



POLICY AND PROCEDURE MANUAL

OF THE COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

Signed by: *Eileen Trozer*

All policies and revisions are dated and reviewed on at least an annual basis by the Executive Director and brought to the full board for revision approvals.

1st DRAFT – November 2015, Approved January 22, 2016
Revised October 2017, 10/20/18

		<u>Revision Dates</u>
<u>PRELIMINARY POLICIES</u>	<u>00.00.00</u>	
General Statement Regarding Manual	00.01.00	1/22/16
Payment of CAMTS Global Fees and Costs	00.02.00	1/22/16
Accreditation Timelines for Programs Litigating Against CAMTS Global	00.03.00	1/22/16
Unmeritorious Litigation against CAMTS Global	00.04.00	1/22/16
Delinquent or Outstanding Fees and Costs	00.05.00	1/22/16
Indemnification of CAMTS Global	00.06.00	1/22/16
Amendment of Policy and Procedure Manual	00.07.00	1/22/16
Intellectual Property	00.08.00	1/22/16
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<u>CONSULTATION PROGRAM POLICIES</u>	<u>07.00.00</u>	
Consultation Service	07.01.00	1/22/16
Consultant	07.02.00	1/22/16
Conflict of Interest	07.03.00	1/22/16
Consultant Fees	07.04.00	1/22/16
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Contracting for a Consultant	07.06.00	1/22/16

		<u>Revision</u>
		<u>Dates</u>
Outstanding Indebtedness	07.07.00	1/22/16
Confidentiality	07.08.00	1/22/16

APPENDIX

- A. Letter Agreement**
- B. Applicants Verification of Information**
- C. Business Associate Agreement**
- D. Photo Use Agreement**
- E. Board Member Agreement**

CAMTS GLOBAL POLICY AND PROCEDURE MANUAL

<u>PRELIMINARY POLICIES</u>	<u>00.00.00</u>
General Statement Regarding Manual	00.01.00
Payment of CAMTS Global Fees and Costs	00.02.00
Accreditation Timelines for Programs Litigating Against CAMTS Global	00.03.00
Unmeritorious Litigation against CAMTS Global	00.04.00
Delinquent or Outstanding Fees and Costs	00.05.00
Indemnification of CAMTS Global	00.06.00
Amendment of Policy and Procedure Manual	00.07.00
Intellectual Property	00.08.00

PRELIMINARY POLICIES - 00.00.00

00.01.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: General Statement Regarding CAMTS Global's Policy and Procedure Manual

POLICY: Any medical transportation service that applies for accreditation is accredited by CAMTS Global or is appealing an accreditation decision or Board action shall be subject to the policies and procedures set forth in this Policy and Procedure Manual of the Commission on Accreditation of Medical Transport Systems GLOBAL.

00.02.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Payment of CAMTS Globals Fees and Costs

POLICY: If a dispute arises between a Program and CAMTS Global during the accreditation process (which includes, but is not limited to, the initial application process, reaccreditation process, Site Survey, Supplemental Site Survey, Monitoring Visit, appeals, and/or the Board's decision-making process in connection with any of these events), the Program shall be responsible for paying CAMTS Global's costs and expenses, including reasonable attorney's fees.

00.03.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Accreditation Timelines for Programs Litigating Against CAMTS Global

POLICY: In the event a Program initiates litigation (including, but not limited to, the filing of a lawsuit, mediation, arbitration or any administrative proceeding) (hereinafter, "Litigation") against CAMTS GLOBAL for any reason, including, but not limited to, any disputes regarding a Program's accreditation process (as outlined in 00.02.00, *supra*), any visits, consultations or Board decisions regarding any new, pending, or appealed accreditation applications of that Program and/or its affiliates may be stayed up to and until final conclusion of the Litigation whether through settlement, jointly stipulated dismissal or judgment.

Note: The following deadlines remain in effect and shall not be stayed despite the commencement of Litigation:

03.06.00 (Guidelines (B)(3)—6 months); 03.06.00 (Purpose—30 days); 03.08.00 (Guidelines (3)—30 days and 2 weeks); 03.11.00 (Guidelines—5 business days); 04.01.00 (Other Accreditation Decisions (A) Withhold Accreditation—30 days); 04.01.00 (Other Accreditation Decisions (A) Withhold Accreditation (3)—30 days); 04.01.00 (Other Accreditation Decisions (B) Withdrawal of Accreditation—30 days); 04.01.00 (Other Accreditation Decisions (B) Withdrawal of Accreditation (4)—30 days); 04.01.00 (Board Actions (A)(3)(a)—6 months); 04.01.00 (Progress Report—30 days); 04.01.00 (Board Review of Significant Program Changes—30 days); 04.02.00 (Requests for Extensions (A)(3)—6 months); 04.02.00 (Guidelines(A)(1)—30 days); 5.07.00 (Policy—6 months and 3 months); 5.11.00 (Certificate of Accreditation (D)—30 days); 5.12.00 (Ongoing Communication with CAMTS Global—30 days)

00.04.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Unmeritorious Litigation against CAMTS Global

POLICY: In the event, a Program initiates Litigation against CAMTS Global but, at the conclusion of the Litigation, fails to prevail on all of its claims, that failure will serve as a separate and independent reason to withhold or withdraw a Program's CAMTS Global accreditation.

00.05.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Delinquent or Outstanding Fees and Costs

POLICY: Any Program that is delinquent in the payment of CAMTS Global fees or has an outstanding debt to CAMTS Global will not be eligible for accreditation review until the delinquency or outstanding debt is resolved to the satisfaction of CAMTS Global. Delinquent or indebted Programs may also be subject to the immediate withholding or withdrawal of any current accreditation.

00.06.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Indemnification of CAMTS Global

POLICY: Any Program that is accredited shall indemnify CAMTS Global and hold CAMTS Global harmless from any and all claims, demands, actions, or causes of action arising from the accreditation process (which includes, but is not limited to, the initial application process, reaccreditation process, Site Survey, Supplemental Site Survey, Monitoring Visit, appeals, and/or the Board's decision-making process in connection with any of these events) or from CAMTS Global's accreditation of the Program, except to the extent such claims arise from the wilful misconduct or gross negligence of CAMTS Global.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Amendment to CAMTS Global Policy and Procedure Manual

POLICY: The Board of Directors may amend the CAMTS Global Policy and Procedure Manual at its discretion. Amendments shall be effective when adopted by the Board and posted on CAMTS Global website, <http://www.CAMTSGLOBAL.org>.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Intellectual Property

POLICY: CAMTS Global owns exclusive rights, title, and interest in and to all publications to include but not be limited to accreditation standards, Best Practices, applications, renewals, extensions and restorations and other written and electronically communicated materials published by CAMTS Global.

Governmental or other organisations may be granted limited use of Intellectual Property but under the terms of the agreement with prescribed dates (attached) the organisation will not remove, obscure, or alter CAMTS Global or any third party's copyright notice, trademarks, or other proprietary rights and notices affixed to or contained within.

JOB DESCRIPTIONS	01.00.00
Executive Director	01.01.00
Associate Executive Director	01.01.00A
Site Surveyor	01.02.00
Site Survey Team Leader	01.03.00
Board Member	01.04.00
Board Member Selection Process	01.04.00A
Ad hoc Board Member	01.05.00
Executive Assistant	01.06.00
Accounts Manager	01.07.00

JOB DESCRIPTIONS - 01.00.00

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Executive Director

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Responsible for directing and coordinating activities for the Commission on Accreditation of Medical Transport Systems GLOBAL (CAMTS Global). Serves as a resource person for the Board of Directors, the constituents, related organisations, and the public. Collaborates with other national organisations on air medical issues.

QUALIFICATIONS:

Education and Training: Baccalaureate degree required. Master's degree preferred.

Experience: Minimum of five years in progressively responsible management positions in the medical transport field.

RELATIONSHIP:

Reports to: Chair, Board of Directors and CAMTS Global Board of Directors

Supervises: Office staff of the Commission

OTHER REQUIREMENTS:

1. Establishes effective interpersonal relationships.
2. Demonstrates effective oral and written communication skills.
3. Possesses sound judgment and objectivity in decision making.
4. Possesses proficiency in directing, guiding, and teaching personnel.
5. Demonstrates initiative.
6. Functions independently but capable of interdependent relationships.
7. Experience in financial management of department, business, or similar activity.

DUTIES AND RESPONSIBILITIES

1. Participates in short and long-term planning the goals and mission statement of Commission and Commission activities

2. Prepares annual budget (capital and operating).

3. Oversees all site survey accreditation activities at the direction of the Board of Directors.

4. Coordinates all activities

STANDARD

1. Establishes written goals annually for support the Commission

2. Collaborates with Treasurer of the Board and manages day-to-day income and expenses

Prepares monthly financial statements for the Executive Committee of the Board.

Prepares quarterly reports for the Board.

Devises strategies for cost-effective management of the budget.

3. Directs and coordinates educational and site surveyor-training program.

Directs and coordinates all site survey visits; scheduling to follow-up reports

Responsible for confidentiality of site survey reports.

Acts as a resource to organisations and constituents regarding Commission activities.

Supervises and evaluates office personnel according to policies and procedures of the Commission.

4. Arranges all Board meetings and conference calls of the CAMTS and CAMTS Global Board of Directors

DUTIES AND RESPONSIBILITIES

STANDARD

5. Participates in establishing current practice in medical transport

Acts as a liaison with insurance and legal representatives.

Serves on Executive Committee of the Board of CAMTS and CAMTS Global and assists other committees to complete assignments as required.

6. Maintains effective written verbal communications.

5. Is knowledgeable about standards and criteria measuring compliance with medical transport systems.

6. Conducts regularly scheduled communications with assigned personnel.

Utilizes positive, effective communications in serving as a role model and resource person for the Commission.

Maintains timely communications with the Board.

Maintains effective communications with other accrediting agencies.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Associate Executive Director - Administrative

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Responsible for assisting the Executive Director in coordinating activities for the Commission on Accreditation of Medical Transport Systems (CAMTS) and CAMTS Global. Serves as a resource person for the Executive Director and CAMTS Office Staff. Conducts site visits and consult visits as needed.

QUALIFICATIONS:

Education and Training: Baccalaureate degree required. Master's degree preferred.

Experience: Minimum of five years in progressively responsible management positions in the medical transport field with recent or current experience in a minimum of two of the following categories: administration, medical, aviation, communications or ground medical transport. Two years' experience as a CAMTS Site Surveyor or as a member of CAMTS Board of Directors.

RELATIONSHIP:

Reports to: Executive Director

Supervises: Office staff of the Commission

Salary: Based on qualifications and experience.

OTHER REQUIREMENTS:

1. Establishes effective interpersonal relationships.
2. Demonstrates effective oral and written communication skills.
3. Possesses sound judgment and objectivity in decision-making.
4. Possesses proficiency in directing, guiding, and teaching personnel.
5. Demonstrates initiative and integrity.
6. Functions independently but capable of interdependent relationships.
7. Experience in financial management of department, business, or similar activity.
8. Maintains current knowledge of accreditation standards and policies of CAMTS and CAMTS Global.

DUTIES AND RESPONSIBILITIES:

1. Participates in short and long-term planning to support the goals and mission statement of the Commission and Commission activities and presents a positive image to the public.
2. Collaborates with Executive Director on budget preparation and devising strategies for cost-effective management of the budget.
3. Provides daily oversight and manages financial accounts for income, sales, and expenses.
4. Assists the Executive Director in all site survey accreditation activities including correspondence to programs in various stages of the accreditation process.
5. Conducts site visits and consult visits as appropriate.
6. Assists the Executive Director in pre-reviews and reports for the site surveyors and Board of Directors
7. Assists the Executive Director in collecting background information including ARGUS reports on accreditation applicants.
8. Assists the Executive Director in Board meeting preparations.
9. Acts as a resource to organisations and constituents regarding Commission activities.
10. Supervises and evaluates office personnel according to policies and procedures of the Commission.
11. Prepares and responds to all progress reports that do or do not require Board decisions.
12. Attends all Board meetings of CAMTS (and CAMTS Global when Executive Director not available), Executive Board meetings and conference calls and assists in arranging meeting sites, dates etc.
13. Represents CAMTS and CAMTS Global at marketing and exhibiting opportunities as needed.
14. Assists with content and editing of newsletters and other publications.
15. Complies with CAMTS and CAMTS Global Policies and Procedures.
16. Maintains current knowledge of Accreditation Standards and participates actively in recurrent training and revisions
17. Works to expand the scope of an audit done at site surveys for areas such as the Communication Centres, Maintenance Facilities, and Ground Ambulances.

18. Assists the CAMTS and CAMTS Global Office in developing annual education for site surveyors.
19. Assists in developing structured tools to assist site surveyors during the site visits.
20. Develops future education tools for site surveyors to present during surveys such as (Examples "How to set up a Safety Management System", "Risk Management for Flight Programs", "Clinical Competency Measurement", "Maintaining your Accreditation Status")
21. Assists in grant writing for fundraising to promote research and education.
22. Develops a Risk Management Framework for review of all processes within CAMTS and CAMTS Global along with annual policy review and revisions.
23. Assist with development of an Annual Activity Plan and monthly evaluation of status.
24. Performs other related duties as requested by the CAMTS and CAMTS Global Board.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Site Surveyor

GENERAL DESCRIPTION: Under the direction of the Commission on Accreditation of Medical Transport Systems Board.

BASIC FUNCTION AND RESPONSIBILITIES: This position, while under formal contract, will conduct, document and report a formal medical transport service site survey on behalf of the Commission on Accreditation of Medical Transport Systems (CAMTS) and CAMTS Global.

CHARACTERISTICS DUTIES:

1. Maintains current employment or involvement in medical transport service activities.
2. Complies with CAMTS and CAMTS Global Policies and Procedures.
3. Assists the Executive Director/Associate Executive Director in the coordination of schedules and materials for each assigned site survey.
4. Represents the Commission in a positive manner during all site survey activities.
5. Facilitates a positive relationship with the medical transport service during the site survey by:
 - a. Communicating in a positive, open manner
 - b. Representing a positive image of CAMTS and CAMTS Global by presenting self in a professional manner.
6. Maintains current knowledge of Accreditation Standards and participates actively in recurrent training and revisions of these standards.
7. Documents appropriate and accurate information during all site surveys according to the CAMTS and CAMTS Global Survey Report Guidelines with no personal interpretation of these standards.
8. Completes a comprehensive surveyor report and Standards Compliance Assessment Tool after the site survey within fourteen (14) days to ensure timely completion for the CAMTS and CAMTS GLOBAL board to make accreditation decisions.
9. Assists with the financial aspect of the site survey in order to keep within the budget.
10. Notifies the CAMTS or CAMTS Global board immediately if a potential conflict of interest may be present once assigned to a particular site survey.
11. Complies with policy not to enter into a consultation relationship with any program that he/she has surveyed while under contract with CAMTS or CAMTS Global.

12. Performs duties only as a site surveyor and will not act as a spokesperson for the Commission.
13. Fulfills a Term of Contractual Agreement for two (2) consecutive years.
14. Performs other related duties as requested by the CAMTS or CAMTS Global Board.

MINIMUM QUALIFICATIONS:

1. Four (4) years of air medical experience and currently employed with an air medical service /ground critical care **OR** recent experience (within four (4) years), and currently involved in air medical or ground interfacility service activities.
2. Preferred experience in two (2) of the three (3) following areas of expertise: *Must have well-rounded experience or broad knowledge associated with managing a medical transport service.*
 - a. Aviation
 - b. Administrative
 - c. Medical transport
3. Effective communication/interpersonal skills to interface with all services.
4. Must be available to conduct a minimum of two (2) surveys per year pending available site surveys, in order to maintain survey skills.
5. Written permission from supervisory authority (as appropriate) of the primary employer for time off as surveyor.
6. Successful completion of the CAMTS or CAMTS Global Site Surveyor Training Program.

TITLE: Site Surveyor Team Leader

GENERAL DESCRIPTION: This position, while under formal contract as site surveyor will fulfil the site surveyor role, assist the Executive Director/Associate Executive Director in coordination of site survey activities, facilitate the activities and discussions, and be a resource to other surveyors during site visits.

CHARACTERISTIC DUTIES:

1. Meets all requirements as a site surveyor.
2. Establishes and maintains communication with the CAMTS Executive Assistant and the administrator of the program being surveyed to arrange specific details and schedules for the site visit.
3. Maintains communication with assigned site surveyors on specific details of the assigned survey with the assistance of the CAMTS Executive Assistant.
4. Serves as the moderator and facilitator for discussions during the opening and closing conferences in order to provide a nGlobaltral environment to clarify issues and questions.
5. Assists the Executive Director/Associate Executive Director in keeping the site survey costs to a minimum.
6. Completes a site surveyor performance evaluation for each new surveyor to be forwarded to the Site Surveyor Selection Committee.
7. Acts as a resource person for the other site surveyors during a survey.
8. Completes a Standards Compliance Assessment Tool after each survey.

MINIMUM QUALIFICATIONS:

- Must have successfully completed and reported on a minimum of two (2) site surveys.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Board Member

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Representing a specific member organisation, a board member is responsible for setting the direction of the Commission; developing and approving accreditation standards and policies, serving on committees, and contributing to accreditation decisions. Three Board Members from the CAMTS Board in the U.S. will serve on the CAMTS Global Board along with two CAMTS Global Board members initially but expanded as we continue to evaluate.

REPRESENTATIONS: Member organisations will appoint a representative and support attendance at the required board meetings.

BACKGROUND AND EXPERIENCE: Board members must have recent or current experience with medical transports in a minimum of two of the following categories: administration, medical, aviation, communications, or ground medical transport.

OTHER REQUIREMENTS:

1. Establishes effective interpersonal relationships.
2. Demonstrates effective oral and written communication skills.
3. Possesses sound judgment and objectivity in decisions making.
4. Possesses proficiency in directing and guiding organisational business.
5. Demonstrates initiative and integrity.
6. Functions independently but capable of interdependent relationships.
7. Demonstrates knowledge in financial planning.
8. Able to communicate in English both in oral and written communications.
9. Maintains confidentiality of all materials reviewed and of all accreditation deliberations.

DUTIES AND RESPONSIBILITIES:

1. Ability to attend or participate electronically in 3 board meetings per year.
2. Upholds the mission and policies of the Commission and presents a positive image to the public.
3. Participates in short and long-term planning of the Commission.
4. Establishes and revises policies of the Commission.
5. Approves annual budget (capital and operating) and devises strategies for cost-effective management of the budget.
6. Reviews accreditation materials and actively participates in presenting reports and recommendations and voting on accreditation actions.
7. Acts as a liaison between member organisations and the Commission and assures two-way communications.
8. Actively serves on a committee and completes activities as required.
9. Participates in establishing current practice in medical transport systems and actively participates in revising and approving accreditation standards.
10. Utilizes positive, effective communications in serving as a role model and resource person for the Commission.
11. Contributes to the planning and provision of site surveyor education and other education programs and workshops offered by the Commission.

SUBJECT: Board Member Selection Process

POLICY: Each Board member represents a specific member organisation of the Commission. This is an unpaid position but requires an individual's commitment and support to accomplish the tasks of the Board in reviewing applicants for accreditation and other business related duties (see position description 01.04.00). Board members are not employees of CAMTS or CAMTS Global. When a member organisation needs to fill a CAMTS Global Board position, the following guidelines apply:

GUIDELINES:

1. The outgoing Board member, the member organisation or a CAMTS or CAMTS Global Board member may recommend candidates.
2. The member organisation is responsible for proposing possible replacement(s).
3. The CAMTS or CAMTS Global Executive Board will interview the potential replacement(s) in person or by video conferencing.
4. A new representative will be approved by the Executive Board. This will be communicated to the member organisation for its acceptance and approval process. An agreement will be signed by the responsible authority of the member organisation, as well as the new Board member and an official representative of CAMTS or CAMTS Global.
5. New Board member will complete and sign a conflict of interest statement disclosing any actual or potential conflicts.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Ad Hoc Board Member

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Representing no specific organisation, an ad hoc board member is appointed to serve at the discretion of the Board depending on the needs of the Commission at the time of appointment. The ad hoc Board member is a non-voting position with an advisory role to the Board of Directors, based on his or her area of expertise.

QUALIFICATIONS: Member of the public or expert in medical, aviation, ground transport, or related fields.

OTHER REQUIREMENTS:

1. Establishes effective interpersonal relationships.
2. Demonstrates effective oral and written communication skills.
3. Possesses sound judgment and objectivity in decision making.
4. Possesses proficiency in directing and guiding organisational business.
5. Demonstrates initiative and integrity.
6. Able to communicate in English both in oral and written communications.
7. Maintains confidentiality of all materials reviewed and of all accreditation deliberations.

DUTIES AND RESPONSIBILITIES:

1. Ability to attend one to three board meetings per year.
2. Upholds the mission and policies of the Commission and presents a positive image to the public.
3. Assists the Board in short and long-term planning.
4. Assists the Board in revising and creating policies.
5. May serve on or Chair a committee as appropriate.

6. Utilizes positive, effective communications in serving as a role model and resource person for the Commission.
7. Contributes to the planning and provision of site surveyor education and other education programs and workshops offered by the Commission as appropriate.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Executive Assistant

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Responsible for scheduling and coordinating site visits and supporting the Executive Director/Associate Executive Director in day-to-day operations.

QUALIFICATIONS:

Education and Training: High school diploma required. Business degree preferred.

Experience: Computer experience and business experience required.

RELATIONSHIP:

Reports to: Executive Director and Associate Executive Director

Supervises:

OTHER REQUIREMENTS:

1. Demonstrates effective oral and written communication skills.
2. Possesses sound judgment and objectivity in decision-making.
3. Demonstrates initiative.
4. Functions independently but capable of taking direction as needed.
5. Demonstrates appropriate telephone etiquette.
6. Demonstrates sensitivity to competitive nature of medical transport systems.
7. Supports the mission, vision, and values of CAMTS and CAMTS Global.

DUTIES AND RESPONSIBILITIES

1. Answers telephone, takes accurate messages and follow-up in a timely manner
2. Schedules and coordinates site visits:
 - a. Receives PIFs and downloads into Dropbox, ensuring scoring is completed by the Program
 - b. Tracks signed agreements are received and filed electronically for each PIF submitted
 - c. Researches history of base visits, past site surveyors etc. and coordinates assignment of site surveyors with Executive Director/Associate Executive Director

- d. Completes and distributes logistics forms, conflict forms and confirmation letters
 - e. Assists Executive Director/Associate Executive Director in assigning PreReviewers
 - f. Prepares PowerPoint Board report
 - g. Coordinates with Accounts Administrator when travel is approved
- 3. Schedule and coordinates Consultation visits
- 4. Assists Executive Director and Associate Executive Director in Board meeting preparations
 - a. Emails Conflict of Interest forms to all Board members and maintains cumulative listing
 - b. Communicates with site surveyors and Board members when reports are delinquent
- 5. Post Board meeting
 - a. Assists Executive Director and Assistant Executive Director in proofing accreditation letters and sending by certified mail as directed.
 - b. Emails logo permission forms
 - c. Prepares materials to send to accredited services: certificates, pins, decals
 - d. Coordinates packaging and sending post accreditation materials with accounts administrator (certificates are not shipped until the balance is paid).
- 6. Progress reports
 - a. Maintains current file and alerts programs when progress reports are past due
 - b. Prepares progress report cover sheets for Executive Board and coordinates assignment of progress reports with Executive Director/Associate Executive Director
 - c. Downloads all electronically submitted reports into appropriate file folders

7. Report of Changes

- a. Corresponds with programs as to follow-up required for Class II and Class III changes after Accounts Administrator enters changes into the database

8. Tracks incoming and outgoing mail related to site visits

- a. Refers all billing and payments to accounts administrator
- b. Along with the Accounts Administrator - addresses and mails correspondence, newsletters, and site survey materials. Collects materials and correspondence from the post office box
- c. Stores PIFs after site surveys are completed according to system in process

9. Acts as a resource for accreditation questions and maintains current knowledge of CAMTS and CAMTS Global policies.

10. Shares responsibility for filing with the Accounts Manager.

11. Maintains and updates checklist in areas of responsibility and assists Executive Director/Associate Executive Director and Accounts Manager in duties and deadlines as needed.

