

# INTERNATIONAL ACADEMY OF EMERGENCY COMMUNICATION NURSING

## *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.

Applications are submitted online. Please request access to the web page at the following address: [www.accreditation.emergencydispatch.org/Default/NewApplication](http://www.accreditation.emergencydispatch.org/Default/NewApplication)

For more information, please contact the **Accreditation Division** at the address and phone number listed below.

**The International Academy of Emergency Communication Nursing**

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# 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 (EMD calltaking, ECN calltaking, dispatching) and the number of supervisory or standby/back-up stations.
- b. Include a floor plan showing the placement of ECNS workstation(s).
- c. List any current accreditations and the accrediting body. (IAED EMD Accreditation is required.)
- d. Describe how the LowCode-CAD interface functions within your communication center.

## **2. Emergency Communication Nurse System™ (ECNS™) confirmation of current versions**

- a. Provide the following, as applicable:
  - ECNS protocol version number
  - LowCode™ version number
  - AQUA® version number
  - Performance Standards edition number
- b. Include documentation (policy, directive, etc.) stating that the most recent versions of ECNS Protocols, ECN-Q course materials, and the ECN-Q Performance Standards will be implemented within one year of their release.
- c. Include documentation (policy, directive, etc.) stating that software updates of LowCode will be implemented within one year of their release.
- d. Include documentation (policy, directive, etc.) stating that software updates of AQUA will be implemented quarterly.

## **3. Current Academy ECN certification of all personnel authorized to process ECNS calls**

- a. Provide a list of all ECNs, including their names, hire dates, last certification dates, next recertification dates, and Academy ECN member numbers.
- b. Provide a list of all nurse license or certification numbers, places of issue, and expiration dates or equivalent.

## **4. All ECNS certification courses are conducted by Academy-certified instructors, and all case review is conducted by Academy-certified ECN-Qs**

- a. If you have an in-house or contracted instructor, include her/his name, next recertification date, and member number.
- b. Provide a list of all ECN-Qs, including their names, next recertification dates, and Academy ECN-Q member numbers.

## **5. Full activity of quality improvement (QI) committee processes**

- a. Include copies of agendas and minutes of all ECNS Review Committee and ECNS Steering Committee meetings (at least two Review Committee meetings and one Steering Committee meeting in the six months immediately preceding the application).
- b. List the names and titles of all members for the following:
  - Quality Improvement Unit
  - ECNS Review Committee
  - ECNS Steering Committee
- c. List the objectives and tasks of the ECN Review and Steering committees.

## 6. IAED quality assurance and improvement methodology

- a. Attach a complete description of the methods used to evaluate ECN performance and correct use of the ECNS as outlined in the ECN-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 focused case review practices employed. This may include cases the agency has identified that warrant additional reviews.
- b. Attach a detailed description of how ECN performance is checked, tabulated, and tracked.
- c. Include details of when case review began and how scores were shared with each employee.
- d. Include details of when shift and center scores were posted and where 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:
  - Agencies whose annual call volume is below 600 are required to audit 10% of their cases.
  - Agencies whose annual call volume is 601 to 9000 are required to audit 5% of their cases.
  - Agencies whose annual call volume is 9001 to 18,000 are required to audit 3.5% of their cases.
  - Agencies whose annual call volume is 18,001 to 90,000 are required to audit 2.5% of their cases.
  - Agencies whose annual call volume is 90,001 to 180,000 are required to audit 1.5% of their cases.
  - Agencies whose annual call volume is >180,000 are required to audit 1.25% of their cases.
- b. List the total number of ECNS 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

Agency ACE Performance Standard  
1/1/2018 Update  
Coverage: 1/1/2018 - 1/31/2018

Here is a summary of the current ACE performance report.

