total Annual EMS Call Volume (approx.): _____

9) Number of Licensed EMD Stations: _____ (of which _____ are Active & _____ are Supervisory/Standby)

10) MPDS License Number(s) for Cardsets: _____ and/or ProQA® Paramount Software: _____

11) Please attach a brief statement describing the service and scope of your agency or organization. Be sure to mention any corporate mission statements, goals, objectives, and/or reasons for wanting to maintain the status of Accredited Center of Excellence.

12) Please attach a completed **Self-Assessment Summary**, with supporting documentation clearly referenced, to demonstrate any changes to compliance with each of the Academy's Twenty Points of Accreditation.

On behalf of the above-named agency or organization, I hereby affirm that all the above information is true and correct, and I acknowledge that if it is not correct, this application may be rejected or Accreditation rescinded. Furthermore, I hereby agree that we will abide by the Academy's Code of Ethics, Code of Conduct, and practice standards set forth for an Accredited Center of Excellence and respect all copyrights, trademarks, and patents, and intellectual property regarding course materials and/or protocols.

Authorized Signature: _____ **Date:** _____

ACADEMY ETHICS POLICY

The Academy encourages, advocates, and supports the proposition that *“The community relies on the sound application of Priority Dispatch® and imposes on the certified Emergency Dispatcher an obligation to maintain professional standards of technical competence, morality, and integrity.”* To accomplish this, the Academy’s College of Fellows has unanimously adopted the following Code of Ethics, which serves as a guideline for the Academy in determining whether initial certification or recertification should be granted and in assessing grounds for possible suspension or termination.

THE CODE OF ETHICS

1. Academy-certified personnel should endeavor to put the **needs of the public** above their own.
2. Academy-certified personnel should continually seek to maintain and improve their professional **knowledge, skill, and competence** and should seek continuing education whenever available.
3. Academy-certified personnel should obey all **laws** and **regulations** and should avoid any conduct or activity that would cause unjust harm to the citizens they serve.
4. Academy-certified personnel should be **diligent and caring** in the performance of their **occupational duties**.
5. Academy-certified personnel should establish and maintain **honorable relationships** with their service peers and with all those who rely on their professional skill and judgment.
6. Academy-certified personnel should assist in improving the **public understanding** of emergency dispatching.
7. Academy-certified personnel should assist in the **operation** of and enhance the **performance** of their dispatch systems.
8. Academy-certified personnel should seek to maintain the highest standard of **personal practice** and also maintain the **integrity** of the International Academies of Emergency Dispatch by **exemplifying** this professional Code of Ethics.

CODE OF CONDUCT

1. Academy-certified personnel **shall not participate in, or publicly endorse**, any group or organization that demeans the goals, objectives, credibility, reputation, goodwill, or dignity of the Academy or the public safety profession.
2. Academy-certified personnel shall be **truthful and timely** in all forms of communication with the Academy and **shall not provide information that is false**, misleading, deceptive, or that creates unreasonable expectations. Academy-certified personnel shall **not sign any document** that the individual knows or should know contains false or misleading information.

3. Academy-certified personnel **shall notify** the Academy of **any and all occurrences** that could **call into question one's ability to perform** his or her duty as a dispatcher. Academy-certified personnel **must notify** the Academy immediately **if convicted of a felony or crime** involving moral turpitude. Crimes of moral turpitude include but are not limited to illegal pornography, fraud, embezzlement, illicit drug abuse or distribution, theft, bribery, kidnapping, or assault.
4. Academy-certified personnel **are prohibited from** using Academy **certification(s) for private or commercial gain**. Academy-certified personnel shall not compete in any way with the Academy or its contracted partners, including Priority Dispatch®, in regards to active or planned business activities without prior written authorization.
5. Academy-certified personnel shall **not violate patient privacy laws** and rights and shall always respect those rights.
6. Academy-certified personnel shall **not take calls or dispatch** while **under the influence** of alcohol, illicit drugs, or any other agent that would impair the ability to properly function in the dispatch setting.
7. Academy-certified personnel **shall not engage in conduct or perform an act** that would reasonably be regarded as disgraceful, dishonorable, or unprofessional.
8. Academy-certified personnel should **avoid practicing or facilitating discrimination** and strive to prevent discriminatory practices including but not limited to those relating to race, religion, color, gender, sexual orientation, national origin, age, or disability.
9. Academy-certified personnel understand **it is their personal responsibility to ensure they remain certified** by the Academy through CDE and similar Academy-approved programs and processes. Academy-certified personnel shall **follow their respective employer's policies and procedures**. In addition, they shall strive to always **follow the Academy's protocol**, including Key Questioning, Determinant Coding, Post-Dispatch Instructions, Critical ED Information, and Pre-Arrival Instructions.
10. Academy-certified personnel understand **it is their responsibility to remain current** to any and all protocol changes that can have an impact on the outcome, negative or positive, of the emergency for which the dispatcher is responsible.



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INTERNATIONAL ACADEMY OF EMERGENCY MEDICAL DISPATCH®

Accreditation / Re-Accreditation



APPLICATION FEE & ACCREDITATION MAINTENANCE PLAN

Accreditation/Re-Accreditation Application:

\$2,250 application, processing, and review fee.

\$500 of this fee will be refunded if the application is not approved.

\$100 additional fee if the application is "rejected with advice" and requires the submission of 25 more cases for review.

Contact the Academy for current site evaluation fee.

Accreditation Maintenance Plan:

If at the time of your accreditation you wish to enroll in the Accreditation Maintenance Plan, your agency will be billed \$650/year over your 3-year accreditation period, reducing the total re-accreditation fee to \$1950 nonrefundable (a \$300 savings).

To enroll or to get more information, please contact:

Accreditation Planning & Assistance Division

Attn: **Carlynn Page**, Associate Director

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Accreditation Assignments and Progress Tracking

ACE Point	<i>Assigned to</i>	<i>Expected Completion Date</i>	<i>Actual Completion Date</i>
Communication center overview and description			
MPDS version and licensing confirmation			
Current Academy EMD certification of all personnel authorized to process emergency calls			
All EMD certification courses are conducted by Academy-certified instructors, and all case review is conducted by Academy-certified ED-Qs			
Full activity of QI committee processes			
IAED quality assurance and improvement methodology			
Consistent case evaluation that meets or exceeds the Academy's minimum expectations			
Historical baseline QA data from initial implementation of structured Academy QA processes			
Monthly average case evaluation compliance levels for the communication center for the six months preceding the accreditation application, with compliance levels at or above accreditation levels for at least the three months immediately preceding application			
Verification of correct case evaluation and QI techniques, validated through independent Academy review			
Implementation and/or maintenance of MPDS orientation and case feedback methodology for all field personnel			
Verification of local policies and procedures for implementation and maintenance of the MPDS			
Copies of all documents pertaining to your CDE program			
SEND orientation			
Established local response assignments for each MPDS Determinant Code			
Maintenance and modification processes for local response assignments to MPDS Determinant Codes			
The communication center's incidence (number of occurrences) of all MPDS codes and levels for the six months immediately preceding application			
Appointment and appropriate involvement of the Medical Director to provide oversight of the center's EMD activities			
Agreement to share nonconfidential EMD data with the Academy and others for the improvement of the MPDS and the enhancement of EMD in general			
Agreement to abide by the Academy's Code of Ethics, Code of Conduct, and the standards set forth for an Accredited Center of Excellence			

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