12. Assists in preparing and distributing materials for workshops and conferences.

13. Performs all other duties as assigned.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

TITLE: Accounts Manager

Date Issued: 10/29/13

Date Approved: 03/27/14

POSITION SUMMARY OF DUTIES AND RESPONSIBILITIES:

Responsible for business accounts – accounts payable and receivable, maintaining both the website and other social networks and the Access database. Supports the Executive Assistant and Executive Director/Associate Executive Director in day-to-day operations.

QUALIFICATIONS:

Education and Training: High school diploma required. Business Degree preferred

Experience: Computer experience and business experience required.

RELATIONSHIP:

Reports to: Executive Director/ Associate Executive Director

Supervises:

OTHER REQUIREMENTS:

1. Demonstrates effective oral and written communication skills.
2. Possesses sound judgment and objectivity in decision-making.
3. Demonstrates initiative.
4. Functions independently but capable of taking direction as needed.
5. Demonstrates appropriate telephone etiquette.
6. Demonstrates sensitivity to competitive nature of medical transport systems.
7. Demonstrates conservative fiscal values.
8. Supports the mission, vision, and values of CAMTS and CAMTS Global.

DUTIES AND RESPONSIBILITIES

1. Maintains accounts payable and receivable as budgeted in a timely manner
 - a. Works with corporate accounting firm to maintain according to non-profit corporation regulations including the filing of taxes, insurances etc.

- b. Prepares and tracks invoices for sales.
 - c. Receives and tracks all payments due and alerts Executive Director/Associate Executive Director for unusual or overdue statements that are not reflected accordingly in the budget
 - d. Checks all expenses received from Board and Site Surveyors for accuracy and receipts prior to reimbursing. Mails reimbursement payments in a timely manner
 - e. Prepares and sends invoices for site visits, consultations, and Report of Changes according to established policies
 - f. Downloads PayPal purchases and reconciles income accordingly
- 2. Maintains the budget based on daily, monthly and fiscal year accounting principles
 - a. Prepares monthly reports as directed by Executive Director and distributes to Treasurer of the Board, Executive Director/Associate Executive Director
 - b. Maintains chart of accounts and is knowledgeable about amounts appropriated to each line item
 - c. Assists the Executive Director/Associate Executive Director in preparing the budget for the next fiscal year
- 3. Tracks incoming and outgoing mail.
- 4. Maintains the Access database
 - a. Ensures all files are current and program information is correct
 - b. Receives all Report of Changes, making the appropriate updates in the database, preparing, and sending invoices for Class II and Class III changes. After entering changes in the database and preparing an invoice, Class II and Class III changes will be forwarded to the Executive Assistant who will provide follow-up with the program.
 - c. Keeps current mailing lists.
 - d. Maintains confidentiality of data entered from programs and prepares queries as requested.
- 5. Maintains and orders stock of office supplies, marketing materials, sales items, and give-away items.

6. Maintains an accurate filing system and shares responsibility for filing with the Executive Assistant.
7. Maintains and updates the Website, Facebook, and other social media accounts
8. Maintains current knowledge of CAMTS and CAMTS Global policies.
9. Maintains and updates checklist in areas of responsibility and assists Executive Director/Associate Executive Director/Associate Executive Director and Executive Assistant in duties and deadlines as needed.
10. Assists Executive Assistant in downloading PIFs when received.
11. Assists in preparing and distributing materials for workshops and conferences.
12. Performs all other duties as assigned.

SITE SURVEYOR POLICIES	02.00.00
Eligibility Criteria	02.01.00
Site Surveyor Selection	02.02.00
Surveyor Selection Committee	02.03.00
Site Surveyor Training Program	02.04.00
Utilization of Site Surveyors	02.05.00
Term of Agreement	02.06.00
Conflict of Interest	02.07.00
Site Surveyor Confidentiality Policy and Statement	02.08.00
Observer Confidentiality Policy and Statement	02.08.00B
Site Surveyor Evaluation	02.09.00
Surveyor Status	02.10.00
Image of Site Surveyor	02.11.00
Site Surveyor Reimbursement	02.12.00
Site Surveyor Materials	02.13.00

SITE SURVEYOR POLICIES - 02.00.00

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

02.01.00 (012216)

SUBJECT: Eligibility Criteria for Site Surveyor Applicant

POLICY: To be eligible as a site surveyor, the individual must meet the requirements set forth in Policy 01.02.00.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Selection Process

POLICY: Site surveyors will be selected according to the following guidelines:

GUIDELINES:

A. The CAMTS Global board will announce the requests for site surveyors to member organisations and on the website.

1. Requests for site surveyor applicants will be ongoing based on demand and training program scheduling.

B. Applicants respond by deadline and must meet criteria in order to be considered for a site surveyor interview and position. Application materials required will include:

1. Standard application.
2. Letter of interest from applicant.
3. Copy of resume or curriculum vitae.
4. Two letters of recommendation (addressing interpersonal skills, professionalism, and areas of expertise).
5. Letter of permission from primary employer.

C. CAMTS Executive Director and Associate Executive Director will select qualified applicants who meet the criteria and formulate a list of all qualified applicants to be interviewed during the annual Air Medical Transport Conference or by telephone interview by the Surveyor Selection Committee &/or Board Members.

D. CAMTS Office will arrange for the interviews during and after the annual conference.

E. CAMTS Executive Director, Associate Executive Director, and Surveyor Selection Committee will select the qualified applicants who were interviewed and present the potential Site Surveyors to the Board of Directors depending on:

1. Total number of surveyors required.

F. Term of Agreement (reference "Site Surveyor Agreement") for a site surveyor will be one year. The site surveyor may sign on annually as long as he/she continues to meet the criteria and quality of work required by the surveyor through the performance evaluations.

G. The CAMTS Office will notify the site surveyors of their appointment and will send the information regarding the Site Surveyor Training Program.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Selection Committee

POLICY: The Site Surveyor Selection Committee of the CAMTS Global board of directors will function according to the following guidelines:

GUIDELINES:

A. Committee works directly with the Executive Director/Associate Executive Director and the Chair of the Committee.

B. Committee will consist of two to three members of the CAMTS and CAMTS Global Board of Directors.

C. Committee Responsibilities:

1. Review each Site Surveyor application by:

- a. Review each applicant's packet - (must meet criteria and submit all required materials.)
- b. Conduct reference checks.
- c. Interview potential applicants during the annual Air Medical Transport Conference in person or by telephone interview.
- d. Formulate and present a complete, initial list of potential site surveyors to the Board of Directors for approval.

D. Committee will participate in evaluating specific issues regarding site surveyors.

E. Committee will participate in identifying future site surveyor needs.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Training Program

POLICY: Site surveyor will be required to complete an initial training program according to the following guidelines and consisting of the outline below:

GUIDELINES:

A. Individual applicants selected for the training program will be scheduled by the CAMTS office.

B. Travel and daily expenses for the training will be paid by the Commission as outlined by policy. The site surveyors will need the support of their employers and will need to volunteer their time to attend the training program (unless individual program chooses to provide financial support for their time).

C. There will be a two-and-a-half (2 1/2) to three (3) day training program using CAMTS Site Surveyor Training Manual.

D. The training program will consist of the following outline:

1. Introduction to CAMTS and CAMTS Global/An Overview.
2. History of CAMTS and CAMTS Global.
3. Mission Statement/Goals.
4. Purpose of Accreditation.
5. Objectives of Training Program and Schedule
6. Review of Policies and Procedures of CAMTS and CAMTS Global.
7. Criteria for Site Surveyors.
8. CAMTS and CAMTS Global Term of Agreement.
9. Job Description of Site Surveyor/Team Coordinator.
10. Review of Site Survey Process.
11. Accreditation Decisions.
12. Thorough Review of Accreditation Standards.

13. Review of Summary Report to be documented for the CAMTS and CAMTS Global Board of Directors following a Site Survey.

14. Mock Site Survey/Assignment

15. Evaluation of Site Surveyor Training Program

E. Training program will be located in a central location for easy access (busy airport hub).

F. Selected board members and other persons invited by the board will provide training.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Utilization of Site Surveyors

POLICY: Site Surveyors will be assigned by the CAMTS Office in consultation with the Executive Director, Associate Executive Director, and/or Site Surveyor Selection Committee Chair when needed. Assignments to conduct site surveys will be based on the following guidelines:

GUIDELINES:

A. Availability of Site Surveyor

B. Geographic location - will assign site surveyors based on location. In order to avoid conflict of interest issues, the surveyor must currently be from another state (or country) and also from outside the service area (pertains to service areas bordering multiple state lines or a major metropolitan service area covering more than one (1) state or country). (Service area may be defined as 150 miles radius for rotor-wing and ground interfacility services and 300-500 miles radius from base of operation for fixed-wing services).

C. Pilot and maintenance site surveyors who are currently employees of Part 135 Operators (who provide air medical services) or other Authority Having Jurisdiction (AHJ) will not be scheduled to visit other programs that are serviced or provided by their employer.

D. Size or complexity of program

E. Organisational structure/uniqueness (type of service - vendor vs. 135 air carrier certificate or AHJ, FW vs. RW, G, hospital-based, public safety, neonatal transport, satellite bases).

F. Material and data identified in the Program Information Forms (PIF) - to identify priority issues/concerns to be reviewed per board meeting and during site survey.

1. Pre-reviews of the PIF will identify areas that require special attention, e.g., aviation safety, to help make site surveyor assignments specific to that need while another survey area may require a more general review.

G. Specific Board of Directors' expertise may be requested in the pre-review of the PIF.

H. Site Surveyors must complete a minimum of one (1) survey per year, pending available site surveys in order to maintain a high, current level of survey skills and involvement. If the site surveyor is unavailable for a year or more or CAMTS or CAMTS Global is unable to use the site surveyor for that period of time (no available surveys), the site surveyor may be required to attend another training program.

I. Site surveyors will be selected as far in advance as possible.

1. The medical transport program will be notified (as soon as possible) of the name(s) of the site surveyor(s). The specific arrangements on exact dates will be made between the local Program Director, Site Surveyor(s), and the CAMTS Office. Names and backgrounds of potential site surveyors are approved by the program in order to determine potential conflicts of interest before a site surveyor is assigned.
2. Additionally, the program has the right to request a change in the surveyor(s) assigned stating the reasons for their request provided the request to change is made in writing within five (5) working days of receipt of the notification of site team members. Upon review of the request for change in surveyor(s), the Executive Director/Associate Executive Director will attempt to rearrange the schedule accordingly.

SUBJECT: Site Surveyor Term of Agreement

POLICY: Selected Site Surveyors are required to sign an agreement for a minimum two-year term of commitment with no term limit with CAMTS or CAMTS Global according to the following guidelines:

GUIDELINES:

- A. The site surveyor will continue to meet the eligibility criteria in policy 02.01.00.
- B. The site surveyor will consistently perform the duties and responsibilities listed in the "Site Surveyor Position Description" 01.02.00.
- C. Demonstrate professionalism/confidentiality by complying with the "Image of the Site Surveyor" policy 02.11.00.
- D. The site surveyor will receive favourable site survey evaluations.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Conflict of Interest

POLICY: In order to preclude a potential conflict of interest with site surveyors, the following guidelines will be adhered to:

GUIDELINES:

- A. The site surveyor will not accept an assignment in which he/she has had a previous capacity (employment) in a staff or consultant capacity.
- B. The site surveyor will not accept an assignment to survey any program where the surveyor has special knowledge or personal relationships which could preclude the program from receiving an unbiased evaluation.
- C. The site surveyor will not accept an assignment to conduct a survey in a program of a fellow site surveyor who recently completed a survey at his/her program.
- D. A site surveyor will not be assigned to conduct a survey:
 - 1. In his/her own state.
 - 2. In the same service area bordering multiple states or major metropolitan areas (as previously defined).
- E. The site surveyor will not enter into a consultation relationship with any program for the purpose of assisting a program in completing the CAMTS process unless contracted as a CAMTS consultant or unless assisting his/her own program. The site surveyor will also not enter into a consultative relationship for any purpose with a program which he/she surveyed while under CAMTS or CAMTS Global contract and also until that program has had another survey.
- F. Upon notification, if the surveyor feels that a potential conflict of interest may be present, he/she should contact the CAMTS office immediately.
- G. A CAMTS or CAMTS Global board of director, while serving on the board, may serve as a site surveyor under special circumstances such as a monitoring visit.
- H. Site surveyors will complete and sign a conflict of interest form (see addendum a) and return it to the Executive Assistant prior to reviewing the PIF.
- I. Previous conflicts of interest as listed above *may* continue to be considered a conflict for a time frame of up to five years and will be determined on a case by case basis in discussion with the CAMTS or CAMTS Global office and site surveyor.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Confidentiality Statement

POLICY: Site Surveyors shall comply with CAMTS Confidentiality Policy and Statement, as set forth in Policy 05.09.00.

GUIDELINES:

Site Surveyors shall maintain the confidentiality of all Confidential Information, as defined in Policy 05.09.00, except when permitted or required to disclose such information as provided in Policy 05.09.00.

Site Surveyors are prohibited from disclosing Confidential Information to third parties. This includes, but is not limited, the sharing or disclosure of information acquired during a Site Survey, Supplemental Site Survey, or Monitoring Visit with employees or agents of the Program undergoing the visit.

CAMTS or CAMTS Global may terminate the contract of a Site Surveyor who violates the Confidentiality Policy and Statement.

Site Surveyors shall return all Confidential Information to CAMTS or CAMTS Global following the conclusion of the accreditation process. In the alternative, Site Surveyors may be requested and instructed to destroy the Confidential Information by the Executive Director/Associate Executive Director.

Site Surveyors are not permitted to contact programs they recently visited to express their individual view of the final accreditation decision. If the site surveyor is contacted by a program recently visited, the site surveyor is not permitted to comment on an accreditation decision and must refer all questions and concerns to the CAMTS or CAMTS Global office.

Site Surveyors shall sign the Confidentiality Statement attached hereto and shall submit an original copy of the same to the CAMTS or CAMTS Global Office.

Site Surveyors shall contact the Executive Director/Associate Executive Director if and when he/she receives a request to produce Confidential Information or a request for access to Confidential Information. If a Site Surveyor is served with a subpoena or with a court order, he/she shall forward the subpoena to the Executive Director/Associate Executive Director as soon as practicable.

SITE SURVEYOR CONFIDENTIALITY STATEMENT

The Commission on Accreditation of Medical Transport Systems GLOBAL, a peer review organisation, respects the rights to confidentiality of the medical transport service concerning patient records, dispatch forms, employee records, and information included in the Program Information Form. Each site surveyor involved in a specific review is responsible for maintaining the confidentiality of the information submitted and requested; protecting it against loss, defacement, tampering, access, or use by unauthorized individuals.

Confidential Information: Confidential Information includes, but is not limited to, the following:

- **Patient healthcare information:** All information and records related to the health of a patient prepared by or under the supervision of a healthcare provider, e.g. diagnosis, treatment, prognosis, condition, or other information contained in medical records, photographs, videotapes, or verbal reports. This includes personal information such as patient name, address, phone number, admission and discharge dates, physician's name, family or social information.
- **Employment Information:** Employee address, telephone number, personnel file, job application, performance appraisal, discipline, termination, investigations, compensation and benefits.
- **Business Information:** Confidential business information of a proprietary nature related to the operations, finances, marketing or strategic plans. Proprietary information obtained through verbal or written internal communication is confidential unless it is made public by the service. Such information may include but is not limited to transport statistics, marketing plans, patient/customer feedback, or terms of contracts.
- **Accreditation information:** All materials submitted by a Program in the course of the accreditation process, including but not limited the PIF and addendums to the same, and information accumulated by Site Surveyors during a Site Visit, Supplemental Site Visit, or Monitoring Visit.

I understand that my signature below signifies that I:

- i. Acknowledge my obligation to comply with CAMTS Global's Confidentiality Policy and Statement, as set forth in Policy 05.09.00.
- ii. Acknowledge that my contract with CAMTS Global may be terminated for violation of CAMTS and CAMTS Global's Confidentiality Policy and Statement.
- iii. Acknowledge that I have read and understand Policy 02.08.00 ("Site Surveyor Confidentiality") and Policy 05.09.00 ("Confidentiality Policy and Statement").

Site Surveyor Signature: _____

Date: _____

Print Name: _____

Program #: _____

02.08.00B (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Board Member and Board Observer Confidentiality Statement

POLICY: Board Members who conduct site visits or act as Observers during a site visit shall comply with CAMTS and CAMTS Global's Confidentiality Policy and Statement, as set forth in Policy 05.09.00.

GUIDELINES:

Board Members shall maintain the confidentiality of all Confidential Information, as defined in Policy 05.09.00, except when permitted or required to disclose such information as provided in Policy 05.09.00.

Board Members are prohibited from disclosing Confidential Information to third parties. This includes, but is not limited, the sharing or disclosure of information acquired during a Site Survey, Supplemental Site Survey, or Monitoring Visit with employees or agents of the Program undergoing the visit.

Board Members shall return all Confidential Information to CAMTS and CAMTS Global following the conclusion of the accreditation process. In the alternative, Board members may be requested and instructed to destroy the Confidential Information by the Executive Director.

Board Members shall sign the Confidentiality Statement attached hereto and shall submit an original copy of the same to the CAMTS Office.

Board Members shall contact the Executive Director if and when he/she receives a request to produce Confidential Information or a request for access to Confidential Information. If a Board Member is served with a subpoena or with a court order, he/she shall forward the subpoena to the Executive Director as soon as practicable.

BOARD MEMBER AND BOARD OBSERVER CONFIDENTIALITY STATEMENT

The Commission on Accreditation of Medical Transport Systems GLOBAL, a peer review organisation, respects the rights to confidentiality of the medical transport service concerning patient records, dispatch forms, employee records, and information included in the Program Information Form. Each Board Member involved in a specific review is responsible for maintaining the confidentiality of the information submitted and requested; protecting it against loss, defacement, tampering, access, or use by unauthorized individuals.

Confidential Information: Confidential Information includes, but is not limited to, the following:

- Patient healthcare information: All information and records related to the health of a patient prepared by or under the supervision of a healthcare provider, e.g. diagnosis, treatment, prognosis, condition, or other information contained in medical records, photographs, videotapes, or verbal reports. This includes personal information such as patient name, address, phone number, admission and discharge dates, physician's name, family or social information.
- Employment Information: Employee address, telephone number, personnel file, job application, performance appraisal, discipline, termination, investigations, compensation and benefits.
- Business Information: Confidential business information of a proprietary nature related to the operations, finances, marketing or strategic plans. Proprietary information obtained through verbal or written internal communication is confidential unless it is made public by the service. Such information may include but is not limited to transport statistics, marketing plans, patient/customer feedback, or terms of contracts.
- Accreditation information: All materials submitted by a Program in the course of the accreditation process, including but not limited the PIF and addendums to the same, and information accumulated by Site Surveyors during a Site Visit, Supplemental Site Visit, or Monitoring Visit.

I understand that my signature below signifies that I:

- i. Acknowledge my obligation to comply with CAMTS Confidentiality Policy and Statement, as set forth in Policy 05.09.00.
- ii. Acknowledge that my Board position with CAMTS and CAMTS Global may be terminated for violation of the Confidentiality Policy and Statement.
- iii. Acknowledge that I have read and understand Policy 02.08.00B ("Board Member and Board Observer Confidentiality Policy") and Policy 05.09.00 ("Confidentiality Policy and Statement").

Board Member/Board Observer Signature: _____

Date: _____

Print Name: _____

Program #: _____

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Performance Evaluation

POLICY: The Executive Director, Associate Executive Director, and CAMTS Office Staff will monitor the performance of individual Site Surveyors according to the following guidelines:

GUIDELINES:

A. A Site Surveyor Performance Evaluation will be completed and returned to the CAMTS Office on each site surveyor (in a timely manner) by the medical transport program. The CAMTS Office must receive the Site Survey Performance Evaluation prior to the Board meeting to allow enough time to contact the program to review issues, concerns, or problems with the program's Site Survey. A medical transport program must turn in the evaluations prior to the Board meeting or the Board of Directors will not deliberate on the program. This will be made clear in writing to the medical transport program. All evaluations will be reviewed by the Executive Director or Associate Executive Director and all pertinent information shared with the Site Surveyor Selection Committee and the Site Surveyor.

B. Site Surveyors will receive feedback in order to assist them in improving their survey and communication skills, understanding of Accreditation Standards and survey procedures. The CAMTS Office will send a copy of Site Surveyor Performance Evaluation to the Site Surveyor and call him/her to review the evaluation. The CAMTS Office will follow up using the CAMTS QM process to establish the need for overall education, process change, or development of a new policy.

C. The Executive Director and/or Associate Executive Director will keep the Board of Directors up to date on the general feedback of the evaluations addressing positive comments, concerns, issues, or problems. In addition, the Executive Director/Associate Executive Director will also review a specific Site Surveyor Performance Evaluation with the CAMTS or CAMTS Global Board of Directors, if pertinent to an accreditation outcome prior to making an accreditation recommendation for the medical transport program. (Appendix E)

D. Upon completion of a survey, the Lead Site Surveyor will provide feedback for a new Site Surveyor on their first hands-on site visit.

E. Open communication is encouraged with the CAMTS office in order to make changes when necessary and prevent minor annoyances from becoming major problems.

SUBJECT: Surveyor Status and Progressive Discipline

POLICY: Site Surveyors may be released from a contractual relationship with CAMTS or CAMTS Global under the following guidelines:

GUIDELINES:

A. The independent contractor relationship between the site surveyor and the CAMTS or CAMTS Global Board of Directors may be terminated by either party for the following reasons/conditions:

1. The site surveyor is unable to provide the time commitment of availability for two (2) surveys per year.
2. The site surveyor's decision to leave the medical transport profession and is no longer involved in any capacity.
3. Negative objective evaluations on the site surveyor's performance which is of such a significant or repetitive nature that the site surveyor seems unwilling or unable to change even after the evaluation and feedback process. (See D. below for disciplinary process)
4. The site surveyor breaches the confidential relationship between the CAMTS or CAMTS Global Board of Directors and the medical transport program by sharing privileged information with parties other than CAMTS or CAMTS Global, including other site surveyors, and current medical transport program colleagues, etc.
5. The site surveyor acts as a private consultant regarding accreditation during the term of contractual agreement for the Commission.

B. Significant infractions of policy suggesting the Site Surveyor is disregarding confidentiality/conflict of interest issues or engaging in improper conduct may result in immediate suspension. A final decision of termination is by a majority vote by either the Executive Board via conference call or at a meeting of the Board of Directors, depending on which one comes first.

C. Site Surveyors that are no longer employed in the medical transport profession or who do not participate in medical transport committees or organisations, and do not attend annual site surveyor meetings will be reviewed. He/she may be placed on an "inactive" list after 1 year or will be removed from the Site Surveyor list depending on discussion with the Surveyor and the judgment of the Site Surveyor Selection Committee. On a case by case basis, the Executive Director, Associate Executive Director, and Site Surveyor Selection Committee may decide to allow a current Site Surveyor that just left the profession to accept a job outside of medical transport, to remain a Site Surveyor. This will be reviewed and decided upon each case; based

on how long the individual remained in medical transport (i.e., 15 years, National Organisations), how many years he/she participated as a Site Surveyor (i.e., 10 years), received favourable evaluations and he/she fulfilled all Site Surveyor responsibilities during site surveys.