Category	Actual	Target
100% Compliance	100%	100%
Complaints	0%	0%
Non-Compliance	0%	0%
ACE Compliance	100%	100%
ACE Non-Compliance	0%	0%
<b>Total</b>	<b>100%</b>	<b>100%</b>

Percentage of Conditions

Condition	Actual	Target	Pass	Fail
100% ACE	100%	100%	100%	0%
100% Compliance	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%
100% ACE	100%	100%	100%	0%

Notes: ACE Compliance is based on the Agency's ACE Compliance Report. ACE Compliance is based on the Agency's ACE Compliance Report. ACE Compliance is based on the Agency's ACE Compliance Report.

© 2018 IAED Quality Center, LLC. All rights reserved. ACE Performance Standard 1/31/2018

- a. Include ACE Performance Benchmark Report for the first month after implementation of ECNS.

**9. Monthly ACE Performance Standards Reports for 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 ACE Performance Standards Report showing compliance at or above the following expected minimum performance levels for at least the three months preceding the application:

Compliance Level	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%

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

- a. Provide 25 case reviews from the one-month period immediately preceding the application for Academy assessment, including:
- audio files.
  - merge file from AQUA (If merge file is not available, please provide Incident Performance Reports).
  - LowCode call log.
- b. These calls must be selected purely at random; they must not be cases specifically marked for feedback or other review. State the process for random selection of these cases.

**11. Implementation and/or maintenance of ECNS orientation and incident inquiry for all personnel**

- a. Describe your EMD/EMS orientation process:
- Include copies of handouts, presentations, and any other materials used.
- b. Describe your ECNS incident inquiry process (incident inquiries may be for both compliments and complaints).
- c. Include a blank copy of the incident inquiry form utilized by your agency:
- Include documentation of the dates the incident inquiry forms were distributed.

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

- a. Implementation and application of ECNS
- b. Medical Director approval of all ECNS script configurations, Points of Care dispositions, and ECNS eligible codes (from MPDS secondary triage users)
- c. Protocol compliance
- d. Quality improvement
- e. CE and/or CDE requirements as certification(s) required
- f. Performance management and remediation
- g. Language translation processes
- h. A policy stating that all ECNS calls are only processed by ECN-certified personnel and that employees are removed from their duties if their certification is expired, suspended, or revoked

- 13. Copies of all documents pertaining to your Continuing Dispatch Education (CDE) program for ECN recertification**
  - a. Submit the CDE schedules and topics for the past six months.
  - b. Submit ECN attendance records.
  - c. Submit a CDE schedule draft for the next six months.
  
- 14. ECNS policies and processing methods used to ensure safe transfer of calls escalated by the ECN for an emergency dispatch**
  - a. Policy describing the process for transferring escalated calls for an emergency dispatch
  
- 15. Established local configuration of ECNS Points of Care dispositions**
  - a. Include a description of the process for developing ECNS Points of Care.
  - b. Include a list of all ECNS Recommended Care Levels linked with the ECNS locally determined Points of Care.
  - c. Include copies of the specific ECNS Steering Committee minutes with verification that all local configurations of Points of Care have been approved.
  
- 16. Maintenance and modification processes for ECNS Points of Care levels**
  - a. Provide documentation describing how ECNS Points of Care levels are regularly reviewed and how recommended changes are approved.
  
- 17. Type and frequency of all ECNS Recommended Care Levels (RCL) and subsequent Point of Care (POC) for the six months immediately preceding application**
  - a. Submit ECNS Disposition Report:
    - Include all RCL and POC.
    - Include frequency of eligible codes by RCL and POC (Secondary Triage only).
  
- 18. Appointment and appropriate involvement of the Medical Director to provide oversight of the center's ECNS 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 Emergency Communication Nurse System.
  
- 19. Agreement to share nonconfidential ECNS data and call recordings (de-identified) with the Academy and other IAED-affiliated entities for the improvement and enhancement of ECNS 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 quarterly ACE Performance reports to the Academy (submitted electronically through the Academy's Website).
  
- 20. Agreement to abide by the Academy's Code of Ethics, Code of Conduct, and the Performance 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.

## 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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