D. The Disciplinary Process consists of:

1. An initial negative evaluation of a site surveyor may result in discussion, counselling, guidance, additional training, or supervised visit to improve skills.
2. A second negative evaluation of site surveyor will result in further counselling, a written warning, and perhaps probation for a prescribed timeframe of no less than 6 months.
3. A third negative evaluation may result in termination. A final decision of termination is by a majority vote of either the Executive Board via conference call or a meeting of the Board of Directors, depending on which one comes first.

SUBJECT: Image of the Site Surveyor

POLICY: A surveyor must have demonstrated commitment to the principles and future advancement of medical transport systems. The Site Surveyor's interaction with the medical transport program during the survey will reflect directly on the Commission and the accreditation process.

GUIDELINES:

A. The Site Surveyor must demonstrate the following characteristics/attributes during the entire survey:

1. High level of professionalism
2. Confidentiality
3. Objectivity
4. High level of positive interpersonal communication skills
5. Open, warm, and friendly manner; genuineness
6. Initiative
7. Accountability
8. Knowledge Base
9. Moral Integrity
10. Enthusiasm

B. Ultimately, the Site Surveyor represents the Commission and must demonstrate a high level of professionalism and integrity. How the surveyor is perceived by the medical transport program during the course of the survey will affect how CAMTS and CAMTS Global will be perceived in the future.

C. The site surveyor must conduct a thorough evaluation and demonstrate that he/she is there to assist the organisation to identify its strengths and weaknesses in terms of Accreditation Standards. The surveyor must establish him/herself as knowledgeable, yet sensitive to the unique interests, needs, and problems of a particular program. The surveyor must build a climate to facilitate his/her role as a catalyst in helping the medical transport program's staff to understand the relationship between what they are reviewing and the Accreditation Standards.

D. During the site survey, it is important for the surveyor to refrain from referring to their own program in applying the Accreditation Standards with words like: "I think" or "In my program, we..." Phrases like: "We believe", "It is our finding", "I have observed other programs meeting the standard by...." are encouraged instead, in order to emphasize the Commission as the frame of reference, not an isolated program or person.

E. The Site Surveyor may play the role of educator to assist the medical transport program in understanding the Accreditation Standards during the Site Survey. The Surveyor may explain why the standard was implemented and provide examples of evidence of how the program may meet the standard. These examples of evidence may be generic, objective, and unique examples of how other medical transport programs have met compliance with the Accreditation Standards. The Surveyor should not apply subjective interpretations to the Standards.

F. How the Site Surveyor is perceived by all of the individuals at the medical transport program during a site visit will directly reflect the image of the Commission/CAMTS/CAMTS Global Board.

G. Site Surveyors must clearly separate their role as Site Surveyor from other involvements they may have in medical transport services adhering to the following general guidelines:

1. A site surveyor should only identify himself/herself as officially representing the Commission when the Commission has assigned him/her to a site survey or other CAMTS/ CAMTS Global activity.
2. When the site surveyor is functioning in the role of a formal CAMTS/CAMTS Global assignment, there should be no perception that the surveyor is trying to represent or market his/her own consulting capabilities or the products or services of another entity.
3. Questions by the program about a surveyor's credentials should be referred to the Commission.

H. Other activities during a site survey which might be perceived as negative to a proper code of conduct by the Commission might include:

1. Providing detailed descriptions of a service or product.
2. Providing solicited/unsolicited handouts, brochures, or business cards of any kind.
3. Encouraging post-site survey contact regarding any service or product with which the site surveyor is directly or indirectly involved and which would cost the program money to obtain.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Reimbursement (for training, initial, reaccreditation, supplemental, monitoring and consult visits)

POLICY: Site surveyors will be reimbursed according to the following guidelines:

GUIDELINES:

A. Reasonable advance travel, daily room and board incurred directly relating to training programs, site surveys, supplemental, monitoring and consult visits. (First class travel and luxury hotel/meal expenses will not be reimbursed -refer to Policy II., L.) Extra nights' stay at the hotel may be reimbursed (on a case by case basis) if the site surveyor arranges for a Saturday stay-over resulting in substantial savings on the airfare.

B. An honorarium of CHF400 per day on location will be paid to each Site Surveyor for initial and reaccreditation site visits. See Policy 07.05.00 for consultation reimbursement.

C. The Lead Site Surveyor will receive an additional CHF350 for coordinating and facilitating the survey, and completing the Standards Compliance Tool & PowerPoint Board Report. This report must be submitted < or = 14 days. After 14 days, the Lead Site Surveyor receives only CHF100 for that survey report. For supplemental or monitoring visits, the site surveyor will receive CHF100 for completing the report within 14 days of the visit. Consultants are not paid an additional fee for the consultation report.

D. No honorarium will be paid during the Site Surveyor Education Program.

E. A "Travel Day" reimbursement of CHF100 per day must be pre-approved by the CAMTS Global office according to the following guidelines:

1. Travel to the required destination is in such a remote area that the travel requires more than three flight legs to arrive at the survey/main base/administrative office/city unless approved by the CAMTS or CAMTS Global office.
2. Travel to the survey/city/administrative office will be more than 10 hours of travel time.
3. Travel to the survey/city/administrative office not only requires a flight to a city (airport hub), but an additional drive of two hours or more to arrive at the final destination.
4. An emergency necessitates an available site surveyor to assist the Commission to complete a survey departing from a different location.

5. A travel day or additional site visit day will not be paid for the purpose of holding over to complete the Site Surveyor report unless there are unusual circumstances or pre-approved by the CAMTS Global office.
- F. If the site surveyor is conducting back-to-back surveys at the Commission's request, CAMTS Global will provide a travel day reimbursement of CHF250.
- G. Any unusual circumstances regarding travel days and reimbursement will be approved on a case by case basis by the Executive Director or Associate Executive Director. This may be due to weather, delayed or cancelled flights, etc.
- H. Expenses must be submitted within seven (7) days of travel back to home.
- I. Receipts may be original or scanned receipts, submitted electronically provided the submission is legible.
- J. Reimbursement Limitations:
 1. Air travel - Reimbursement is limited to the lowest appropriate rate via the most direct safe route, except under extenuating circumstances. For international travel, requiring more than an 8-hour flight, business class will be required. All travel arrangements must be completed at least fourteen days prior to travel.
 2. Private Auto - If private auto is used, reimbursement will be made under the current federal guidelines for mileage.
 3. Hotel - Reimbursement will be made for reasonable lodging expense (single occupancy rooms, not a suite). If a member of the traveller's family shares a room, the equivalent single occupancy charge should be included in the report for reimbursement. A copy of the hotel statement must accompany the Travel Expense Report. Personal phone calls, room service and movie rentals are not reimbursable.
 4. Meals – There is a CHF50 per day per diem rate paid for each day on site and for travel days if travelling the day before and/or the day after the site visit. This per diem is for meals and tips. The per diem for meals and tips for travel beyond the home continent will be CHF75 per day for U.S. based surveyors and CHF75 per day for travel beyond Global for Globalan based site surveyors.
 5. Taxi - Reimbursements are made for necessary taxi (to and from airport, and hospital/administrative office, and nearby restaurants, for example). Use of courtesy van or multi-passenger transport is required when available.
 6. Telephone – Telephone calls are reimbursed only if applicable to the survey process.
 7. Rental car – Ordinarily, a rental car will be pre-arranged by the travel agent. If a site surveyor wishes to keep a rental car for personal travel before or after the site visit,

the site surveyor is responsible for the daily rate during that time frame.

8. Other - Site surveyors are reimbursed for purchases such as printing of materials, and shipping of materials etc. The Commission is not responsible for "overnight" shipping costs (will pay at the regular rate) if a site surveyor is late in submitting a report unless there were extenuating circumstances or if specifically requested by the Executive Director/Associate Executive Director.
9. Mileage allowance – Mileage charges for travel to and from the home airport are the responsibility of the site surveyor unless the distance is greater than 50 miles one way. Mileage is reimbursed at the current federal re for each mile over 50 miles.

SUBJECT: Site Surveyor Materials

POLICY: Site surveyor will utilize the following materials while conducting a site visit.

GUIDELINES:

A. Site Surveyor Board Report Materials:

1. Standards Compliance Tool Comments and observations (pertinent to specific accreditation standards) will be documented under Site Surveyor Comments in the tool. Site Surveyor will answer all questions under the PreReviewer comments. The Surveyor will also score each standard in each section that applies to the program.
2. Aircraft/Ambulance Checklists - The checklists documenting which aircraft and/or ambulances were checked including the hard medical equipment and other specific items in the aircraft will be completed during the site visit.
3. Site Visit Statement (Miranda) and signed Confidentiality Statement.
4. A digital camera or disposable camera will be used as follows:
 - a. Site Surveyors will use a digital camera or coordinate the purchase and use of a disposable camera.
 - b. Site Surveyors are strongly encouraged to take pictures as needed and avoid identifying logos or program identifiers as much as possible. When processing film, duplicates are made so that each Board Reviewer receives a copy of each picture. If digital pictures, a copy of all pictures are to be sent to the board member reviewing the program. The board members address will be provided by the office as needed. Pictures embedded in the reports may not get through – too large a file. No pictures should include patients.
 - c. Site surveyors are not expected to take pictures of subjects/items that show compliance with the Standards unless there is something so outstanding or unique that it would be of interest to the Board.
 - d. Appropriate subjects/items for taking pictures would include:
 - Subjects/items/issues that are a concern and/or are in direct conflict with Accreditation Standards
 - Subjects/items/issues that may be hard to describe in writing.
 - All pictures taken during the site visit should be included and referenced in the site surveyor report. Please label pictures accordingly such as

the “crew quarters at the airport”.

B. The following documents should be submitted to the Executive Director/Associate Executive Director within fourteen (14) days of the site visit.

1. The Standards Compliance Tool with Site Surveyor comments, answers to questions and highlighted answers and scoring under each set of standards will be sent electronically.
2. Aircraft/Ambulance Checklists for each of the vehicles reviewed.
3. A tape recording of the closing conference or a written summary as directed.
4. Attachments obtained from the program are to be labelled and referenced in the Standards Compliance Tool by a number or letter, in consecutive order with the Standards. Attachments with more than one page should be paper clipped and not stapled together.
5. When processing film, please have duplicates made so that each Board Reviewer receives a copy of each picture. If digital pictures, please send pictures via disc to the board members reviewing the program. All pictures need to be labelled and indexed. The pictures need to be referenced in the Standards Compliance Tool (under Site surveyor comments) by the label or index number.

C. Attachments collected on site are not to be duplicated for site surveyor's personal use. All attachments are to be numbered and referenced in the Standards Compliance Tool.

D. Disposal of Confidential Information:

- Disc copies of the PIF will be destroyed and paper attachments will be shredded AFTER a review and Accreditation Award/Action has been awarded. This may be delayed due to the Appeal Process or Deferred Action so it potentially could take place over several Board meetings or after an Appeal process. The Executive Director or Associate Executive Director will provide the Site Surveyor with guidance on how and when to dispose of the PIF. Due to the Appeal Process timeline, the CAMTS Global Office may request the Site Surveyor to maintain their confidential copies until the final accreditation decision. The original PIF on computer disc will be maintained by the CAMTS Global office.

CAMTS GLOBAL POLICY AND PROCEDURE MANUAL

SITE SURVEY PROCEDURES	03.00.00
Accreditation Eligibility Requirements	03.01.00A
Applying for Accreditation	03.01.00
Site Survey Agenda	03.02.00
Supplemental Site Survey and Monitoring Visit	03.02.00A
Accreditation Program Info Form & PowerPoint Board Reports	03.02.01
Final Accreditation Decision	03.02.02
Multiple Locations	03.03.00
All or None Principle	03.04.00
Medical Escort Services	03.05.00
Accredited Programs that have Accidents, Incidents, or Sentinel Events	03.06.00
Integrity of Information	03.07.00
Public Notification	03.08.00
ARGUS Background Checks	03.09.00
Background Checks on Programs Seeking Accreditation	03.10.00
Listing of Accredited Programs	03.11.00
Safety Culture Survey	03.12.00
Medical Protocol Review	03.13.00

SITE SURVEY PROCEDURES - 03.00.00

03.01.00A (111515)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Accreditation Eligibility Requirements

POLICY: The following medical transport services are eligible to apply for accreditation: Rotorwing and/or fixed wing services; critical care and ALS/BLS ground services and medical escort services. A broker is not eligible for accreditation. (*A broker is defined as an intermediary who arranges medical transport for a fee.*) In addition, the following requirements must be met in order to apply for accreditation.

GUIDELINES:

1. A medical transport service must transport at least 12 patients in the previous 12 months in any specific mode of transport unless the program meets the requirement in another mode and is developing an additional mode of transport at the discretion of the CAMTS Global Board of Directors.
2. A medical escort company is eligible to apply as a stand-alone applicant.
3. A service must be in operation for at least one (1) year before it is eligible to submit a PIF for full accreditation.
4. Two patient care providers are required for ALS or critical care transports.
5. The air transport service must operate under an FAA Part 135 certificate or be operated by an FAA Part 135 certificate holder. If international must operate under the "Authority Having Jurisdiction (AHJ)". However, FAA (Federal Aviation Administration), MRO (Maintenance Repair and Operations), EASA (Globalan Aviation Safety Agency), or TC (Transport Canada) are considered the minimal regulations that all other national regulations are measured against.
6. An air medical service must carry hull insurance for each aircraft operating in the EMS environment and aircraft liability coverage that includes but is not limited to the operational and regulatory environment.
7. A ground ambulance service must carry minimal auto insurance and includes accidental death and disability.

SUBJECT: Applying for Accreditation

POLICY: The following guidelines list the steps to be taken in applying for a site visit.

GUIDELINES:

A. Program submits an initial application and appropriate non-refundable fee, as set forth in Policy 04.05.00, requesting consideration for accreditation to the Executive Director/Associate Executive Director of CAMTS Global. Programs applying for reaccreditation will receive application materials 9-12 months prior to the ending date of their current certification. The completed PIF and base fee must be submitted to the CAMTS Global office 120 days prior to the ending date of the certification.

A PROGRAM MAY APPLY FOR A DUAL ACCREDITATION – CAMTS AND CAMTS Global. FEES ARE FOUND IN Policy 04.05.00

B. Program Information Form (PIF)

1. A Program Information Form is sent to the requesting service (Appendix H) along with a Letter Agreement, Verification of Information, and Photo Use Agreement.
 - a. Agreements listed above must be signed by the senior manager who has the legal authority and submitted to CAMTS Global with the PIF (see Appendix).
 - b. Questions in the PIF are based on the accreditation standards.
2. Completed PIF is returned to the Executive Director/Associate Executive Director of CAMTS Global. (PIF must be completed and returned within one year or program will have to reapply and pay another initial application fee, as set forth in Policy 04.05.00.) The PIF then becomes the property of CAMTS Global.
3. Any significant changes in structure or operation of the program anticipated to occur within a six-month time frame of submitting the PIF should be so noted in the PIF. Also any significant changes or anticipated changes that transpire after the PIF is submitted should be communicated to the Executive Director/Associate Executive Director while the program is awaiting a site visit or accreditation decision. (Reportable changes are listed in Policy 05.12.00.)

C. Pre-Review

1. Pre-review of PIF by the Executive Director or a designee will be conducted prior to scheduling the site visit.
2. Incomplete PIFs (Program is requested to score its compliance with each of the standards and comment if score is below or above 3) or PIFs that do not include

requested attachments may be rejected. The program will be asked to re-submit which may cause delays in scheduling a site visit.

3. Executive Director or designee will review the attachments and place comments in the Standards Compliance Tool in the PreReviewer section and also score each standard. One additional Board Member will conduct an independent review at the Executive Director's or Associate Executive Director's discretion and comment electronically to the site surveyors with a list of questions and points of clarification.

This electronic PIF (that is sent to the site surveyors and Board Reviewer(s)) will include a background summary of the Program's history (including but not limited to pertinent litigation, aviation, insurance and business ownership information retrieved from public records and information received from the public notification procedure, and complaints and concerns about the service) and history with CAMTS Global from the Executive Director/Associate Executive Director which will be included throughout the subsequent reports by site surveyors and final board reviewers.

4. Executive Director/Associate Executive Director and CAMTS Global Executive Assistant will collaborate on assigning specific Site Surveyors.
 - a. The number of site surveyors assigned to a site visit will reflect the complexity of the medical transport service.
 - b. Selection of specific site surveyors will follow guidelines under Policy 02.03.02 - Utilization of Site Surveyors.
 - c. Each survey team will have a Site Surveyor Team Leader, who will coordinate the agenda for the site visit with the Program Director/contact person. They may receive assistance in coordinating the agenda from the CAMTS Global Office.

D. Survey Arrangements

1. Arrangements are made directly between the program and the Site Surveyor Team Leader. The office may be contacted as needed to assist with complex logistics. The program will be sent a logistics form to complete for the Lead Surveyor to use as a guide in scheduling the survey.
2. Arrangements include travel arrangements and agenda. The program will be provided with a time frame for the site visit over a six-week time frame in which to expect the site surveyors. The program will have the opportunity to opt out of two of those weeks based on scheduling and personnel needs.
3. Site surveyors will review the PIF, attachments, PreReviewer's comments in the Standards Compliance Tool and the program's Safety Culture Survey prior to the site

CAMTS Global/PPM
visit.

SUBJECT: Site Survey Agenda

POLICY: The following guidelines outline the schedule of events during a site visit:

GUIDELINES:

A. **Opening Conference** - to provide introductions of Program management, review CAMTS Global's site survey process and procedures, read Site Visit Statement, sign Confidentiality Statement, and review and make any necessary changes to the agenda - approximately 30 minutes.

B. **Tour** - (escorted) - It is recognized that there is diversity in transport vehicles and facilities among medical transport services. The intent of the tour is to verify compliance with the program's equipment, aircraft/ground vehicles, and facilities with the accreditation standards. Initial site visits will closely follow the tour and interview schedule. Subsequent site visit "tours" will focus on all changes or new bases/aircraft, unresolved areas of concerns and deficiencies, complaints about a particular office/base, an aircraft/ground vehicle accident from a particular base/operator and complaints from the general public, patients, employees, or State EMS Office.

1. The Lead Site Surveyor will arrange for the survey team to tour the Program's equipment, aircraft/ground ambulance, and facilities. The CAMTS GLOBAL Office will be assisting the Lead Site Surveyor by providing a Program Logistics Form, which will outline where everything is located from the airport, corporate/administrative office, hospital/non-hospital bases, maintenance facility, etc. This includes driving distances and if other transportation is required to get to other cities or states for a base or maintenance facility.

For programs with multiple transport vehicles and/or facilities, the Commission attempts to review ALL sites during the first Accreditation Visit. Due to resources and time, the CAMTS Global office may agree to visit a base by video/pictures, but this is a rare situation. In addition, the Commission may attempt to tour a representation of ground ambulance bases over a broad area with multiple sites. In future reaccreditation visits, a tour will be determined by the CAMTS Global Office using the Program Logistics Form to review the necessary new bases, changes and more, as stated above. Additionally, based on information from the PIF and pre-review, specific aircraft/ground ambulance or facilities should be toured by individual survey team members and included in the survey agenda. **Some bases may be planned ahead with the program and some may be by random choice of the CAMTS executive staff and survey team.** A representative of the medical transport service will accompany the site surveyor(s) on all pre-planned tours and shall accompany the site surveyor(s) on bases that are selected randomly.

2. To assess compliance with accreditation standards, site surveyors will complete the listed mandatory tours below as guided by the CAMTS Global office with the Program Logistics Form, while others will be listed as optional.

Rotorwing & Fixed Wing Hospital and Independent Programs:

Mandatory Tours:

- Corporate Office/Administrative Office of the medical transport program (may be located in a hospital, airport, or off location in an office building or in another city/state)
- Communication Centre (may be located at an airport, hospital, in the Administrative Office, or off location in an office building or in another city/state)
- Director of Operations/Chief Pilot or Operator or Lead Pilot/Aviation Manager
- Office/Aviation Records for all pilots in the medical transport program including Operations Specifications and Pilot Certificates/Pilot Training/Recurrent Training
- Pilot Quarters/Rest Area/Ready Room/Weather System for Flight Planning
- Medical Crew Quarters/Office/Paperwork/Rest Area located at an airport, hospital, in the Administrative Office, or off location in a modular trailer, house, or EMS Station
- Medical Equipment/Medication Storage for Main Office and stock at each base site
- Aircraft located at each base site
- Helipad, Heliport/Tarmac/Parking Area (ground/rooftop/airport security)
- Major Maintenance Hangar facility (may be located at an airport, hospital, at the Administrative Office or off location in a facility in another city/state)
- Director of Maintenance of Operator or Lead Mechanic – Office/Maintenance Records for all aircraft/mechanics at the medical transport program including records for Tools and Parts for all aircraft listed in Operations Specifications
- Maintenance Records/Tools & Parts
- Fuel System Area and Records for QA of Fuel System (may be located at hospital or airport or office). If Fuel QA is conducted by the FBO of an airport, may not be necessary to review records)
- Programs with Specialty Team Providers that are included in the medical transport service, will need to be reviewed during tour (may be located at a different hospital, airport, or location in another city/state) (Will need to review their aircraft, base, crew quarters as above)

Optional Tours:

- Emergency Department of primary receiving hospital
- Medical Control Physicians Emergency Department that provide on-line medical Control on the radios, etc.

Ground Critical Care Transport Service:

Mandatory Tours:

Ambulance Base of operations * If applicable

- Communication Centre (may be located at a hospital, in the Administrative Office, off location in a building office, in a 911 Centre or in another city/state)
- Director/Manager or Supervisor of the Ground Ambulance Service – Office/Records for operating the ambulances in the state(s), employee records, Drivers' training, etc. for all employees at the medical transport program
- Driver/Medical Crew Quarters/Office-paperwork/Rest Area/Ready Room located at a hospital, in the Administrative Office, or building off-site or off location in a modular trailer, house, or EMS/Fire Station
- Medical Equipment/Medication Storage for Main Office and stock at each base site
- Ground Vehicle located at each base site (may choose a representation of vehicles)
- Parking Garage/Area (for security and protection from weather)
- Major Maintenance facility (may be located at the Administrative Office or off location in a facility in another city/state) or a Minor Maintenance facility for the company at the Administrative Office or separate building
- Director of Maintenance, Maintenance Manager/Supervisor who oversees the Maintenance of all vehicles - Office/Maintenance Records for preventative maintenance and unscheduled maintenance, company who conducts the maintenance, etc.
- Fuel System Area and Records for QA of Fuel System (may be located at hospital or airport or office). If Fuel QA is conducted by the FBO of an airport, may not be necessary to review records)
- Programs with Specialty Team Providers that are included in the medical transport service will need to be reviewed during the tour (may be located at a different hospital, airport, or location in another city/state) (Will need to review their aircraft, base, crew quarters as above)

Optional Tours:

- Emergency Department of primary receiving hospital
- Medical Control Physicians Emergency Department that provide on-line medical control on the radios, etc.
- Major Maintenance facility (may be located off-location in a facility in another city/state so will be determined by the CAMTS Global office)

C. Interviews – Interviews with personnel are private and will include only the CAMTS Global Site Surveyor and the interviewee. For example, managers, consultants, and peers are not permitted to observe nor participate in individual interviews. Possible exceptions to this would be if there are Co-Medical Directors or Co-Chair of the Safety Committee. The Program Logistics Form will guide the Lead Site Surveyor to set up the interviews listed on the sheet. The key Management/Administration will be interviewed in their roles and responsibilities and all Committee Chair/Coordinators will be interviewed such as Education, Safety, and Quality Improvement. Names will be tracked on the Program Logistics Form to review changes in program personnel.

1. Site Surveyors will use the Standards Compliance Tool and Checklists developed

from the accreditation standards. The Site Surveyors will use these documents to clarify facts and cross-check conflicting or confusing information.

2. Site Surveyors will cover all accreditation standards but especially focus on the areas highlighted in the PIF and feedback from Pre-Reviewers.
3. Site Surveyors will not be consultants to the medical transport service, but will have a complete understanding of the accreditation standards and as such will be resources for questions pertaining to the standards.
4. Site Surveyors will also review passenger manifests, flight following and dispatch forms, maintenance records and patient care records from recent transports in preparation for questions during the interviews.
5. Interview List: Interviews must be completed in person. In the case of rare emergencies, such as when an interviewee is called on a patient flight or is called in for active duty, or a situation approved by the CAMTS Global Office, interviews may be conducted by telephone. The Commission must be notified of changes from the Base Information Sheet if key Management/Administration is changed prior to the Site Survey.

Mandatory Interviews (as applicable to the type of program):

- Program Administrator/Director of a Non-hospital based or hospital-based program
- Clinical Care Supervisor (Chief Flight Nurse, Chief Flight Paramedic, Chief RRT, etc.)
- Director or Coordinator of Specialty Care Team(s) (Neonatal, Obstetric, Paediatric, Respiratory Therapists)
- Medical Director(s) of the medical transport service
- Communications Centre Director, Manager, or Supervisor
- Director of Operations for Part 135 Operator (RW &/or FW) (*CAMTS Global Office will determine if this is necessary for smaller Operators*)
- Chief Pilot (RW &/or FW) (*CAMTS Global Office will determine if this is necessary for smaller Operators*)
- Aviation Manager/Site Manager/Lead Pilot (RW &/or FW)
- Director of Maintenance for Part 135 Operator (RW &/or FW) (*CAMTS Global Office will determine if this is necessary for smaller Operators*)
- Lead Mechanic/Maintenance Manager (RW &/or FW)
- Ground Transport Service Director/Manager/Supervisor
- Ground Transport Service Maintenance Manager/Supervisor
- Medical Transport Personnel on duty at service: MDs, RNs, EMT-Ps, RRTs, Residents, Specialty Care Team Members (NICU RNs, PICU RNs, RRTs)
- Ambulance driver(s): EMT-Ps and/or EMTs
- Phone interviews of referring prehospital agencies, facilities, or physicians: EMS/Fire Agencies, local referring hospitals & clinics-Charge Nurse or Director of ED, Cath Lab, etc. and referring physicians
- Chair/Coordinator of the Safety Committee, Medical Education Program, and QM
- Upper Administration of the Medical Transport Program (interview with one of the following):
 - Owner of a Medical Transport Company or

- President/CEO from a Corporation or Hospital or
- Director of Nursing or Vice-President that oversees the Transport Program or
- Division of Company/Corporation or in the Hospital that oversees the Program

Optional Interviews: (applicable to type of program):

- Program administrative assistant-secretary
- Member of the hospital or corporate Board of Trustees
- Representative of state EMS Office
- Medical Control Physician(s) covering for on-line Medical Control

D. Closing Conference - Site surveyors and the program management team will meet to review the site survey process and procedures, read the Site Visit Statement, and provide a brief presentation to the program. The Lead Site Surveyor will moderate and facilitate the presentation of findings. Site surveyors will not speculate on possible accreditation decisions (which will be made by the Board of Directors) but will list their findings as strengths and weaknesses related to each cited Accreditation Standard - approximately 1-hour. The closing conference is a brief presentation and is not a time for debate or discussion with the Program.

Solicited and unsolicited information ("Information") received before the site visit about the medical transport service can be used by the board in their accreditation deliberation.

Once an accreditation decision is made by the board, the board may review any new Information which becomes available about the medical transport service to appropriately assess continued compliance with the accreditation standards.

SUBJECT: Supplemental Site Survey & Monitoring Visit

POLICY: The following guidelines outline the schedule of events during a Supplemental Site Survey and Monitoring Visit:

GUIDELINES:

A. Opening Conference - to provide introductions of required Program management, review CAMTS Global process and procedures for this visit, read Site Visit Statement, sign Confidentiality Statement, and review and make any necessary changes to the agenda - approximately 15 minutes. The Supplemental Visit is planned and personnel are aware of the Site Surveyor's visit. New introductions will be made at the Opening Conference.

For a Monitoring Visit – new introductions will be made to each person as they are interviewed. Confidentiality Forms will be completed during the Opening Conference. The Monitoring Visit is unplanned. The Program Director may receive a 24-hours' notice, but in most cases, the Site Surveyor will arrive unannounced with an official CAMTS Global letter on-site stating the purpose of the visit.

B. Tour - (escorted) - It is recognized that there is diversity in transport vehicles and facilities among medical transport services. The intent of the tour is to verify compliance of the program's equipment, aircraft/ground vehicle, and facilities with the accreditation standards. The Supplemental Site Survey and Monitoring Visit tours will primarily focus on the issues from the Board of Directors' letter and response letter from the Program in the case of the Supplemental Visit. The visit will address all changes, new bases/aircraft, unresolved areas of concerns and deficiencies, complaints about a particular office/base and an aircraft/ground vehicle accident from a particular base/operator and complaints from the general public, patients, employees, or State EMS Office.

1. The Site Surveyor will arrange for a tour of the program's equipment, aircraft/ground ambulance and facilities as addressed in the Board of Directors' letter and Program's response letter. The CAMTS Global Office may assist the Site Surveyor by providing a Program Logistics Form of the program for the Supplemental & Monitoring Visit, which will outline where everything is located from the airport, corporate/administrative office, hospital/non-hospital bases, maintenance facility, etc. as needed. This will include driving distances and if other transportation is required to get to other cities or states for a base or maintenance facility.

Supplemental Visit: The Site Surveyor will establish a brief Supplemental Survey agenda that usually takes less than one day.

Monitoring Visit: The Site Surveyor may not have an official agenda to distribute, but will have a plan to request to speak to members of the program management and any transport personnel present for that day. Monitoring Visits are not coordinated in advance and the Site Surveyor will announce the visit by presenting an official CAMTS Global letter on-site or in some cases, the program may be contacted 24 hours in advance of the visit. Bases and facilities toured during a Supplemental Site Survey and Monitoring Visit will be approved by the CAMTS Global Office per policy. A representative of the medical transport service shall accompany the site surveyor on all tours.

2. To assess compliance with accreditation standards based on the Board of Directors' letter and Program's response letter, the Site Surveyor may complete any portion of the listed tours below. The CAMTS Global Office may assist the Site Surveyor and provide a Supplemental/Monitoring Visit Program Logistics Form that will guide him/her to what he/she will need to tour such as a new base.

Rotorwing & Fixed Wing Hospital and Independent Programs:

Tours as Applicable:

- Corporate Office/Administrative Office of the medical transport program (may be located in a hospital, airport or off location in an office building or in another city/state).
- Communication Centre (may be located at an airport, hospital, in the Administrative Office, or off location in an office building or in another city/state).
- Director of Operations/Chief Pilot or Operator or Lead Pilot/Aviation Manager – Office/Aviation Records for all pilots at the medical transport program, including Operations Specifications and Pilot Certificates/Pilot Training.
- Pilot Quarters/Rest Area/Ready Room/Weather System for Flight Planning.
- Medical Crew Quarters/Office/Paperwork/Rest Area located at an airport, hospital, in the Administrative Office, or off location in a modular trailer, house, or EMS Station.
- Medical Equipment/Medication Storage for Main Office and stock at each base site.
- Aircraft located at each base site.
- Helipad/Heliport/Tarmac/Parking Area (ground/rooftop/airport security).
- Major Maintenance Hangar facility (may be located at an airport, hospital, at the Administrative Office or off location in a facility in another city/state).
- Director of Maintenance of Operator or Lead Mechanic – Office/Maintenance Records for all aircraft/mechanics at the medical transport program including records for Tools and Parts for all aircraft listed in Operations Specifications.
- Maintenance Records/Tools & Parts
- Fuel System Area and Records for QA of Fuel System (may be located at hospital or Airport or office). If Fuel QA is conducted by the FBO of an airport, may not be necessary to review records).

- Programs with Specialty Team Providers that are included in the medical transport service will need to be reviewed during tour (may be located at a different hospital, airport, or location in another city/state) (Will need to review their aircraft, base, crew quarters as above).

Ground Critical Care Transport Service:

Tours as Applicable:

- Corporate Office/Administrative Office of the medical transport program (may be located in a hospital, or off location in an office building or in another city/state)
- Communication Centre (may be located at a hospital, in the Administrative Office, off location in a building office, in a 911 Centre or in another city/state)
- Director/Manager or Supervisor of the Ground Ambulance Service – Office/Records for operating the ambulances in the state(s), employee records, Drivers' training, etc. for all employees at the medical transport program
- Driver/Medical Crew Quarters/Office-paperwork/Rest Area/Ready Room located at a hospital, in the Administrative Office, or building off-site or off location in a modular trailer, house, or EMS/Fire Station
- Medical Equipment/Medication Storage for Main Office and stock at each base site
- Ground Vehicle located at each base site (may choose a representation of vehicles)
- Parking Garage/Area (for security and protection from weather)
- Major Maintenance facility (may be located at the Administrative Office or off location in a facility in another city/state) or a Minor Maintenance facility for the company at the Administrative Office or separate building
- Director of Maintenance, Maintenance Manager/Supervisor who oversees the maintenance of all vehicles - Office/Maintenance Records for preventative maintenance and unscheduled maintenance, company who conducts the maintenance, etc.
- Fuel System Area and Records for QA of Fuel System (may be located at hospital, airport, or office). If Fuel QA is conducted by the FBO of an airport, may not be necessary to review records)
- Programs with Specialty Team Providers that are included in the medical transport service, will need to be reviewed during tour (may be located at a different hospital, airport, or location in another city/state) (Will need to review their aircraft, base, crew quarters as above)
- Medical Control Physicians Emergency Department that provide on-line medical Control on the radios, etc.
- Major Maintenance facility (may be located off location in a facility in another city/state so will be determined by the CAMTS Global Office)

C. Interviews – Interviews will be conducted as applicable and will be private including only the CAMTS Global site surveyor and the interviewee. For example, managers, consultants, and peers are not permitted to observe nor participate in individual interviews. Possible exceptions to this would be if there are Co-Medical Directors or Co-Chair of the Safety Committee.

The Program Logistics Form will guide the Site Surveyor to set up the interviews listed on the Supplemental Program Logistics Form. The key Management/Administration will be interviewed in their roles and responsibilities as requested and all Committee Chair/Coordinators to be interviewed such as Education, Safety, and Quality Improvement as requested. The Site Surveyor and the CAMTS Global

Office will establish who the surveyor will interview during the Supplemental Site Survey or Monitoring Visit. Names will be tracked on the Program Logistics Form to review changes in program personnel from survey to supplemental or monitoring visit.

1. Utilizing the Board of Directors' letter and Program's response letter, the Site Surveyor will use the letters to clarify facts and cross check any conflicting information. They will verify all information in the letters to be accurate and will review physical and verbal proof of that information on-site.
2. The Site Surveyor will cover those accreditation standards that are addressed in the Board of Directors' letter and any information highlighted in the Board Report. This may include NTSB reports, or any official complaints to the CAMTS Global Office from the general public, patients, employees, or State EMS Office.
3. Site Surveyors will not be consultants to the medical transport service but will have complete understanding of the accreditation standards and as such will be resources for questions pertaining to the standards.
4. Site Surveyors will also review any additional information on site to verify and clarify the issues. This may include passenger manifests, flight following and dispatch forms, maintenance records, meeting minutes, education and patient care records from recent transports during the interviews.
5. Interview List: Interviews must be completed in person. In cases of rare emergencies, such as an interviewee is called on a patient flight, or is called in for active duty, or a situation approved by the CAMTS Global Office, interviews may be conducted by telephone. The Commission must be notified of changes from the Supplemental Program Logistics Form if key Management/Administration is changed prior to the Supplemental Site Visit.

Monitoring Visit: Since the Monitoring Visit is unplanned and the Site Surveyor will arrive unannounced with an official CAMTS Global letter on-site stating the purpose of the visit, there will be visits when various people may not be available that day. The Site Surveyor will notify the CAMTS Global Office of who is available to interview during a Monitoring Visit if there are multiple personnel and management not available while on-site.

Interviews that may be required for the Supplemental Visit or Monitoring Visit: (as applicable)

- Program Administrator/Director of a Non-hospital based or hospital-based program
- Clinical Care Supervisor (Chief Flight Nurse, Chief Flight Paramedic, Chief RRT, etc.)
- Director or Coordinator of Specialty Care Team(s) (Neonatal, Obstetric, Paediatric, Respiratory Therapists)
- Medical Director(s) of the medical transport service
- Communications Centre Director, Manager, or Supervisor
- Director of Operations for Part 135 Operator (RW &/or FW) *(CAMTS Global Office will determine if this is necessary for smaller Operators)*
- Chief Pilot (RW &/or FW) *(CAMTS Global Office will determine if this is necessary for smaller Operators)*
- Aviation Manager/Site Manager/Lead Pilot (RW &/or FW)
- CAMTS Global

-- Director of Maintenance for Part 135 Operator (RW &/or FW) *(Office will determine if this is necessary for smaller Operators)*
- Lead Mechanic/Maintenance Manager (RW &/or FW)
- Ground Transport Service Director/Manager/Supervisor
- Ground Transport Service Maintenance Manager/Supervisor
- Medical Transport Personnel on duty at service: MDs, RNs, EMT-Ps, RRTs, Residents, Specialty Care Team Members (NICU RNs, PICU RNs, RRTs)
- Ambulance driver(s): EMT-Ps and/or EMTs
- Phone interviews of referring prehospital agencies, facilities, or physicians: EMS/Fire Agencies, local referring hospitals & clinics-Charge Nurse or Director of ED, Cath Lab, etc. and referring physicians
- Chair/Coordinator of the Safety Committee, Medical Education Program, and Quality Improvement Program
- Upper Administration of the Medical Transport Program (interview with one of the following):
 - Owner of a Medical Transport Company or
 - President/CEO from a Corporation or Hospital or
 - Director of Nursing or Vice-President that oversees the Transport Program
 - or
 - Division of Company/Corporation or in the Hospital that oversees the Program

Optional Interviews: (applicable to type of program):

- Program administrative assistant-secretary
- Member of the hospital or corporate Board of Trustees
- Representative of state EMS Office
- Medical Control Physician(s) covering for on-line Medical Control

D. Closing Conference - Site surveyors and the Program management team will meet to review the site survey process and procedures, read the Site Visit Statement, and provide a very brief presentation to the program. The Site Surveyor will moderate and facilitate the presentation of items cited in the Board Letter. The Site Surveyor will not speculate on possible further decisions or accreditation actions/awards (which will be made by the Board of Directors) but will list their findings as resolved or unresolved related to each cited Accreditation Standard approximately 30 minutes. The closing conference is a brief presentation and is not a time for debate or discussion with the program.

E. Solicited and unsolicited information (“Information”) received before the site visit about the medical transport service can be used by the board in their accreditation deliberation.

Once an accreditation decision is made by the board, the board may review any new Information which becomes available about the medical transport service to appropriately assess continued compliance with the accreditation standards.

SUBJECT: Accreditation Program Information Form and PowerPoint Board Reports

POLICY: All reports and correspondence relative to a site visit or accreditation decision are considered confidential and are labelled as such. Board members who have a conflict of interest (as defined by policy 04.03.00) are excluded from all aspects of the accreditation process and resulting reports. The following reports are required according to the guidelines listed:

GUIDELINES:

Pre-Review

A. The Pre-Review will be completed by one Board Member, to be chosen at the Executive Director's or Associate Executive Director's discretion.

1. Executive Director or designee will note in the Standards Compliance Tool comments and questions to include information as described in 03.01.00 (C).

2. The CAMTS Global Office will provide a Program Logistics Form to Site Surveyors to include the following Program Information:

- Location and distances of all bases including Communication Centres and Maintenance Facilities
- Program Lead Contact name and telephone numbers
- Any additional information that would assist in the planning of the survey Board Meeting Date
- Assigned Board Members Names and Address
- Additional interviews required
- Key Management/Administration interviewed including Chair/Coordinators
- Distance of program from Airport

****All other program information can be found on the Program Information Form**

3. Pre-Reviewer – The Executive Director (or designee) will score and highlight the appropriate comments/questions in the Standards Compliance tool which will be transmitted electronically to the Site Surveyors and Board reviewer(s).

4. The assigned Board Member may send a list of questions or comments directly to the Site Surveyor(s).

5. The Executive Director/Associate Executive Director and Executive Assistant will decide on the following recommendations for each Site Survey before the Site Survey is confirmed:

(i) number of Site Surveyors; (ii) length of time for the site visit, if more than 2 days, or how to accomplish such a survey using more than 2 Site Surveyors especially for those programs with multiple sites/bases or located in more than one state; and (iii) special needs on a survey or specific Site Survey qualifications required due to previous concerns/deficiencies as noted by federal authorities (e.g., the FAA or NTSB), state authorities (e.g., the state EMS office), accidents, by CAMTS Global and/or complaints received by the CAMTS Global Office

B. Executive Assistant will send the PIF and pertinent materials electronically or by mail Site Surveyors/Board Reviewer(s).

Site Surveyor Board Report Documents

A. Lead Site Surveyor will complete the Standards Compliance Tool by scoring each standard and commenting in the Site Surveyor comment section. Scores are automatically tabulated and graphed in the “Scoring” section.

B. No Site Surveyor report will include an accreditation recommendation.

C. Lead Site Surveyor will complete the Standards Compliance Tool and PowerPoint Board Report, with appropriate attachments and images, to be submitted to the CAMTS Global office within fourteen (14) days of completion of the Site Survey to ensure timely completion for the CAMTS Global Board to make accreditation decisions.

Final PowerPoint Board Report

A. Single Board Reviewer - A final PowerPoint Board Report will be written and presented to the full Board of Directors.

Two Board Reviewer(s) for New Applicants – Two Board Reviewer(s) will be selected for all new applicants. A Final PowerPoint Board Report will be written and presented to the full Board of Directors. The two Board Reviewer(s) will independently review the information without consultation from outside sources or Board Members. Prior to the Board meeting, after the Board Reviewer formats the report, he/she may discuss the Board Report with the other Board Reviewer to go over the cited Accreditation Standards. Also, when appropriate, the Executive Director/Associate Executive Director or Site Surveyor(s) who conducted the site visit may be consulted.

Notwithstanding the foregoing, if the Quality Management (QM) Committee is conducting a QM Review on the Board’s deliberation of the Board Report, the two Board Reviewers will be notified not to discuss the Board Report prior to the Board Meeting and to present two independent reports. This will occur only for a QM Review of our deliberation and reporting process.

1. The completed Standards Compliance Tool and PowerPoint Board Report will be evaluated.

2. The PowerPoint Board report will include the number of responses versus the number of Safety Culture Surveys emailed to the program, comments from the Safety Culture Surveys and a summary of the medical protocols' critical elements evaluation.
3. Confidentiality will be maintained. The PowerPoint Board Report will not identify the program, operator, or location.

B. The PowerPoint Board Report will not include any reference by name to the Program, city or state, vendor, or other identifiable specifics but will include:

1. Program demographics from Part A of the PIF with number of transports, bases, vehicles, and Incidents/Accidents in past 5 years. This will be completed by the CAMTS Office and placed in the PowerPoint Board Report to the Site Surveyor/Board Reviewer(s).
2. Scoring totals from the Program, the Pre-reviewer, and Site Surveyors will be analysed and discussed by the Board Reviewer after the vote on an accreditation decision. Scores will not be used to determine or partly determine an accreditation decision until the tool has been validated.
3. Areas that will be cited in the Board Report in three categories:
 - Areas of Strength – An area that exceeds the intent of the standard or is an innovative practice as recognized by the Board.
 - Areas of Concern-An area that does not meet the intent of the Accreditation Standard or only partially meets compliance with the Accreditation Standard.
 - Areas of Deficiencies-An area that does not meet compliance with the Accreditation Standard.
4. Each statement in the listings above must be supported by:
 - a. Accreditation Standard(s) number and specific standard or pertinent part of the standard.
 - b. Reason listed as bullet points/Font size should be no smaller than 18
 - c. Site Surveyor's evidence
5. Program Summary will be completed by the Board Reviewer with the Summary of areas that exceeded standards or were not in compliance with the standards along with total scores.
6. A review of the critical elements of currently specified medical protocols will be summarized on one slide (created by the executive staff based on the committee's review)
7. Recommendation will be completed by the Board Reviewer for accreditation to include if Progress Report is needed, in how many months and if it should come back to the full Board or to the Executive Board.

A. Board Reviewer will have this report ready by electronic format via disc, jump drive/flash drive to be presented to the Board in a PowerPoint presentation. The Board Reviewer will include a hard copy of the cover sheet which includes the Program ID#, a recommendation on the accreditation decision and time frame for a progress report if needed and signature of the Board member. Four copies of the Board Report pages except for the initial stats and history will be made for the Executive Director, Associate Executive Director, Chair, and QM Committee Chair.

B. Executive Director/Associate Executive Director will maintain these copies in the CAMTS Global Office and will use the Board Report and notes from the meeting to format the Board Letter to the Program.

Progress Reports

A. Progress Reports may be requested from a Program following an accreditation action or decision, or as a follow-up to a previous Progress Report. These reports will be reviewed by the Executive Director/Associate Executive Director, who will respond to the Program, without involving a Board Member, if the following conditions have been met:

1. Progress Report includes all requested materials and areas of concern and/or deficiency are addressed appropriately. There may be indications for an additional follow-up report, which will be specifically outlined in the response to the Program.
2. Progress Reports and follow-up to initial progress reports are complete and require no additional report or information.

B. Progress Reports will be referred to the Executive Board as follows:

1. Executive Board Member specifically requests that he or she review a follow-up progress report.
2. Executive Director/Associate Executive Director has questions after reviewing a Progress Report or needs clarification from a Board Member.
3. Probational accreditation – initial and follow-up progress reports unless Full Board review is specifically indicated.

C. Progress Reports will be presented to and reviewed by the full Board as follows:

1. Report on a fatal accident
2. Initial Progress Report from a Provisional Accreditation Action
3. Initial Progress Report following Probational Accreditation if indicated.
4. Any progress report that requires full Board approval.
5. Reasonable attempts will be made to use the same Board Members(s) who did the previous review for continuity and history. Board reviewers will receive the following materials in order to prepare the report for the Board.

- a. Program's background information
 - b. The most recent of CAMTS Global Chair's letters to the program. (This will provide Board reviewers with the most recent letter from Chair, Vice Chair, and/or Executive Director/Associate Executive Director citing current concerns/ deficiencies).
 - c. Program's current Progress Report.
7. One or more Board Members will independently review these documents without consultation from outside sources or from other Board Members. Consultation with the Executive Director/Associate Executive Director or Site Surveyor who conducted the site visit is permissible.
8. A generic report will be formatted by the Executive Director/Associate Executive Director and sent to a Board Member presenting the progress report.
- a. The format for areas of concern and/or areas of deficiency should be as follows for each item cited:
 - 1) Number in the order cited in the Chair's letter
 - 2) Rewrite/paraphrase the area of concern or deficiency.
 - 3) Cite the Accreditation Standard.
 - 4) Quote or paraphrase the Program's response.
 - 5) Provide a recommendation – Addressed appropriately or Follow-up required.
 - b. The Board Member will bring two copies of their report to the Board meeting along with presenting a PowerPoint presentation to the Board

Record Retention, Security, and Disposal of Confidential Information

A. The CAMTS Global office will store the original PIF, a copy of the Standards Compliance Tool with attachments and pictures and the signed Board Reviewer Decision forms. The records will be stored in an area that is not accessible to the public.

- 1. A PIF submitted for reaccreditation will also be stored by CAMTS Global so that there is always a current copy of the PIF and a copy of the PIF from the preceding tenure of accreditation.

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2. All correspondence to the Program and from the Program, regardless of format, is to be kept in a confidential file.
3. Copies of the PIF, Standards Compliance Tool and attachments that are sent to Site Surveyors and Board Members will be destroyed after the Board meets to review the materials and as directed by the Executive Director/Associate Executive Director.

The Executive Director/Associate Executive Director will provide the Site Surveyor and Board Member with guidance regarding how and when to dispose of the PIF. Due to the Appeal Process timeline, the CAMTS Global Office may request the Site Surveyor to maintain his/her confidential copies until the Board makes a final accreditation decision. The original PIF on computer disc or thumb drive will be maintained by the CAMTS Global Office.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Final Accreditation Decisions (Accreditation Awards or Board Actions)

POLICY: An accreditation decision will result from a vote by the Board of Directors after presentation by one or more Board Reviewers and discussion by Board Members consistent with generally accepted principles of peer review.

GUIDELINES:

A. Reasonable efforts will be made to locate a substitute for a Board Reviewer who unexpectedly cannot attend the Board meeting so that there are one or more Board Members presenting reports for each accreditation action required.

B. The portion of the Board meeting dealing with accreditation deliberations shall be attended by Board Members without a conflict of interest and by those individuals invited by the Board, at its discretion, to participate in such deliberations. Programs applying for accreditation or reaccreditation are not permitted to attend Board meetings.

C. Notification of accreditation action

1. Executive Director/Associate Executive Director will notify the Program's contact person by phone of the accreditation award or Board action as soon as practicable after the Board meeting.
2. A notification letter will be sent by certified mail within 30 business days of the Board meeting. The notification letter will include:
 - a. The accreditation action;
 - b. Supporting justification by reference to the Accreditation Standards; and
 - c. If necessary, steps outlining future expectations with specific deadline dates.
3. Copies of the notification letter will be shared with the appropriate Site Surveyors along with the site surveyor evaluations submitted by the program.
4. If awarded probational or full accreditation, a certificate of accreditation and logo information will be sent out by the Executive Director/Associate Executive Director.

SUBJECT: Multiple Locations

POLICY: Medical transport services applying for accreditation must include each component of the service according to the following guidelines.

GUIDELINES:

A. Air medical programs that operate more than one aircraft in more than one location, including rotorwing and fixed wing or any combination thereof, need to include all sites and aircraft in the application for accreditation.

1. An air medical service with a ground critical care component is required to include the ground component in the application process if the ground service is part of the air service at the discretion of the Executive Committee of the Board of Directors. Examples of a ground service that is part of the air service include:
 - a. The ground service is under the same management structure within a hospital sponsored system.
 - b. There are staffing overlaps between ground and air transports.
 - c. Personnel wear the same identifying uniforms.
 - d. Personnel, vehicles and aircraft share the same name, logo, etc. identifying the service to the public.
 - e. The ground service is advertised and used to transport critical patients in addition to air service, not only when the aircraft is out of service.

B. A critical care ground transport service not affiliated with an air medical service must include each transport vehicle and base of operations in the application for accreditation.

C. Decisions regarding the number of Site Surveyor days will be determined on a case-by-case basis at the time of application.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: All or None Principle

POLICY: If an air medical program is, in' CAMTS Global's determination, a multiple site program, a multiple aircraft program, a multiple service program, or a group or family of companies operating under a single or substantially similar name or brand, then the accreditation decision for the entire service will be based on review of all sites, aircraft, ground vehicles and companies of the service. A program offering several types of services may, in the sole discretion of CAMTS Global, be considered the same service and must include information concerning all aspects of the service under the guidelines listed below. A critical care ground service that also offers ALS/BLS ground is not required to include the ALS/BLS ground component.

GUIDELINES:

A. Each aircraft, each site, each service, and each company must meet substantial compliance with the Accreditation Standards in order for the service to obtain probational or full accreditation.

B. In any program involving multiple companies, the application must specify appropriate detail for each company, including, without limitation:

1. Any common name used by all aspects of the company?
2. Whether each company is required to file a separate IRS return?
3. Whether there is a crossover between officers and/or board of directors?
4. Are any employees shared between aspects of the company for staffing purposes?
5. Do the services have the same medical director and/or medical protocols?
6. Whether the service has an affiliate (*common ownership in the same general business even though the company is recognized as a separate company legally*) or a subsidiary (*one company that owns stock or a membership interest in another company*)?
7. Are there common benefit plans and payroll systems?
8. Operations Specifications under a common FAA Part 135 or Authority Having Jurisdiction (AHJ) certificate cover each aspect the services.

C. If a ground inter-facility transport service operates ambulances at more than one site, all vehicles and sites must meet substantial compliance with the Accreditation Standards.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Medical Escort Service

POLICY: A Medical Escort Service (defined as a service that provides coordination for travel, medical personnel, and medical equipment to accompany a patient who is stable enough to travel by commercial airlines) may apply for accreditation under the following guidelines.

GUIDELINES:

1. A Medical Escort Service is eligible for accreditation if it operates as an independent service or as part of a medical transport service. A broker who occasionally provides medical personnel to accompany patients on a commercial airline is not considered a dedicated medical escort service and is not eligible for accreditation.
2. A Medical Escort Service that is part of an air service must include the entire service in its application for accreditation according to the guidelines of the “All or None Principle” – 03.04.00.
3. The Medical Escort Service will comply with the policies and procedures of CAMTS Global as applicable to its mission and operational environment.
4. The Medical Escort Service must meet substantial compliance with current Medical Escort Standards of the Commission on Accreditation of Medical Transport Systems in order to achieve accreditation.
5. A separate accreditation fee is applied to Medical Escort Services that are not part of an air or ground transport service. Please refer to Policy 04.05.00.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Accredited Programs that have Accidents, Incidents, or Sentinel Events

POLICY: Accredited medical transport programs that have Accidents or Incidents, as defined by the Federal Aviation Administration, National Transportation Safety Board, and/or Federal Aviation Regulations, or that have Sentinel Events, as defined by The Joint Commission, are required to report the Accident, Incident, or Sentinel Event to CAMTS Global, in writing, according to the following guidelines:

GUIDELINES:

A. For minor incidents or Sentinel Events as defined by The Joint Commission that did not result in injury, death or major damage to the vehicle – reports are to be included as part of the application for reaccreditation in the Demographics section of the PIF.

B. For an air accident as defined by the NTSB or an ambulance accident that involved injuries and/or the ambulance had to be towed or totalled or a sentinel event that resulted in injury or death, the initial report to the Board shall include:

1. Copies of the CONCERN report (if filed), NASA report (if filed), NTSB Preliminary Report, any reports from local law enforcement (e.g., police department, sheriff's department, fire department, etc.), or a Sentinel Event report must be submitted. The Program shall submit to CAMTS Global the NTSB's Probable Cause Report as soon as it becomes available.
2. Completion of the Accident Report included with this policy along with a causation analysis (event investigation or root cause analysis).
3. Fatal air accidents will require a Supplemental Site Survey/Monitoring Visit or Reaccreditation Site Survey within six (6) months of the Accident. The date and time of the supplemental Site Survey/Monitoring Visit shall be at the sole discretion of CAMTS Global and may be an unannounced visit. The Program will immediately be placed Under Review as defined in Policy 04.01.00(c) until the supplemental Site Survey or reaccreditation Site Survey is completed, and findings are reviewed by the Board.

A follow-up report may be requested from the Program to demonstrate how the Program has addressed findings related to the Accident, Incident, or Sentinel Event, including but not limited to a root cause analysis, and addressed issues of loop closure in the QM process.

CAMTS GLOBAL ACCIDENT, INCIDENT and SENTINEL EVENT REPORT

PURPOSE: The purpose of this report is to notify CAMTS Global about an aircraft or ambulance accident within 30 days of their occurrence. Please attach a copy of the CONCERN form (if submitted), NASA report (if filed), Preliminary NTSB Report, and any reports of local law enforcement (e.g., police department, sheriff's department, fire department, etc.) as well as the report sent to the Joint Commission if a Sentinel event occurred. The form is located on our website – www.CAMTSGLOBAL.org

1. Name of the medical transport service _____
2. Aviation or ambulance operator _____
3. Date and time of Accident, Incident, or Sentinel Event: _____
4. Location and circumstances of the accident (not necessary if any of the above-described reports are included): _____
5. Names of personnel and/or patients suffering minor, serious, or fatal injuries.

<u>Name</u>	<u>Position (i.e. RN, pilot or operator, patient)</u>	<u>Type of Injury</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Describe the immediate changes in aircraft or ambulance, new hires and any other operational changes resulting from the Accident, Incident, or Sentinel Event (*on a separate page*).

The undersigned understands and acknowledges that to the extent, the Accident or Sentinel Event involved a fatality, CAMTS Global will require a supplemental Site Survey/Monitoring Visit or Reaccreditation Site Survey. The date and time of said visit is at the sole discretion of CAMTS Global, and may occur at any time within six (6) months of the Accident and may be unannounced. The undersigned further agrees and acknowledges that, in the event of a fatal Accident or Sentinel Event resulting in a death or debilitating injury, the program will immediately be placed Under Review status, as defined in Policy 04.01.00(c), until the supplemental Site Survey/Monitoring Visit/Reaccreditation Site Survey is completed and the findings are reviewed by the Board.

By: _____

Program Name: _____

SUBJECT: Integrity of Information, Good Faith in Accreditation, and Grounds for Disqualification or Board Action

POLICY: The accuracy and completeness of relevant information whether actually used in the accreditation process or not, are essential to the integrity of the accreditation process. Information provided in the PIF and during the accreditation cycle by the medical transport service and used by the Commission for accreditation purposes must be accurate and complete. Such information may be obtained through direct observations or interviews, from documents supplied by the Program, from electronically transmitted information and data, or from other sources as deemed appropriate by the Board.

GUIDELINES:

1. A Program shall not submit false or misleading information to the Commission nor omit any information that is relevant to the accreditation process. Any attempt or apparent effort to do so is a violation of the Program's obligation to engage in the accreditation process in good faith.
2. Any amendments to the original documents submitted by a Program must be properly identified, dated, and accompanied by the original documents.
3. The Commission reserves the right to take whatever action it deems necessary to obtain truthful and complete information upon which to make a reasonable and informed decision.
4. If accreditation is withdrawn on the basis of falsified information, the Program is not eligible to reapply for accreditation for a minimum of one year and a maximum of five years, as determined by the Board of Directors.
5. Good Faith in Accreditation. The Commission requires that each Program seeking accreditation engage in the accreditation process in good faith. The Commission may deny accreditation to any Program failing to participate in good faith in the accreditation process.
 - a. Examples of a Program interfering with good faith participation include, but are not limited to, the following:
 - (1) The Program must not deceive or attempt to deceive the Commission in any aspect of the accreditation process. The Commission believes preparation for accreditation is a positive practice that helps improve the quality of the Program.

One example would be a Program that hires additional personnel before a site survey for the purpose of portraying a full staff, with the intent to terminate the employment immediately after the site visit.

- (2) No Reprisals – The Commission invites open communications from any accredited Program’s staff and recipients of care about compliance with the Accreditation Standards or other issues related to the accreditation process. Any attempt to interfere with such communication shall be deemed an act of bad faith, including, without limitation:
 - (a) any direct or indirect instructions or directions to employees to not cooperate with the accreditation process;
 - (b) threats of termination or other adverse employment consequences or legal action to employees or agents of the Program who communicate with the Commission; or
 - (c) other direct or indirect threats of reprisal against an employee or agent or such person’s family or economic interests.
 - (3) A lack of commitment to Accreditation Standards compliance is also a sign of not participating in good faith.
6. Grounds for Disqualification. A Program’s application may be disqualified, or the Board may take action against a Program as set forth in Policy 04.01.00 (“Other Accreditation Decisions”) in the event the Board concludes that a Program is not fit to provide medical transport services or has failed to act in good faith in the accreditation process. Reasons for denial include, without limitation, the following:
- a. Submission of material information that is false or misleading or the omission of any material information.
 - b. The intentional falsification of any document. Falsification means the fabrication, in whole or in part, of any information provided by an applicant or accredited Program to the Commission. This includes, but is not limited to, redrafting or reformatting of documents.
 - c. Deliberate interference with the accreditation process.
 - d. Clear deficiencies in the financial condition of the Program that would potentially result in the deterioration of safety standards.
7. Expedited Review. The Board (or the Executive Board, if between meetings) may expedite action to suspend and/or withdraw accreditation whenever it reasonably believes that there is credible evidence that the Program has either omitted information or provided falsified information. Relevant government agencies may be notified of the Board action.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Public Notification

POLICY: The Commission requires a Program to inform the public of a scheduled Site Survey, other than a Site Survey following a fatal accident, and invites them to provide the Site Survey team with relevant information. The Program must provide an opportunity for members of the public to participate in a public information interview during a site visit. The public includes but is not limited to: referral and receiving agents; patients and their families; patient advocacy and advocacy groups; and members of the community the program serves.

GUIDELINES:

1. The Commission requires that the Program scheduled for a Site Survey post or make announcements of:
 - a. The Site Survey date;
 - b. The opportunity for a public information interview; and
 - c. How to request an interview
2. Postings shall be made in a format consistent with the one provided by the Commission (see example to follow) and should be posted in public areas where the Program is based (reception areas, airport facilities, hospital reception areas, etc.)
3. Advance Notice: Postings shall be displayed at least 30 days prior to a Site Survey. Notices must remain posted until the Site Survey is completed. Failure to provide advance notice may result in the cancellation of the Site Survey at the Program's expense (see Policy 04.05.00).
4. Informing the community: Reasonable steps must be taken to inform the community of its opportunity for public information interviews at least 30 days before the site visit. Failure to provide notice to the public may result in the cancellation of the Site Survey at the Program's expense (see Policy 04.05.00).

Reasonable Steps include, but are not limited to:

- a. Informing stakeholders that have communicated with the Program in the previous 12 months.
- b. Reaching out to other members of the community (choose at least two of the following strategies):

- c. Public service announcements
 - Classified advertisements (run 2-3 days, 30 days prior to visit)
 - Postings on the Program's Web site
 - Announcements in newsletters.
 - d. Informing individuals who inquire about the Site Survey about the Site Survey date and the public's opportunity to participate.
5. Compliance with the Public Information Interview Policy. The Site Surveyors will review the Program's compliance with the policy outlined above and indicate whether it believes the Program has complied with the policy during the closing conference. Findings will be included in the Site Surveyor's report to the Board.
6. Conducting the Public Information Interview
- a. Handling requests – Individuals requesting a public information interview shall submit their requests and the nature of the information to be provided in writing to the Commission no later than 10 days before a scheduled Site Survey.
 - b. If the request for a public information interview is made to the Program, the Program will forward this request to the Commission within five (5) days of receipt of the request. Individuals making oral requests should be instructed to make requests in writing.
7. Scheduling Interviews – The Program must provide potential public information interview participants with advance notice of not less than 10 days. Prior to the Site Survey, the Commission is responsible for notifying individuals requesting an interview of the time, date, and place of the interview.
8. Interview Eligibility - Individuals whose written requests are untimely will not be interviewed unless time permits. If not interviewed, such individuals may provide a written statement to CAMTS Global.
9. Interview Process – Interviews shall be conducted by the Site Survey team, outside the presence of Program personnel. The Program will provide reasonable accommodations for the interview(s).
10. The interview shall not serve as a debate between the Site Survey team and the Interviewee.

Additionally, the Site Surveyors will not convey conclusions to any interviewee.

PUBLIC NOTICE

The Commission on Accreditation of Medical Transport Systems Global will conduct an accreditation site visit of:

(Name of the program)

on _____

(Site survey dates)

The purpose of the site visit will be to evaluate the program's compliance with nationally established medical transport standards. The site visit results will be used to determine whether, and the conditions under which accreditation should be awarded to the program.

CAMTS Global accreditation standards deal with issues of patient care and safety of the transport environment. Anyone believing that he or she has pertinent or valid information about such matters may request a public information interview with the CAMTS Global site surveyors at the time of the site visit. Information presented at the interview will be carefully evaluated for relevance to the accreditation process. Requests for public information interviews must be made in writing and sent to CAMTS Global no later than 10 business days before the site survey begins. The request should also indicate the nature of the information to be provided during the interview. Such request should be addressed to:

Office of the Executive Director
Commission on Accreditation of Medical Transport Systems Global
Churerstrasse 135
8808 Pfäefflikon
Switzerland

The Commission will acknowledge such written requests in writing or by telephone and will inform the program of the request for an interview. The Commission will, in turn, notify the interviewee of the date, time, and place of the meeting.

This notice is posted in accordance with CAMTS Global requirements and shall not be removed until the site visit is completed.

Date Posted: _____

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Background Checks on Programs Seeking Accreditation

Date Approved: 10/23/04

POLICY: Any or all of the following resources may be checked by the CAMTS Office on Programs that submit a PIF prior to the Site Survey so that it can attempt to clarify or answer questions during the Site Survey or before the Board meeting. This Information may be provided to the Board Reviewer(s) presenting a report to the full Board for an accreditation decision.

GUIDELINES:

1. The Program will maintain insurance that complies with the guidelines in the Accreditation Standards and in CAMTS Insurance Guide reference tool (*see attachment A*) and provide one or more certificates of insurance evidencing such insurance.
2. State or county EMS office or AHJ – questionnaire completed. *See Attachment B*
3. Articles of incorporation or certificate of organisation (for LLCs) and other company documents demonstrating corporate governance of the Program, key employees and other relevant information.
4. Progress or judgments in litigation information submitted in Part A of the PIF.
5. NTSB or pertinent aviation authority reports for the Program.
6. Reports of Sentinel Events.

INSURANCE GUIDE (updated 040211and 040613)

1. Hull insurance for each aircraft operating in the EMS environment and Aircraft Liability with minimums (at the very least) outside of North America as follows the countrywide norms
2. Auto Insurance
 - For private vehicles and ambulances owned by the service – includes accidental death and disability
 - When employees are transported by a non-owned ambulance or vehicle (such as a speciality team), the owner of the ambulance or vehicle should cover these personnel as “additionally insured” on their auto insurance policy.
4. Medical Malpractice
4. Worker’s compensation – per regulatory government guidelines
5. Group life insurance and/or accidental death and disability policy – whether paid for by the employer or employee.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Listing of Accredited Programs on the CAMTS Global website

POLICY: Accredited programs will be listed on the website according to the following guidelines.

GUIDELINES:

1. All Programs listed on the website will be listed with the expiration date of the most current certification period. The Program's corporate office will be listed by city under the appropriate state. Individual satellite bases will not be listed by city but satellite bases located in other states will be listed by the Program name in parentheses.
2. A Program that is appealing an accreditation decision or Board action (see Policy 04.02.00) will be designated as "Action Pending" with an asterisk.
3. A Program under Special Review, as set forth in Policy #04.01.00, will be designated with a # sign.
4. A Program in a Preliminary Denial, as set forth in Policy 04.01.00(C) ("Accreditation Awards"), will be designated as "Preliminary Denial".
5. A Program undergoing review of major changes (see Policy 04.01.00 - "Board Review of Significant Program Changes") or a Program that has had a fatal accident within the past (six) 6 months (see Policy 03.06.00) will be designated as "Under Review."
6. A Program operating under an approved extension (see Policy 04.01.00 - "Requests for Extensions") will be designated as "Approved Extension".

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Safety Culture Survey

POLICY: Program applying for accreditation or accredited programs will be asked to participate in Safety Culture Surveys according to the following guidelines.

GUIDELINES:

1. To measure safety culture intangibles such as values, group dynamics, accountability and professionalism, the Safety Culture Survey (SCS) and the process to distribute and collect the results was developed as follows:
 - a. A SCS is emailed to each employee prior to an upcoming site visit. Employees complete the survey tool online anonymously and results are tabulated automatically through of the software tool. Only the discipline of the respondent is identified in the tool.
 - b. Employees will be strongly encouraged to complete the survey. If CAMTS Global does not receive a return from at least 50% of the employees; there may be a delay in accreditation actions.
 - c. Safety Culture Survey results including comments are shared with the appropriate site surveyors and board reviewers.
 - d. When comments are submitted that would lead to further questions or concerns, the Executive Director/Associate Executive Director will format questions and pass those on to the lead surveyor to add to the interview question list.
 - e. The Program Board reviewer will receive the results of the entire survey tool including comments. The raw data in bar graph format will be shared with the entire Board during the Board reviewer's presentation to the Full Board. Accreditation actions will be based on the Standards Compliance tool, the site surveyor report, pertinent information regarding the program's history and correlative results of the safety culture survey tool.
2. Delivering Feedback to the Program
 - a. The program manager will receive the raw data along with the accreditation letter following each site visit.
 - b. Occasionally, there could be an alarming number of negative comments about a specific issue or discipline that the Board determines needs to be communicated to the manager and his or her supervisor. This can be handled by a phone call or by a face to face meeting depending on the seriousness of the concerns. The purpose is to assist managers in understanding where to focus and how to address the issues and perceptions.

3. Follow-up

- a. Programs may be asked to develop an action plan related to the results of their SCS to be reviewed by the Board.
- b. Program employees may also be asked to perform the SCS again either because there were too few responding or as a follow-up to an action plan.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Medical Protocol Review

POLICY: Medical protocols will be reviewed by the physician-led committee on the Board of Directors according to the following guidelines.

GUIDELINES:

1. Critical Elements for selected protocols will be established by the protocol committee.
2. Medical protocols for each program on the agenda for an upcoming Board meeting will be reviewed by the committee according to the pre-established critical elements.
3. A summary of the reviewed protocols will be included in the Board report and presented to the full board.
4. Suggestions about missing components or areas for improvement found in the protocols review will be included in the formal letter to the program along with the findings and may influence the accreditation decision.
5. Protocols selected for review will be periodically revised by the committee.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Medical Education Approval

POLICY: Alternatives to meeting compliance with the standards regarding education requirements for medical personnel will be reviewed and accepted according to the following guidelines.

GUIDELINES:

Equivalent Courses

CAMTS will accept courses developed by a program as equivalent to established courses (such as NRP or ATLS) but they must be appropriate to the scope of care and must include:

- Measurable learning objectives
- Equivalent number of hours of the course that is being replaced
- Documentation of scores and evaluations at the completion of the course

Equivalent courses used by programs **must** be submitted to the Education Committee for approval at least six 6 months prior to a site survey for initial accreditation applicants or for new courses developed by accredited applicants. Changes to existing approved equivalent courses must be submitted with the PIF for programs applying for reaccreditation.

Certifications

A certification must come from a recognized professional body, for example, the Board of Certification for Emergency Nursing and is supported by an association who is a member of the CAMTS Board. This assures that the exam has been developed from a focused body of knowledge, has validity and reliability, and is administered in a secure environment. (See page 9 of the Education Matrix in the 10th Edition Standards for recommended certification exams)

Simulation

1. Simulators must be dynamic (able to reflect physiologic changes resulting from a performed procedure) and not static. The Simulator must meet the following criteria to demonstrate compliance with intubation skills and/or invasive procedures and/or if used to assess clinical competency. The dynamic changes that the simulator performs are to be controlled by an operator without the user being aware of what is being changed. The results must be critiqued by a trained operator. Simulation for airway competency and invasive skills does not require pre-approval by the CAMTS Education Committee.

A. For airway competency in initial training to meet the 5 live or cadaver intubation requirement:

- Must be capable of real-time changes in difficult airway scenarios two including a surgical airway.
- Must allow realistic pharmacologic/pharmacodynamics responses to drug interventions.

- Must allow for realistic learner interventions in terms of all aspects of airway intervention (i.e. Use of bag-valve mask, oropharyngeal airway, nasal-pharyngeal airway, laryngeal mask airway, endotracheal tube and other rescue airway devices), CPR, pacing and defibrillation.
- Must allow for real-time feedback to the user in regards to actions taken, such as changes in vital signs, cardiac rhythm, breath sounds, pulses, pulse ox, end-tidal CO2 etc.

B. For invasive skills

- HPS is capable of simulating same skills as listed in ATLS or TPATC curriculum and as consistent with the program's mission and scope of care.

C. Simulation Scenarios used instead of ongoing clinical experiences pertinent to the Scope of care must be submitted and approved by the CAMTS Education Committee.

Scenarios and the approval process should be completed prior to a site visit for new applicants. Accredited programs that change their education plan from providing clinical experiences to simulator experiences will use the on-line Report of Change process. If a program is reaccrediting, and the program's scope of care and previously approved scenarios have not changed since the previous tenure of accreditation, a new submission for approval is not required unless specifically contacted by the CAMTS office. If changes have been made to the previous submission when reaccrediting, those changes should be submitted on-line in the Report of Change process and further instructions will be sent back to the program.

Step One

Complete the Gap Analysis to assess your current work with simulation learning (Highlight the number that best reflects your current status)

1	Simulation equipment is available, which can include human patient simulators, task trainers, airway trainers, OB manikins. Scenarios used are basic.
2	Simulation education plan in place with identified learning objectives and appropriate paid time devoted to training. Scenarios used incorporate advanced learning objectives and particularly emphasize high-risk low volume clinical skills.
3	Simulation educator(s) has documented experience and proficiency with the techniques of simulation and is actively involved with the broader educational needs of the program. Documented educator experience can include completion of formal degree programs related to simulation, CE from simulation organisation conferences and educational offerings, and on the job mentorship. Checklist of specific interventions, evaluation, and debriefing are demonstrated.
4	Simulation program is mature in that scenarios include not only clinical points but integrate team training, aviation/ground environment, and communication skills. Well written criteria checklists are documented and a post debriefing is completed. Community outreach is used to bring in EMS, transferring and receiving facilities, and other stakeholders into the scenario development and training.
5	Simulation educators and other stakeholders link educational objectives to specific patient outcomes, track simulation effectiveness, and share their findings by publishing and presenting.

Step Two

Submit the Learning Objectives, Outline, and corresponding Medical Protocol pertinent to the patient's condition for each scenario you are utilizing.

Step Three

Submit a video of an actual simulation training that includes the debriefing session (Choose a scenario pertinent to the high risk low volume patient population served by the program).

This does not need to be professionally filmed – a home video or phone camera is adequate.)

Step Four

Submit the qualifications of the simulation educator(s).

*A simulation video and any changes in instructors or scope of care that results in developing new scenarios must be submitted with the PIF prior to each reaccreditation site visit.

[CAMTS Global POLICY AND PROCEDURE MANUAL](#)

ACCREDITATION ACTIONS AND FEES	04.00.00
Accreditation Actions – Types	04.01.00
Due Process Procedures (Appeals)	04.02.00
Conditions Disqualifying Vote	04.03.00
Ad Hoc Ethics Committee	04.04.00
Accreditation Fees and Charges	04.05.00
Accreditation Standards and Policies Approval Process	04.06.00
Concerns/complaints – follow-up by CAMTS Global	04.07.00

ACCREDITATION ACTIONS - 04.00.00

04.01.00 (012216/101417)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Accreditation Awards and Board Actions

POLICY: The Board of Directors of the Commission on Accreditation of Medical Transport Systems will make decisions regarding accreditation awards or board actions according to the following guidelines:

GUIDELINES:

Medical transport services may apply for accreditation by CAMTS Global at any time. However, a PIF will not be accepted from Programs that have not been in operation for a minimum of one year, are delinquent in payment of fees, or have an outstanding debt with the Commission. CAMTS Global shall be entitled to monitor Programs to ensure that they continue to substantially comply with the Accreditation Standards and comply with the policies and procedures set forth in this manual.

ACCREDITATION AWARDS: *Only the Board of Directors can make Accreditation Award decisions. A Program may advertise itself as "being accredited" and enjoy the privileges of accreditation if accreditation is awarded under sections A or B of the following.*

A. Full Accreditation

The Commission shall grant full accreditation only in the following circumstances:

1. When a Program is in operation for one year (and able to submit one full year of statistics), is applying for accreditation for the first time, demonstrates substantial compliance* with the Accreditation Standards, and has achieved stability such that the Program is no longer considered to be in a developmental stage.
2. When a Program that is currently holding full accreditation has demonstrated upon review that it continues to be in substantial compliance with the Accreditation Standards.
3. When a Program holding probational accreditation has demonstrated that it has changed such that there is demonstrated progress in resolving concerns and deficiencies from the previous accreditation, significant and new contingencies have not been identified and the Program is in substantial compliance with the Accreditation Standards. The maximum interval between reviews for a Program holding full accreditation is three (3) years.
4. When a Program holding a Conditional Accreditation has demonstrated upon review that it continues to be in substantial compliance with the Accreditation Standards.

** Substantial compliance - "A medical transport service demonstrates overall quality of service consistent with the essential elements of the Accreditation Standards in the professional judgment and discretion of the Board. The service demonstrates a steady balance in all dynamic components which comprise their specific Program."*

Progress Reports addressing concerns of the Commission will be submitted by the Program at a time specified by the Commission. If there are persistent deficiencies with a fully accredited Program that are not appropriately addressed in the Progress Reports, the Commission may specify a review prior to the three-year cycle.

B. Probational Accreditation

The Commission shall grant probational accreditation when a Program has held full accreditation, but scheduled review for reaccreditation reveals more concerns and/or deficiencies than cited during the previous tenure of accreditation or has unresolved concerns or deficiencies from the previous tenure of accreditation.

The maximal interval between reviews for a Program holding probational accreditation is two (2) years. A Program cannot hold probational accreditation for more than four (4) consecutive years.

The Commission will monitor the progress of a probationally accredited Program. Progress Reports addressing concerns of the Commission will be submitted by the Program by the specified deadline date of the probational accreditation decision. If there are persistent deficiencies with a Program on probation that are not appropriately addressed in Progress Reports, the Commission may require additional Progress Reports or specify a review prior to the two (2) year cycle or may suspend or withdraw the Program's accreditation. (If the Commission initiates a review prior to the two (2) year cycle due to persistent deficiencies not appropriately addressed in Progress Reports, the Program shall be responsible for Site Surveyor expenses plus a CHF2500 administrative fee.) A Program may request a review prior to the two-year cycle at the regular fee of a Site Survey.

In the review for reaccreditation of a Program holding probational accreditation, the Commission may make the following accreditation decisions or actions:

1. grant full accreditation;
2. withdraw accreditation;
3. repeat probational accreditation (provided that the Program has not had more than two (2) consecutive probational accreditations);
4. preliminary denial of accreditation; or
5. intent to suspend or suspension.

C. Conditional Accreditation

A medical transport service may submit a PIF after it has been in operation for 4 months according to the following guidelines. The program must submit an initial application with a CHF750 fee. A specific PIF application along with selected attachments will be emailed to the program to complete and return for review along with a CHF2500 fee.

A review of the requested attachments will be conducted by two Board members and their

findings will be reviewed by the full Board. As with all deliberations, the program is identified by a six-digit number, not a name or location.

The Commission may make the following accreditation decisions.

1. Conditional accreditation - a one-year accreditation.
2. Non accreditation with the option to resubmit a PIF and reschedule a full site visit after the service has been operational for one year.

*A service receiving Conditional Accreditation is permitted to advertise as conditionally accredited and will receive a letter of conditional status which can be provided to regulators and to managed care companies who require CAMTS – CAMTS Global accreditation.

The program may submit a PIF for full accreditation at its one-year anniversary or when the Conditional Accreditation expires.

D. Dual Accreditation

The Commission may grant a dual accreditation (CAMTS – CAMTS Global) at the request of a program operating in North America and in other continents. Independent medical escort services are also eligible.

Standards of both CAMTS and CAMTS Global apply as appropriate to the service area.

Application fee = \$750. The program will submit a PIF within one year.

Fee due with PIF = \$8000 for single mode, \$9000 for 2 modes and \$10,000 for FW/RW/S. \$3500 for an independent Medical Escort service.

A site visit will be coordinated as appropriate to the scope of service.

Full Accreditation is awarded for three years when the program has demonstrated upon review that it is in substantial compliance with the Accreditation Standards.

Policies regarding accreditation procedures, actions and decisions apply as listed in the CAMTS-CAMTS Global Policy Manual.

E. Accreditation for Special Operations

Standards apply as appropriate to the type of service provided.

Application fee = CHF750

A specific PIF application along with selected attachments will be emailed to the program to complete and return within one year of initial application.

Fee due with PIF = CHF6500

A site visit will be coordinated as appropriate to the scope of service.

Full Accreditation is awarded for three years when the program has demonstrated upon review that it is in substantial compliance with the Accreditation Standards.

Policies regarding accreditation procedures, actions and decisions apply as listed in the CAMTS, CAMTS Global Policy Manual.

F. Preliminary Denial of Accreditation

The Commission may grant preliminary denial of accreditation when a Program has held Full or Probational accreditation, but upon a scheduled review for reaccreditation, the Commission has concerns and/or there are deficiencies that are not in substantial compliance with the accreditation standards but could be resolved or demonstrate significant progress in resolving the concerns and deficiencies within 90 days.

The Program's accreditation shall not be withdrawn, but the Program's name will be designated with an asterisk on the Commission's website indicating Preliminary Denial. The Program has up to ninety (90) days to make corrective actions or demonstrate corrective plans that meet the expectations as outlined by the Board. A Progress Report, Supplemental Site Visit, and/or a Monitoring Visit will be required during the Preliminary Denial of accreditation.

In the review for reaccreditation of a Program holding Preliminary Denial of accreditation, the Commission may make the following accreditation decisions:

1. grant Probational accreditation;
2. grant Full accreditation;
3. withdraw accreditation; or
4. intend to suspend or suspend.

G. Under Special Review by a Board Member

At the time of reaccreditation or during its tenure of Full or Probational Accreditation, a Program that has unresolved and/or disputed contingencies or has a number of changes (that require intense review) agrees to have an appointed Special Master (Board Member) to review progress in addressing the issues in question. A signed agreement specifies a time limit and may require outside consultant reports that will be reviewed by the Special Master with reports to the Full Board. The Program is responsible for all legal fees in drawing up the agreement, all private consulting fees and in addition, will be billed for the Special Master's time as determined by the Board.

When a program is placed Under Special Review – the ending date of certification may change so that accreditation does not exceed 2 years from the start of the current certification period. A program under special review takes on the same stipulation as a probational accreditation in

that no more than two consecutive two-year accreditations are permitted.

OTHER ACCREDITATION DECISIONS – *A Program may not advertise itself as "being accredited" nor enjoy the privileges of accreditation if any of the following decisions are received.*

A. Withhold Accreditation

Accreditation will be withheld when the Commission determines that a Program applying for accreditation for the first time does not substantially comply with the Accreditation Standards and there are serious concerns regarding safety and/or quality of patient care. The Commission will cite those Accreditation Standards with which the Program does not comply. The Program may not submit a PIF for six (6) months following the decision to withhold accreditation unless accreditation was withheld due to the Program's falsifying or omitting information. In that case, the Program is not eligible to submit a PIF for accreditation for a minimum of one (1) year from the date of withdrawal to a maximum of five (5) years, at the sole discretion of the Board.

The effective date of the withhold decision shall be thirty (30) days from the date of written notification to the Program by the Commission.

A. Program may also receive a withhold accreditation under the following conditions:

1. Non-compliance with accreditation actions and procedures - A Program may be in non-compliance with accreditation actions and procedures. The Commission may take appropriate actions to withhold accreditation if the Program does not comply with any of the following actions and procedures:
 - a. To undergo a Site Survey (to include a monitoring or supplemental visit) and Program review;
 - b. To follow directives associated with the accreditation process; or
 - c. Supply the Commission with information needed to appropriately assess compliance with the accreditation standards.
2. Falsification of application information – If, after investigation, it is the opinion of the Board of Directors that an applicant violated Policy 03.07.00 ("Integrity of Information, Good Faith in Accreditation, and Grounds for Disqualification"), accreditation will be withheld. CAMTS Global will withhold the Program's accreditation and initiate an investigation relative to the violation when deemed appropriate by the Board of Directors. Programs that are withdrawn due to falsifying and/or omitting information are not eligible to submit a PIF for accreditation for a minimum of one (1) year from the date of withdrawal and a maximum of five (5) years at the sole discretion of the Board of Directors.

3. Violations of law that could impact a Program's ability to meet the Accreditation Standards - Conviction, finding of fault or uncontested settlement on the part of the service for any violation of local, state, or federal law or regulation may result in immediate suspension, withholding or withdrawing accreditation. The accredited service is required to report any such circumstance to CAMTS Global within thirty (30) days of the conviction, finding of fault or uncontested settlement. Failure to report may result in suspension, withholding accreditation or withdrawal of accreditation. A plea of *nolo contendere* shall be considered the same as finding of fault for the purposes of this policy.
4. Delinquent in payment of fees. - Programs that are delinquent in payment of fees or have an outstanding debt with the Commission are not eligible for review.
5. Unmeritorious Litigation against CAMTS Global. Programs that initiate Litigation against CAMTS Global, but fail to prevail on all of their claims at the conclusion of the Litigation are subject to a withhold decision. (Litigation is defined in 00.03.00, *supra*.)

B. Withdrawal of Accreditation

Accreditation will be withdrawn when the Commission determines that a Program applying for reaccreditation or during the tenure of accreditation does not substantially comply with the Accreditation Standards and there are serious concerns regarding safety and/or quality of patient care. The effective date of the withdrawal decision shall be thirty (30) days from the date of written notification to the Program by the Commission. However, in the event the Program was under suspension at the time of the withdrawal decision, the effective date of the withdrawal of accreditation will be the date the decision was rendered by the Commission. (See Due Process Procedures 04.02.00). If appropriate, relevant government agencies will be notified when accreditation is withdrawn from a Program.

The Program may not submit a PIF for accreditation for six months following withdrawal of accreditation unless accreditation was withheld due to the Program's falsifying or omitting information. In that case, the Program is not eligible to submit a PIF for accreditation for a minimum of 1 year from the date of withdrawal to a maximum of five years at the sole discretion of the Board.

The Commission may withdraw accreditation from a Program under the following conditions:

1. Non-compliance with Accreditation Standards - The Commission may withdraw accreditation of a Program holding full or probational accreditation or has had accreditation suspended/intent to suspend or is Under Preliminary Denial of Accreditation or Under Special Review for failure to be in substantial compliance with the Accreditation Standards and there are serious concerns regarding safety and/or quality of patient care.

2. Non-compliance with accreditation actions and procedures - A Program may be in non-compliance with accreditation actions and procedures. The Commission may take appropriate actions to withdraw accreditation if the Program does not comply with the following actions and procedures:
 - To undergo a Site Survey (to include a monitoring or supplemental site visit) and Program review;
 - To follow directives associated with an accreditation action; or
 - Supply the Commission with information needed to appropriately assess compliance with the accreditation standards.
 - Accreditation may be withdrawn immediately if the program fails to report changes that altered the program significantly as outlined in Policy 05.12.00 Class III changes as determined by the Board.
3. Falsification of application information - If after investigation, it is the opinion of the Board of Directors that an applicant violated Policy 03.07.00 ("Integrity of Information, Good Faith in Accreditation, and Grounds for Disqualification"), withdrawal of accreditation may result. CAMTS Global will initiate an investigation relative to the violation when deemed appropriate by the Board of Directors. This may occur at any time during the Program's tenure of accreditation.
4. Violations of law that could impact a Program's ability to meet the Accreditation Standards - Conviction, finding of fault or uncontested settlement on the part of the service for any violation of local, state, or federal law or regulation may result in the withdrawal of accreditation. The accredited service is required to report any such circumstance to CAMTS Global within 30 days of the conviction, finding of fault or uncontested settlement. Failure to report may result in withdrawal of accreditation. A plea of *nolo contendere* shall be considered the same as finding of fault for the purposes of this policy.
5. Delinquent in payment of fees. - Programs which are delinquent in payment of fees or have an outstanding debt with the Commission.
6. Changes that would alter the service significantly from the service reviewed during accreditation deliberations as determined by the discretion of the Board.
 - a. Some examples of this type of change may include but not be limited to:
 - (1) Changing ownership with changes in operator and aircraft/ambulance
 - (2) Changing FAA Part 135 operator or obtaining its own Part 135 operating certificate
 - (3) Merging with a non-accredited CAMTS Global service
 - (4) Changing the mission statement and/or scope of care or adding a component in the scope of care or mode of transport

- (5) An accident or incident that resulted in substantial damage to the aircraft or vehicle or injuries to personnel or passengers.
- (6) A legal settlement against the service regarding a transport or patient care issue.
- (7) Unreported sentinel events or accidents

C. Voluntary Surrender of Accreditation

A Program may voluntarily surrender its accreditation at any time, except when the Board notifies the Program that there has been a decision to withdraw, suspend, or intend to suspend the Program's accreditation. In such cases, the Program may appeal the decision pursuant to Policy 04.02.00 or Policy 04.01.00(E) ("Other Accreditation Decisions").

If a Program voluntarily surrenders its accreditation, the Program may reapply for accreditation, at the sole discretion of the Board, at any time.

D. Under Review Accreditation

A Program that is accredited may be placed "Under Review" until a course of action is determined by the Board of Directors. Under Review accreditation may occur when the Program has legitimate reasons for delaying a Site Survey for reaccreditation (such as waiting for a new aircraft, changing vendors) or when encompassing a base or another Program that will operate under the same policies and procedures of the accredited service. A Program will automatically be placed

Under Review in the event of a fatal accident. (See Policy 03.06.00(3)) A service with Under Review accreditation may continue to advertise itself as accredited (for the bases included in its current CAMTS Global certification) until the Board makes a further determination.

E. Suspended Accreditation

1. Intent to suspend

A Program that is accredited or is in the process of accreditation decision-making may be placed on Intent to Suspend. The Program will be notified as soon as practicable of the Board's intention to suspend. Within ten (10) business days, the service will be provided with a list of the Board's concerns/allegations. The Program will then have ten (10) business days to respond to the concerns/allegations. Within ten (10) business days of the receipt of the Program's response, the Board (or Executive Board if between meetings) will make a decision regarding an accreditation action that could be:

04.01.00

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- a. not suspend and reinstate accreditation;
- b. deferred action requiring additional information that will expand the time permitted under Intent to Suspend until a further decision is reached;
- c. suspension and require a Progress Report, a Supplemental Site Visit (or both), or conduct a Monitoring Visit within the six (6) month suspension timeframe; or
- d. withdraw accreditation.

The Program is permitted to continue to advertise as accredited while under an Intent to Suspend but this time frame will be considered the due process or appeal period at which time the Program has the opportunity to provide evidence to support its appeal to the Intent to Suspend along with any specific information required by the Board as outlined in the certified letter.

2. Immediate Suspension

Notwithstanding anything to the contrary contained in this Section 04.01.00, the Commission expressly reserves the right to immediately suspend a Program when, in the Commission's judgment and discretion, there exists an imminent safety issue involving patient safety and/or care, pilot and/or crew safety, public safety or safety issues involving the operation and/or maintenance of aircraft. The Program will be notified as soon as practicable of the Board's decision to suspend. Within five (5) business days, the Program will be provided with a list of concerns/allegations. The Program will then have five (5) business days to respond to concerns/allegations. Within ten (10) business days of receipt of the Program's response, the Board (or Executive Board if between meetings) will make a decision regarding an accreditation action. The Board's decision may include:

- a. reinstatement of accreditation;
- b. deferred action requiring additional information during which time the program can advertise as accredited until further action by the Board;
- c. continuation of suspension for up to six (6) months; or
- d. withdrawal of accreditation (See Due Process Procedures 04.02.00).

The program is permitted to continue to advertise as accredited between notification of immediate suspension and the Board's decision following the program's response. This timeframe will be considered the due process or appeal period at which time the program has the opportunity to provide evidence to support its appeal to the Immediate Suspension along with any specific information required by the Board as outlined in the certified letter.

3. Suspension

A service that was notified of Intent to Suspend and then Suspended or an Immediate Suspension not overturned by a program's response is NOT permitted to advertise as accredited while on suspension.

- a. A program may be suspended for up to six months during which time additional progress reports, a supplemental or monitoring visit may be conducted at the Board's discretion.
- b. If the program's certification period expires during the six-month suspension, the Board will require a full reaccreditation site visit if required responses and progress reports are satisfactory.

Depending on the outcome of the Progress Reports, Supplemental or Monitoring visits, or other pertinent information while under suspension and not to exceed the six-month timeframe, the Board may decide to:

- (1) return the Program to its previous tenure of accreditation;
- (2) review a reaccreditation application if current tenure of accreditation expires before the six-month suspension; or
- (3) withdraw accreditation.

4. A service may be suspended for:

- a. unsatisfactory progress report;
- b. unfavourable Supplemental Site Visit, Monitoring Visit or reaccreditation visit; or
- c. other issues as determined by the Board.

5. If appropriate, relevant government agencies will be notified when accreditation is suspended.

BOARD ACTIONS *Either the full Board or the Executive Committee, acting on the full Board's behalf, can make Board Actions decisions. A Program may not advertise itself as "being accredited" nor enjoy privileges of accreditation if a Board Action is received.*

A. Provisional Action

The Commission shall grant a provisional action when a Program has applied for the first time and has deficiencies which are, in the judgment and discretion of the Board, correctable within a six (6) month timeframe but prevent the service from being in substantial compliance with Accreditation Standards.

1. Programs that have major gaps in meeting the Accreditation Standards or demonstrate an imbalance in major components, such as in safety or patient care, are not eligible for a provisional action.

2. The Board of Directors shall outline the areas of concern and deficiencies and require one of the two following courses of action:
 - a. Submit a Progress Report addressing the areas of concern and deficiencies. This Progress Report is due within six (6) months of the provisional action.
 - b. Address the areas of concerns and deficiencies in a Progress Report which may be followed-up by a Supplemental Site Survey at the discretion of the Board. The Progress Report must be submitted within 3 - 6 months of the provisional action. If a Supplemental Site Survey is required, it would be scheduled within thirty (30) days of receiving the Progress Report...
3. A provisional action is temporary and shall not exceed six (6) months. Only two further accreditation decisions can result after the Board reviews the Progress Report and the Site Surveyor's report if a supplemental visit is required.
 - a. Full accreditation will be awarded if concerns and deficiencies are addressed to the Board's satisfaction.
 - b. A withhold action will result if concerns and deficiencies are not corrected within the six (6) months.
4. A Program whose accreditation has been withheld and reapplies for accreditation is eligible for Provisional Action since it is starting over with a new PIF.

B. Deferral Action

The Commission may defer a decision on accreditation. Lack of sufficient information may preclude an informed and reasonable decision. If action is deferred on a Program submitting for reaccreditation, the Program retains its current accreditation status until a final decision is made.

PROGRESS REPORT

The Commission may request a progress report from the Program as a result of a review of that Program or as a response to a complaint. Progress reports may be reviewed by one or two board members.

The Commission will specify the exact information to be provided and include a specific due date when the progress report should be submitted to the Commission. If a progress report is not submitted by the due date, a fine of up to CHF1000 may be levied at the discretion of the Board. A progress report that is past due more than thirty (30) days may result in one of the following actions:

- intent to suspend;
- suspend accreditation;
- preliminary denial;
- deferred accreditation action; or
- withdraw accreditation.

BOARD REVIEW OF SIGNIFICANT PROGRAM CHANGES

Changes in the Program's organisational structure or operations that deviate significantly from those present at the time of application must be reported to CAMTS Global, in writing, within thirty (30) days of the change (*reference Policy # 05.12.00*). CAMTS Global reserves the right to request, receive and review (potentially on-site) information on the impact of these changes in order to determine whether the Program qualifies for continued accreditation. Significant changes may so alter a Program that in the judgment and discretion of the Board, it is the equivalent of a new Program.

If this occurs, a Program must apply for accreditation.

1. Merging with a non-accredited service(s) - If an accredited Program merges with a non-accredited Program or Program(s), the emerging service will be considered an entirely new entity by the Commission and the accreditation certification will be suspended. This action will be effective on the date that the newly merged service begins operations.
 - a. For Programs with more than eighteen (18) months remaining in their certification period:

A Supplemental Survey may be required at the expense of the service to cover the costs of one Site Surveyor, plus the current administrative fee if the service has eighteen (18) months or longer remaining in their accreditation certification period. After the Board has deliberated on the information from the Supplemental Site Survey, the appropriate accreditation action will be determined. A new certification period will begin on the date an accreditation action is decided by the Board.

The service must apply for a Supplemental Survey at least eighteen (18) months before their certification period runs out in order to be eligible for the Supplemental Survey. Also, the Program must notify the Commission within 30 days of the official merger date and complete a PIF within six months of the notification date.
 - b. For Programs with less than eighteen (18) months remaining in the certification period:

A service with less than eighteen (18) months remaining in its certification period is not eligible for a Supplemental Survey but may reapply for accreditation at any time.
 - c. Data collection

Since the Commission requires one year of statistics and the newly merged service may not

have an entire year of statistics, the following alternatives may be accepted:

- Six months of data from the newly merged service.
- Submitting data from each of the merged services for the year prior to the merger.

2. Merging with another accredited service(s)

A service merging with another accredited service shall notify the Commission within 30 days of the effective date of the merger. A questionnaire will be sent to the newly formed service to determine a further course of action. The accreditation certification will be placed Under Review as of the effective date of the merger until the Board determines a further course of action. The Board may do any of the following:

- request an in-depth Progress Report;
- conduct a Supplemental Site Survey; or
- require an application for reaccreditation.

- a. If a Progress Report is required, the date of the certification period will end half-way between the ending dates of the two merged services.
- b. The certification period may also change with a Supplemental Site Survey or a reaccreditation site visit. In such cases, the new certification period will begin on the date the Board makes its accreditation decision.
- c. Data submitted for a reaccreditation site visit will be accepted according to the above guidelines in 5. c.

3. Purchase of an accredited service by another entity (not another medical transport service) such as the aviation vendor who was previously contracted to supply aviation services is considered a Class II change (reference policy 05.12.00). Purchase of an accredited service by other entities will be reviewed by the Executive Board for determination of change in accreditation status.

4. Purchase of an accredited service by a non-accredited service

- a. CAMTS Global accreditation is not transferable. It cannot be sold and cannot be considered part of the purchase. The PIF completed by the previously owned program is not the property of the new company and cannot be duplicated or sent to the new company.
- b. If an accredited Program is purchased by a non-accredited service, the accreditation of the emerging service will be withdrawn (reference page 4, section B. of this policy). This action will be effective on the date that the newly formed service begins operations.

5. Purchase of a non-accredited service by an accredited service

- a. An accredited service that purchases a non-accredited service shall notify the Commission within 30 days of the effective date of the purchase.
- b. The newly formed Program shall be placed Under Review until the new base or site can be reviewed.
- c. The newly formed service shall submit a PIF.
- d. A Supplemental Site Visit will be required. If the service has twelve (12) months or longer remaining on its accreditation certification period, the service must pay the costs of the Site Surveyor(s) plus the current administrative fee. If less than twelve (12) months remain in the accreditation certification period, the newly formed service shall undergo a reaccreditation site visit.

After the Board has deliberated on the information from the Supplemental Site Survey Visit, the appropriate accreditation action will be determined. If the Program is found to be in substantial compliance with the Accreditation Standards, the certification period will revert back to the previous tenure of accreditation and will now include the new component.

While the Program is Under Review, the accredited portion of the service can continue to advertise itself as accredited but must make it clear through advertisements and marketing materials that the recently purchased portion is under review by CAMTS Global and is not accredited. The Program must show proof of appropriate advertising to CAMTS Global. Any false inferences or claims that the newly acquired service is accredited (before official notification of accreditation by the Board) may lead to further action, up to and including withdrawal of accreditation.

6. Purchase of an accredited service by another accredited service

An accredited service that purchases another accredited service shall notify the Commission within 30 days of the effective date of the purchase. A questionnaire will be sent to the service to determine a further course of action. The accreditation certification will be placed Under Review as of the effective date of the purchase until the Board determines a further course of action. The Board may do any of the following:

- request an in-depth Progress Report;
 - conduct a Supplemental Site Survey; or
 - require an application for reaccreditation
- a. If a Progress Report is required, the date of the certification period will end half-way between the ending dates of the two merged services.
 - b. The certification period may also change with a Supplemental Site Survey or a reaccreditation site visit. The new certification period will begin on the date the Board makes its accreditation decision.

7. Opening a new base or adding a new component

- a. A service that opens a new base or adds a component such as fixed wing or rotorwing or ground service shall notify the Commission within 30 days of the effective date of the change. The Board will then determine whether a Progress Report is sufficient or if a Supplemental Site Survey (reference Policy 03.02.00A) is required.
- b. The service's accreditation will be placed Under Review until the Progress Report or Supplemental Site Survey is completed. The Progress Report or Supplemental Site Survey must be completed within six (6) months of CAMTS Global receiving notification.

While the Program is Under Review, the accredited portion of the service may continue to advertise itself as accredited but must make it clear through advertisements and marketing materials that the new component is under review by CAMTS Global and is not accredited. The Program must show proof of appropriate advertising to CAMTS Global. Any false inferences or claims that the newly acquired component is accredited (before official notification of accreditation by the Board) may lead to a suspended accreditation.

- c. Additional Progress Reports may be required if the Board decides that the new component is in substantial compliance with the Accreditation Standards but that further follow-up is needed.
- d. If the Board decides that the new component is not in substantial compliance with the Accreditation Standards, accreditation may be suspended (reference D. in this policy) or withdrawn (in which case the service will be required to reapply for accreditation no sooner than six months from the withdrawal decision).

REQUESTS FOR EXTENSIONS

A medical transport service may request an extension on its one-year application period or its accreditation certification period according to the following guidelines:

1. All requests for extensions must be in writing and must be received by CAMTS Global prior to the expiration date.
2. The Executive Committee of the Board of Directors will utilize its discretion in deciding whether to grant the extension.
3. Extensions shall not exceed six (6) months.
4. If an accredited service is granted an extension, it may continue to advertise itself as

accredited as determined by the Board.

- The certification date will revert back to the end of the previous certification period regardless of the date the Board awards reaccreditation.

SUBJECT: Due Process Procedures (Appealing an Accreditation Decision)

POLICY: Accreditation awards and board actions can be appealed under the following guidelines.

GUIDELINES:

A. A Program will be entitled to appeal an accreditation decision (or Board Action) under the following conditions:

1. The Program shall request an appeal of the accreditation decision in writing within thirty (30) days of written notice of the accreditation decision unless the Board suspends the accreditation, in which event the appeal timeframe is governed by Policy 04.01.00(E). During the appeal process, programs receiving a Preliminary Denial decision or a Withdraw Accreditation (during the 30-day appeal process) or Suspend or Intent to Suspend action (during the time frame outlined in Policy 04.01.00 (E.) will be listed on the CAMTS Global website with an asterisk. The asterisk will be defined as outlined in Policy 03.12.00.

In the written request for appeal, the Program must identify the specific grounds for its appeal. To the extent the Program claims that the accreditation decision was based on incorrect facts, the Program shall submit specific written evidence to be considered in the appeal. Corrections made after the site visit based on the site surveyors' closing comments and/or the list of concerns and deficiencies in the formal notification of accreditation are not considered valid points for appeal since accreditation decisions and actions are based on findings at the time of the site visit.

2. The Executive Committee of the Board of Directors may request additional information from the Program and/or may schedule a follow-up site survey if, in its sole discretion, it determines that such additional information or a follow-up site survey (Supplemental Site Survey) would be helpful to the process. If such additional information or a Supplemental Site Survey is requested, all reasonable expenses associated with such additional efforts, including all reasonable attorney's fees incurred by CAMTS Global in the process, shall be the responsibility of the appealing Program. The CAMTS Global office will provide the Program with an estimate of costs associated with a Supplemental Site Survey if that is required.

Any dispute regarding the amount of fees requested or the payment of such fees shall be submitted to binding arbitration before a mutually acceptable arbitrator, such arbitration to be held at a site chosen at the sole discretion of CAMTS Global. However, if such an arbitration is filed by the Program, CAMTS Global shall be entitled to recover its reasonable attorney's fees in the arbitration if it is determined that the fees invoiced were reasonable. The institution of such arbitration shall not delay the appeal.

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3. This Supplemental Site Survey shall be conducted by different Site Surveyor(s) than the Site Survey being appealed. All applicable Site Survey rules and requirements shall apply.
4. The findings of Site Surveyors will be submitted to the Board of Directors for reconsideration.
5. The Program will be informed of the decision of the Board of Directors following the next Board of Directors meeting.
6. Regardless of the outcome of the appeal, the effective date of the original accreditation notification will serve as the basis for the tenure of the accreditation.

B. During the appeal process, Programs receiving a Withdrawal accreditation decision or a Suspend or Intent to Suspend action (as outlined in Policy 04.01.00 (E.) will be listed on the CAMTS Global website with an asterisk. The asterisk will be defined on the website as “Action Pending”. Any questions about the nature of the “Action Pending” will be directed to the Program.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Conditions Disqualifying Director's Vote – Conflict of Interest Issues

POLICY: All accreditation awards or board actions are the responsibility of the CAMTS Global Board of Directors as directed by the Leadership Responsibilities Policy 06.06.00. The following guidelines specify conditions that would disqualify a Director from participating in the decision or voting on an accreditation decision:

GUIDELINES:

- A. When the Director is employed by the medical transport service, institution or company seeking accreditation.
 - B. When the Director is employed by a medical transport service located in the same state or service area as the medical transport service seeking accreditation.
 - C. When the Director is employed by a medical transport service that is considered to be in competition with the medical transport service seeking accreditation.
 - D. When the Director is employed by a company that has purchase of service relationships with the medical transport service seeking accreditation.
 - E. When the Director has special knowledge of the Program seeking accreditation that has been obtained by virtue of a personal relationship with staff or others involved with the medical transport service which would preclude objective consideration of the full range of accreditation outcomes.
 - F. When the Director has had a previous position of employment in any capacity, including consultation, with the medical transport service seeking accreditation.
 - G. Previous conflicts of interest as listed above *may* continue to be considered a conflict for a time frame of up to five years and will be determined on a case by case basis in discussion with the CAMTS Global office and Director.
 - H. Conflict of Interest Forms (addendum a) will be completed, signed and returned to the CAMTS Global office prior to Board deliberation.
1. Conflict of interest issues that arise after an accreditation decision is made will be referred to the Ethics Committee (see policy V. D.).

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Ad Hoc Ethics Committee

POLICY: The ad hoc Ethics Committee will be called upon to make independent, blinded decisions about conflict of interest issues or ethical issues regarding a specific medical transport service according to the following guidelines:

GUIDELINES:

- A. The Ethics Committee will be an ad hoc committee with rotating members made up of Board members.
- B. The Ethics Committee will consist of three members.
- C. The Executive Director/Associate Executive Director will send all pertinent information concerning the issue to the Ethics Committee. This information will be blinded and will not reveal the identity of the program or the person(s) involved.
- D. The Ethics Committee will:
 - 1. Make a decision and recommendation to the Board of whether there is or is not a conflict of interest.
 - 2. Make a recommendation to the Board regarding an ethical issue and if that issue prevents the service from being in compliance with the accreditation standards that may ultimately affect the program's ' accreditation status.
- E. If the Ethics Committee decides that there is a conflict of interest or an ethical practice that prevents the program from being in compliance with accreditation standards, the Board will decide on appropriate action and communicate its decision to all involved parties.

SUBJECT: Accreditation Fees and Charges

POLICY: Charges for accreditation will be based on the fee schedule below and as appropriate to the accreditation action described.

A. Accreditation Fees for a medical transport service

1. Application Fee=CHF750 (to be submitted with initial application). Applications will be in English or German or interpretation costs will be passed along to the applicant.

2. Site Survey PIF Fee = CHF6500 This fee is to be included with submission of the PIF.

3. Additional fees – A base is defined as any location where both crew and aircraft or crew and surface vehicles are located outside of the main base of operations.

a. For up to 5 total bases in the same country or in bordering countries - CHF1000.00

b. For more than 5 bases and up to 20 bases in the same country or in bordering countries - CHF5,000.00

c. For more than 20 bases in the same country or in bordering countries - CHF10,000.00

d. Additional bases in countries not bordering the main base of operations will be charged at a rate of CHF1000.00 per helicopter or airplane base and CHF150 per ambulance or other surface base.

4. PLUS CHF600 fee per day on-site per site surveyor

a. Travel and expenses for each site surveyor plus a charge of CHF350 for the site surveyor report to the Board.

b. Number of days and number of site surveyors will be determined by the Site Surveyor Coordinator and CAMTS Global office based on the number of factors that may require additional interviews and travel outside of a normal 1 site – 2-day visit.

c. The criteria used to determine additional travel days and number of site surveyors may include but are not limited to:

Number of sites

Distance between sites

Number of specialty teams

Counties, countries, vendors, and maintenance facilities etc.

- d. **Reimbursement for travel and expenses.** A charge of CHF250 will be added for a travel day if travel involves more than eight continuous hours to or from the program. ~~Business class travel is required if flight is more than eight hours.~~ All attempts are made to keep air fares reasonable through early booking and other hotel and travel incentives available at the time. Costs will be provided to the applicant prior to final arrangements.

B. CAMTS –CAMTS Global Dual accreditation - there will be a PIF fee as follows:

1. One Mode of Transport = CHF8000,
2. Two modes of transport = CHF9000 and,
3. Three or more modes of transport = CHF10,000
4. Dual accreditation requires a visit to an administrative office in each country in addition to applicable bases as determined by the Executive Board. Base and site surveyor fees apply as outlined above in A. 3. and 4.

C. For an independent medical escort or special operations service

Initial Application Fee = CHF750 to be submitted with initial application)

Site Survey Fee = CHF2500 (Global) CHF3000 (Beyond North America and Global)

PLUS CHF600 per day fee per site surveyor (normally only 1 site surveyor) and travel and expenses plus a charge of CHF350 for the report to the Board.

1. If a program applies for dual accreditation –CAMTS AND CAMTS Global – The PIF fee is CHF5000.00 in Global (CHF6000 beyond North America and Global)

2. Programs that predominantly perform one mode of transport such as ground but occasionally perform rotorwing and/or fixed wing transports, for example, must include (in the CAMTS Global application process) all modes of transport that were used

for 12 or more patient transports in the previous year or any mode of transport (regardless of how many) that the program advertises as part of their program.

3. Additional fees (as in A.3. above) apply if there are more than 5 bases.

4. Site Surveyor fees in A. 4. above also apply.

5. Medical Escort or Special Operations that are part of a traditional medical transport service may be included in the service's application for accreditation with no additional PIF fee but there may be additional fees for added bases and/or site surveyor days.

- D. Accreditation for Charitable Organizations. As a charitable organization, CAMTS Global is sensitive to the economic constraints of similar organizations. A charitable organization may apply and receive a reduced rate to cover the CAMTS Global costs as follows:**

- 1. Proof of Charitable status is required.**
- 2. Board of Directors must approve each application for charitable status.**
- 3. Fees apply as follows:**
 - a. Application fee is CHF250.**
 - b. Administrative fees to organize, review materials submitted with the PIF and assign and schedule site surveyors = CHF2000**
 - c. Site surveyor fees and expenses are as outlined in A. 4. above. Travel and expenses for additional bases are added as applicable.**

E. Conditional Accreditation Fees

A medical transport service may submit a PIF after it has been in operation for 4 months. The program must submit an initial application with a CHF750.00 fee. A specific PIF application along with selected attachments will be emailed to the program to complete and return for review along with a CHF2500 fee. The Board will determine if a paper review or on-site audit is required depending on the program's scope of service.

F. Accreditation fees for the following services apply as outlined:

- a. Services receiving a withheld or withdrawn accreditation cannot reapply for 6 months. There is a 50% decrease in the base fee if completing and submitting a new PIF within one year of the accreditation decision.

In addition, the Program will be billed for site surveyor(s) fees, travel, and expenses to the main base and additional bases as determined by the Executive Board. If the site visit requires chartering an aircraft to remote bases, the cost of the charter will be added to the accreditation fee.

- b. If a service has a Class II or Class III change (refer to Policy 05.12.00) – there is:

- CHF250 administrative charge for processing a Class II changes
- CHF500 administrative charge for processing a Class III change

If a supplemental visit is required as a result of the Class II or Class III change

- a. An additional CHF2500 administrative fee plus additional charges for site surveyor(s)' fee, travel, and expenses will be charged to the service for the supplemental visit.

G. Charges for Accreditation Items

1. When a service achieves full or probational accreditation, the following items will be provided by the Commission free of charge:
 - a. Certificate of Accreditation for each base.
 - b. Two logo stickers for each aircraft and ambulance (Additional logos can be purchased for CHF10 each plus shipping.)

H. Charges for Consulting services

CHF3000 - 1st day plus travel and expenses for consultant
CHF1000 per day for each additional day

I. Charges for Education Evaluation

Programs developing their own course as an equivalent to established courses such as ATLS will be charged CHF500 for an evaluation, suggestions for improvement and approval by the CAMTS Education Committee. (see Policy 03.15.00)

Programs using simulation instead of clinical experiences must submit according to the 4 step process in Policy 03.15.00. There is a CHF500 charge for this evaluation.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Accreditation Standards and Policies Approval Process

Date Approved: 03/27/16

POLICY: Accreditation Standards and Policies require final approval from the Board of Directors according to the following guidelines:

GUIDELINES:

A. Accreditation Standards

1. There is a Standards Committee made up of Board members, Site Surveyors, and medical transport constituents. Drafts are created by the committee and sent to the Board for review. Board members are expected to solicit input from their representative member organisation.
2. Drafts for the next edition will be vetted on the CAMTS Global website throughout the time frame between publication of the previous edition and expected date of publication for the next edition. Comments from constituents and the public are accepted, reviewed for inclusion in the subsequent draft, and presented to the Board. There is no specific time frame between published editions although it is usually no less than 2 years and no more than 5 years.
3. Final approval for the next edition of accreditation standards must be by a majority vote of the current Board of Directors.

B. Policies

1. There is a policy and procedures committee headed by the Executive Director and made up of Board members.
2. Policies are created or revised when there is a need identified during board reviews of programs and as a result of findings in the QM process.
3. Legal review of policies will be conducted whenever necessary or at a minimum every 5 years.
4. New policies may be presented in draft form at each Board meeting for approval.
5. An entire review of existing policies will occur annually at the Spring Board meeting and the annual review must have Board approval.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Handling Concerns and Complaints

POLICY: The Commission will address all written complaints it receives, at its discretion, regarding an accredited medical transport service or a service that has submitted an initial application for accreditation in accordance with the generally accepted principles of peer review and according to the following guidelines.

GUIDELINES:

1. Complaints or concerns about an accredited service can form the basis for disciplinary action and accreditation decisions. They shall be handled consistent with generally accepted peer review guidelines. Complaints must be put in writing unless extraordinary and exigent circumstances exist. It is recommended that the appropriate form entitled "Complaints/Concerns Report" be used. This written concern should be addressed to the Executive Director of the Commission. This completed report should be (7/29/01) signed by the complainant.

Information reported may or may not be shared with the Program but the identity of the complainant will not be revealed unless required by a court order. There is a signature block for the complainant on the Complaint/Concerns Report and a signature is encouraged but not required.

The Complaints/Concerns Report informs the complainant that CAMTS Global is not a regulatory agency. Patient care or safety issues involving federal, state, or local regulators should be reported to the appropriate authority by the complainant. Complaints about patient transport charges or unethical business practices should also be reported to the appropriate authority by the complainant. It is not the responsibility of CAMTS Global to notify the appropriate authority. The CAMTS Global Office may provide the complainant with agency listings as a point of contact.

2. If the complainant is identifiable, the CAMTS Global Office will respond in writing to the complainant acknowledging receipt of the Complaints/Concern Report with no further follow-up to the complainant. Any actions taken will be at the discretion of either the full Board or the Executive Board.

3. If the complaint is in regard to a service that has submitted an application, the Executive Director/Associate Executive Director may provide such information to Site Surveyors in the Standards Compliance Tool.
4. The Complaints/Concerns Report may be sent to the Chair and Vice-Chair of the Board, prior to contacting the medical transport service, to determine if further action is required. Another Board Member may be substituted if there is a conflict of interest.
 - a. If it is determined that further action is required, the Executive Director/Associate Executive Director may notify the medical transport service (by via written correspondence and, at the Executive Director's/Associate Executive Director's option, via telephone) that a complaint or concern was received and what action has been taken pending an investigation. Input from the Program will be obtained and documented and included in a report to the Board of Directors along with the confidential report for discussion and action at the next Board meeting.
 - b. Depending on the nature of the complaint, it may be necessary to take action before the next Board meeting. In that event, the Executive Board will decide on an appropriate action. Such action may take place prior to notifying the service. If complaints are of such a serious nature that safety and patient care is at risk and confirmed by an additional source, the Program may be suspended by action of the Board.
 - c. For other complaints, based on the Board discussion, one or more of the following courses of action may occur:
 - No action required;
 - Progress Report requested from the medical transport service within a specified time frame;
 - Monitoring visit arranged (Please refer to policy 05.08.00 entitled "Monitoring Visit") or Supplemental Site Survey.
 - Accreditation placed on suspension until further action can be determined;
 - Accreditation may be withdrawn if the review determines that the Program no longer operates substantially in the manner described in its application.

- d. The medical transport service will be notified of the Board's decision by certified mail.
- 5. If a Site Surveyor(s) witnesses an act that would constitute a violation of a CAMTS Global Accreditation Standard, it is recommended that the form entitled "Site Surveyor Observation Report" be submitted to the CAMTS Global office along with the Standards Compliance Tool and Board report.

Concern/Complaint Report

*The purpose of this form is to document a concern or complaint about an accredited service or a service that has submitted an initial application for accreditation. The completed report will be forwarded to the appropriate Board members for follow-up. Individuals completing the form will receive verification that the form was received but follow-up actions by the Board of Directors will be at the discretion of the Board. **All information regarding this report is considered confidential and the source of the complaint is not revealed.** CAMTS Global is not a regulatory agency. Patient care, safety issues, billing practices and unethical business practices involving federal, state, local, and other regulators or agencies should also be reported to the appropriate authority by the complainant.*

The form is located on our website – www.CAMTSGLOBAL.org

[CAMTS GLOBAL POLICY AND PROCEDURE MANUAL](#)

GENERAL POLICIES	05.00.00
Two Consecutive Probation Awards	05.01.00
Follow-up on Recommendations	05.02.00
Waiting Period	05.03.00
Outstanding Indebtedness	05.04.00
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Reaccreditation	05.06.00
Extending the Certification	05.07.00
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Ongoing Communication with CAMTS Global	05.12.00
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Requests from Charitable Services	05.14.00

GENERAL POLICIES - 05.00.00

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Two Consecutive Probational Awards

POLICY: If a program receives two (2) consecutive probational awards, then during its next accreditation review it must either receive full accreditation or not be accredited in any category.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Follow-up on Recommendations

POLICY: A progress report must be sent in to CAMTS Global within the time frame specified in the accreditation letter. This report by the program must outline and document plans and actions taken following the written report issued by the CAMTS Global board addressing all issues identified in the letter requiring a reply. Failure to submit a progress report may result in Board action up to and including withdrawal of accreditation.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Waiting Period

POLICY: Six (6) months must elapse before a new PIF can be accepted by programs in the event of withheld or withdrawn accreditation unless the program was withheld or withdrawn due to falsifying or omitting information. In that case, a minimum of one year and a maximum of five years must elapse before a new PIF can be accepted at the sole discretion of the Board of Directors.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Outstanding Indebtedness

POLICY: CAMTS GLOBAL will not accept an application for accreditation or review a progress report from a program with an outstanding overdue debt until that debt has been paid.

Any Program that is delinquent in the payment of CAMTS GLOBAL fees or has an outstanding debt to CAMTS GLOBAL will not be eligible for accreditation review until the delinquency or outstanding debt is resolved to the satisfaction of CAMTS GLOBAL. Delinquent or indebted Programs may also be subject to the immediate withholding or withdrawal of any current accreditation.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Supplemental Survey

POLICY: If a program adds another location or increases the number of aircraft or expands the service (by another aircraft and/or additional site) a supplemental survey may be initiated unless the original accreditation expires in less than one year. A program may also be required to undergo a supplemental survey visit as a result of an accreditation action or decision. Direct expenses of the site surveyor(s) and a CHF2500 administrative fee would be the responsibility of the program.

The Board may require a supplemental visit for any medical transportation service that applies for accreditation, is accredited by CAMTS Global, or is appealing an accreditation decision or Board action at the program's expense.

A program may appeal the decision to require a supplemental visit but if the Board denies the appeal and requires a supplemental visit, the program is required to reimburse the Commission for the visit as outlined above.

A supplemental survey may also be completed if a program wins an appeal on the accreditation decision and the board decides a follow-up visit is necessary. In this instance, the Commission would be responsible for the direct expenses of the site surveyor(s).

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Reaccreditation

POLICY: CAMTS Global will notify a program of the need to request a survey approximately six (6) months prior to accreditation expiration date. A PIF must be completed and submitted prior to scheduling the site visit.

GUIDELINES:

A. To maintain accreditation, a medical transport service must have the PIF submitted a minimum of 120 days prior to the ending date of the certification period unless an extension has been approved by the Board. However, regardless of the date of the next board meeting (assuming the service is reaccredited) the certification period will revert back to and begin with the ending date of the previous certification period.

B. The process of survey for continuation of accreditation is the same as the initial survey in that all appropriate and current accreditation standards are applied. During a resurvey site visit for continuation of accreditation, the surveyors will pay particular attention to any concerns and deficiencies from the previous survey and to compliance with new accreditation standards.

C. In rare circumstances, a single site surveyor may be able to complete the site visit. In this instance, the cost savings for expenses of a second site surveyor would be passed along to the medical transport service.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Extending the Accreditation Certification

POLICY: Extension of an existing accreditation may be granted for up to six (6) months if the program is experiencing temporary disruption (such as change in program leadership, change in aircraft/ambulance operator, change to/from single-hospital management, etc.) which would interfere with the Commission's ability to conduct a meaningful survey. The extension must be requested in writing at least three months prior to the expiration of the existing accreditation. The Executive Committee will make all decisions on requests for extensions of accreditation.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Monitoring Visit

POLICY: CAMTS Global reserves the right to conduct a scheduled or unannounced onsite visit of any medical transportation service that applies for accreditation, is accredited by CAMTS Global or is appealing an accreditation decision or Board action at the expense and discretion of the Commission. The Commission will notify the program in writing that a site surveyor or board member will conduct a monitoring visit. This written notice may be presented by the CAMTS Global representative on-site at the time of the monitoring visit.

SUBJECT: Confidentiality Policy and Statement

POLICY: It is the Policy of CAMTS Global to respect and protect each individual's right to confidentiality concerning their health care, personal, and employment information. CAMTS Global shall maintain the confidentiality of this information, protecting it against loss, defacement, tampering, unauthorized access, or use by unauthorized individuals. Additionally, a list of accredited Programs will be published quarterly and made available to the public. However, it is the policy of CAMTS Global to consider specific information about the accreditation process of a Program to be strictly confidential according to the guidelines below.

GUIDELINES:

Confidential Information: For the purposes of this policy, Confidential Information includes, but is not limited to, the following:

Patient healthcare information: All information and records related to the health of a patient prepared by or under the supervision of a healthcare provider, e.g. diagnosis, treatment, prognosis, condition, or other information contained in medical records, photographs, videotapes, or verbal reports. This includes personal information such as patient name, address, phone number, admission and discharge dates, physician's name, family or social information.

Employment Information: Employee address, telephone number, personnel file, job application, performance appraisal, discipline, termination, investigations, compensation and benefits.

Business Information: Confidential business information of a proprietary nature related to the operations, finances, marketing or strategic plans. Proprietary information obtained through verbal or written internal communication is confidential unless it is made public by the service. Such information may include but is not limited to transport statistics, marketing plans, patient/customer feedback, or terms of contracts.

Accreditation information: All materials submitted by a Program in the course of the accreditation process, including but not limited the PIF and addendums to the same, and information accumulated by Site Surveyors during a Site Visit, Supplemental Site Visit, or Monitoring Visit.

Confidential Information to be kept confidential. CAMTS Global and its employees and agents (including but not limited to Site Surveyors) shall maintain the confidentiality of all Confidential Information, except as provided in this policy.

Review of Confidential Information during Site Survey. Review of Confidential Information during a Site Survey, Supplemental Site Survey, or Monitoring Visit will take place on the Program's property at a secure location within the jurisdiction and safekeeping of the Program.

Disclosure of Confidential Information to Board Members and Site Surveyors. CAMTS Global may disclose Confidential Information to Board Members and Site Surveyors for use in the accreditation process.

Disclosure of Confidential Information to third parties. CAMTS Global shall not disclose Confidential Information to third parties except under the following circumstances:

1. For patient healthcare information, upon the receipt of a signed medical authorization from the patient;
2. For employee information, upon receipt of a signed employment authorization from the employee;
3. for business information, upon receipt of a signed authorization from the business;
4. For accreditation information, upon receipt of a signed authorization from the Program.
5. For all Confidential Information, upon being served with a duly authorized subpoena or court order, or as otherwise required by federal, state, or local law.

Procedure when individual is served with a subpoena or court order. If an individual Board Member or Site Surveyor is served with a subpoena requesting the production of Confidential Information or is served with a court order requiring the same, he/she shall forward the subpoena or court order to the Executive Director as soon as practicable.

Disclosure of accreditation status to government agencies. CAMTS Global is permitted to disclose a Program's accreditation status to state and local government agencies, including but not limited to state EMS agencies.

Maintenance of Confidential Information. CAMTS Global will maintain a file on each Program that applies for accreditation. Such files will include, without limitation, all original documents and materials submitted by the Program as part of the accreditation process. Program files shall be kept in a confidential filing system in the CAMTS Global office.

Disposal of Confidential Information. At the conclusion of the accreditation process, including any appeal of an accreditation decision or Board action, Board Members and Site Surveyors shall return all Confidential Information to the CAMTS Global Office or shall destroy such Confidential Information as requested and instructed by the Executive Director/Associate Executive Director. CAMTS Global will destroy any computer disks containing Confidential Information and will shred any hard copies of the same.

CAMTS Global/PPM

05.10.00 (012216)

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Site Surveyor Confidentiality

[This policy has been incorporated into Policy 02.09.00.]

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Public Identification

POLICY: The Certificate of Accreditation and the CAMTS Global logo are to be utilized under the following guidelines.

GUIDELINES:

Certificate of Accreditation

A. A Certificate of Accreditation is provided, at no charge, to a program awarded full or probational accreditation. This Certification identifies the program surveyed and the expiration date of accreditation.

B. A medical transport program is permitted to identify the accreditation status publicly.

C. The following would not be considered permissible uses of the Certificate of Accreditation:

1. A program shall not display the Certificate in any manner which misrepresents the availability or quality of the service offered.
2. A program shall not permit another program to display or use its Certificate.
3. In the event continued accreditation is denied, the program shall refrain from misrepresenting its accreditation status. The expiration date on the Certificate will be clearly identified and cannot be altered in any way.
4. The Certificate should never be used either explicitly or implicitly as a claim or promise of service.
5. Officials and staff of CAMTS Global should not be referred to or quoted in publicity releases on accreditation without prior approval from the CAMTS Global office.

D. Within 30 days after notification of loss of accreditation, the failure of a program to return the Certificate of Accreditation and/or to terminate purporting to be accredited by CAMTS Global shall constitute grounds for the Commission to publicly disclaim the accredited status of the program.

CAMTS Global Logo

An accredited program is encouraged and entitled to use the CAMTS Global logo with the following limitations:

A. When not using the logo, the Commission on Accreditation of Medical Transport Systems will not be abbreviated.

B. Accredited medical transport services will not advertise as a "member" of the Commission since there are member organisations that make up the Commission. This would be misleading or confusing.

C. Accredited medical transport services will not advertise as "approved by". The phrase "Accredited by Commission on Accreditation of Medical Transport Systems is suggested.

D. The logo can be used only in print. Usage in any other medium requires advanced approval. The logo may be enlarged but not reduced any smaller than the sample logo below because the type becomes too small to read:

1. The logo can only be printed in black, white, PMS blue 282, or shades of grey. These options will hopefully help on printing costs, though the standard use will be in black or PMS 282.
2. Elements of the logo may not be separated and used individually other than what is shown on previous page.
3. The logo must be clearly identified as a separate entity and cannot be used in conjunction with or in close proximity to a program tagline or other logo.

E. A medical transport service may **NOT** use the CAMTS Global logo **NOR** publicize accreditation if:

1. Accreditation status is withdrawn.
2. Accreditation has been suspended.
3. Accreditation status has expired.
4. Used or publicized in conjunction with a claim or promise of service.

F. The logo may not be loaned, donated, or transferred to another medical transport service.

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G. Accredited medical transport services will sign an agreement of understanding based on the above limitations on use of the CAMTS Global logo. A new agreement will be signed with each recertification.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Ongoing Communication with CAMTS Global - Reporting Changes

POLICY: During the tenure of accreditation, the program shall communicate to the Commission in writing (within thirty days of the effective date) any changes in the scope of service provided as reviewed at the time of accreditation. Examples of changes requiring notification and how these changes are classified for purposes of board action are provided in the guidelines below. The form is located on our website – www.camtsglobal.org

1. **Class I Change** - *A class I change is a minor change that will have little effect on the overall mission, direction, and operation of the service.*

1. Some examples of this type of change may include but not be limited to:

- a. Change of address
- b. Change in personnel occupying management positions
- c. Deleting a part of the service

2. A Class I change may result in one of the following board actions.

- a. No follow-up required
- b. Follow-up progress report required

2. **Class II Change** - *A Class II change is a change that has the potential to cause other changes within the service as reflected in the mission, scope of care or policies, for example, that would alter the service significantly from the service reviewed during accreditation deliberations.*

1. Some examples of this type of change may include but not be limited to:

- a. Adding a new aircraft/ambulance or additional aircraft/ambulances.
- b. Adding or changing location of a base in the same State or region (in the same mode of transport as previously reviewed).
- c. Changing ownership of the service but middle managers and aviation/ambulance operators are the same

- d. Adding a speciality care team or changing the composition of the speciality team.
 - e. Expanding into fixed wing or rotorwing with the same FAA Part 135 operator
 - f. Merging with another CAMTS Global accredited service
- 2. A Class II change may result in one of the following board actions.
 - a. No follow-up required
 - b. Follow-up progress report required
 - c. Supplemental site visit
 - d. Monitoring visit
- 3. Class II changes may result in an accreditation recommendation as follows:
 - a. No change in accreditation status
 - b. Intent to Suspend or Suspend accreditation
 - c. Withdraw accreditation
- 3. **Class III Change** - *A Class III change is a change that interrupts the service or causes overall differences that would alter the service significantly from the service reviewed during accreditation deliberations.*
 - 1. Some examples of this type of change may include but not be limited to:
 - a. Change in ownership that includes change in managers, teams, and/or aircraft or ambulance operator.
 - b. Merging with a non-CAMTS Global accredited service
 - c. Changing the mission statement and/or scope of care.
 - d. Expanding into fixed wing or rotorwing with a different FAA 135 operator or with its own Part 135 certificate
 - e. Adding a ground critical care service.
 - f. Contracting with a new Communications Centre or developing its own communications centre

- g. Changing the composition of the regularly scheduled team.
 - h. An accident or sentinel event that resulted in substantial damage to the aircraft or vehicle or injuries to personnel, passengers, or bystanders.
 - i. A legal settlement against the service regarding a transport or patient care issue.
- 2. A Class III change may result in one of the following board actions.
 - a. No follow-up required
 - b. Follow-up progress report required
 - c. Supplemental site visit
 - d. Monitoring visit
- 3. Class III changes may result in an accreditation recommendation as follows:
 - a. No change in accreditation status
 - b. Suspend accreditation
 - c. Withdraw accreditation

**A program that does not report changes during the tenure of accreditation, may be in non-compliance with Commission policies and therefore may have accreditation withdrawn, according to policy 04.01.00. - "Accreditation Awards and Board Actions"*

SUBJECT: Postponement, Cancellation, and Refund

POLICY: The initial application fee is non-refundable because the applicant receives the Program Information Form (PIF). The completed PIF must be returned within one year in order to be eligible for a site visit under that application. If not returned within one year, the applicant must purchase another initial application if still interested in applying for accreditation. Once the PIF is received, a site visit must be scheduled within 6 months of filing the PIF. Once scheduled, an applicant may postpone the site visit or withdraw the application at any point prior to the date of the site review according to the following guidelines:

GUIDELINES:

A. Postponement - a request to postpone a site visit must be received in writing at least 14 calendar days prior to the scheduled site visit date. Penalties for postponement will be assessed as follows:

If the postmarked date of written postponement request is:

1. 60 or more calendar days from the scheduled site visit - program will be assessed a CHF500 fee.
2. 30 - 59 days prior to the site visit date - program will be assessed a CHF500 fee plus any penalties for changes in surveyor travel arrangements if applicable.
3. Less than 30 days - program will be assessed a CHF1000 fee plus any penalties for change in surveyor travel arrangements.

B. Cancellation - a medical transport service may withdraw from the accreditation process at any point. However, a considerable amount of work precedes the site visit and therefore the following refund policy applies:

If the postmarked date of written cancellation request is:

1. 60 or more days prior to the scheduled site visit - the invoiced amount for the PIF will be refunded (or the entire fee if total was paid) minus CHF500 plus any penalties for cancelled travel reservations, if applicable.
2. 30 - 59 days prior to the scheduled site visit - 50% of the fee paid with the PIF will be refunded.
3. There is no refund for cancellations less than 30 days prior to the scheduled site visit.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Requests from Charitable Medical Transport Services

POLICY: The Commission will address requests for a reduction in the accreditation fee from charitable services according to the following guidelines.

GUIDELINES:

- A. Medical transport services requesting a reduction in the fee for accreditation must submit a request in writing signed by an administrative officer of the service or sponsoring institution.
- B. Requests will be considered on a case-by-case basis. A majority vote by the board of directors is necessary for approval.
- C. The medical transport service must be a 100% charitable service (such as a service sponsored by an institution that depends on donations to provide care for the patients who are not billed for their care) in order to be considered for a reduction in the accreditation fee.
- D. Although a reduction in the accreditation fee may be approved, direct costs of the site visit must be recouped. These direct costs include site surveyors' travel and lodging expenses as well as administrative time of the Executive Director/Associate Executive Director. The CHF750 initial application fee will be deducted from the administrative fee.

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ADMINISTRATIVE POLICIES - 06.00.00

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Non-Wage Employee Benefits

POLICY: Employees of the Commission will receive non-wage benefits according to the following guidelines.

GUIDELINES:

A. Holidays - There are seven paid holidays as follows. Holiday pay is pro-rated based on FTEs.

New Year's Day

Good Friday or Personal Day*

Memorial Day

July 4th

Labour Day

Thanksgiving

Christmas

The employee is not required to take off on the exact day of the holiday but is required to use the holiday within the same calendar year.

*Personal day can be taken 5 days in advance or with concurrence of supervisor.

B. Vacation pay according to the following guide:

<u>Years of Employment</u>	<u>Number of Weeks Paid Vacation</u>	
	Wage/Hour	Exempt
1 - 5	2 weeks	3 weeks
5 - 10	3 weeks	4 weeks
10 plus	4 weeks	4 weeks

Employee can never accrue more than 8 weeks of vacation time.

Vacation and sick time are prorated based on FTEs.

Vacation time should be approved two weeks prior to vacation.

C. Compensation Time - Hours accrued over forty hours per week can be accumulated and used for time off at a later date for exempt employees with the approval of the Chair or designated Board Member. Employee cannot accumulate more than 120 hours.

D. Sick pay benefits according to the following guidelines:

<u>Qualifying Period</u>	<u>Sick Pay Allowance</u>	
	Wage-Hour	Exempt
At six months	5 work days	5 work days
Second year of employment	10 work days	10 work days
Third, fourth and fifth year of employment	10 work days	10 work days
After five years of employment	15 work each year	15 work days each year

Sick pay benefits are not cumulative and are applicable only 1 year at a time beginning at employee's six-month anniversary date according to the above schedule.

E. Travel benefits

Employees who travel on Commission business (Board meetings, conferences, for example) will complete a travel voucher for incurred expenses. Expenses that are reimbursable are as follows:

- Air Fare and travel to and from hotel
- Airport parking
- Rental Car (if necessary)

- Personal vehicle will be reimbursed mileage to reflect current national guidelines.
- Hotel
- Food will be reimbursed and tips at a per diem rate of CHF50 per day

Travel expenses will generally be reimbursed by the conference.

The following guidelines will apply:

- Speaking engagement to be approved by Chair of the Board
- Incurred expenses not covered by the conference to be approved by the Executive Committee
- Any speaker's fees returned to the employee will be reimbursed to CAMTS Global

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Check Signing

POLICY: To identify responsibility for signing checks

GUIDELINES:

All checks above CHF10,000 for payroll, taxes, and travel agent disbursements will be signed by the Executive Director or Associate Executive Director.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Annual Audit

POLICY: An annual audit will be conducted to provide financial accountability.

GUIDELINES:

- A. The accounting firm responsible for filing annual 990 tax reports will be responsible for completing the annual audit.
- B. The Executive Director/Associate Executive Director will provide the accounting firm with all the necessary documentation.
- C. Copies of the completed annual audit will be provided to all board members. Board members are responsible for sharing the annual audit with their specific representative organisations.
- D. The audit report will be presented by the Treasurer at the next board meeting along with any action plans required to address required operational changes.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Financial Reports

POLICY: Financial reports will be prepared and distributed by the Accounts Manager and Treasurer of the Board according to the following guidelines.

GUIDELINES:

A. The Accounts Manager will prepare the following reports by the 20th of the month for the preceding month.

B. The following financial reports will be sent to the Treasurer and Executive Director:

- CAMTS Global Financial Report which includes the current and year-to-date budget report (abbreviated format) along with the operational statistics.

- Monthly balance sheet

C. In addition, the Treasurer and Executive Director will receive the following:

- Bank statements for checking and money market accounts

- Bank reconciliation form

- Profit and loss statement

- Transaction report

- Monthly and year-to-date budget report

D. The Treasurer will be responsible for presenting a year to date report to the Board during each Full Board meeting and convening a conference call with the Executive Board if discussion is required between Full Board meetings.

E. An annual report will be presented by the Treasurer along with a proposed budget for the next fiscal year (for Full Board approval) at the Fall Board meeting.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Travel Stipend

POLICY: Board members (including ad hoc Board members) are eligible for up to CHF2500 travel stipend per fiscal year based on the guidelines below. However, the stipend is subject to the discretion of the Executive Board.

GUIDELINES:

1. Requests for reimbursement must be in writing on an expense form and accompanied by the original receipts to cover only those expenses actually incurred for the Commission travel.
2. All requests for reimbursement should be timely and should not include expenses that the board member expects to be reimbursed from an employer or another organisation.
3. If the board member occupies a double room with family/friends, the Commission will reimburse the single room rate. Notation of the single room rate must be included with the travel voucher.
4. Expenses must be submitted within the year they were incurred and must be received within thirty (30) days of travel.
5. Any unused portion of a stipend will end with the fiscal year.
6. Board members acting as observers on a site visit will be reimbursed for travel and expenses but will not be reimbursed for a daily site surveyor fee unless they are acting in official capacity as a part of the Site Surveyor team.
7. Receipts may be original or scanned provided the receipt is legible.
8. Expenses reports may be mailed or submitted electronically to the CAMTS Global Accounts Manager.
9. Board members supported by a member organisation are eligible for up to but not to exceed a CHF2500 travel stipend each fiscal year. Balance and limit will be carried forward for a member organisation if a new Board member is appointed during the fiscal year.
10. Ad hoc and Executive Board members are eligible for up to but not to exceed a CHF3000 travel stipend each fiscal year.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Leadership Responsibilities

POLICY: Board members, site surveyors, and staff members of the Commission on Accreditation of Medical Transport Systems (CAMTS Global) must act at all times in the best interests of the corporation they represent. Accordingly, the CAMTS Global Board of Directors has adopted the following policy for all these individuals (Leaders). The Code of Conduct is intended to provide guidance regarding general expectations for service as a Leader. The remaining portions address specific obligations.

GUIDELINES:

A. Code of Conduct

1. Each Leader must carry out the duties and obligations inherent in his/her role as a Leader in a trustworthy, diligent, and collegial manner.
2. Each Leader must act in a manner that reflects the integrity of CAMTS Global both inside and outside the Boardroom.
 - a. Treat each constituent with respect regardless of social or economic status, national origin, race, religion, age, sex, or health status.
 - b. Protect the rights and confidentiality of all accreditation applicants. There will be strict adherence to policies and legal applications that affect the accredited and non-accredited medical transport service.
 - (1) False claims of accreditation will not be tolerated and appropriate action will be taken.
 - (2) All information in an accreditation will be held in strict confidence according to established policies.
3. All decisions must be made with the mission, values and vision of CAMTS Global first and paramount.
4. Board members may exercise authority as Board members only when acting in meetings with the full Board, acting in meetings of the Executive Committee, or acting as expressly delegated by the Board.

5. Generally, only the CAMTS Global Chair and salaried staff serve as the external face of CAMTS Global between meetings of the Board. Other Leaders must not act, directly or indirectly, as spokespersons for CAMTS Global unless formally designated to do so by the Board.
6. Each Leader must maintain in strict confidence any confidential information of CAMTS Global that he/she receives while serving as a Leader. Confidential information includes economic and financial information, sales and marketing plans, information and materials obtained from interviews or site surveys, membership and donor lists, business procedures, solicitation or contact methods, and any other information regarding the business of CAMTS Global that has not been previously released by CAMTS Global to the general public. Each Leader must not use or disclose such information except as may be authorized by the Board and must make efforts to prevent its unauthorized disclosure. Upon the end of service as a Leader, the individual must return or destroy materials that contain CAMTS Global confidential information, without retaining copies. If it is not feasible to return or destroy confidential information then the Leader must make efforts to prevent its unauthorized disclosure indefinitely.
7. Details of Board discussions and discussions of Executive and Standing Committees are not to be disclosed publicly. When the Board or Executive/Standing/Management Committee votes to conduct matters in confidence, no information must be disclosed publicly. While Board discussion on a matter is confidential, the outcome of any votes is public.
8. Leaders must fully prepare for and participate in appropriate meetings of the Board of Directors and Committee meetings (as their positions entitle them to attend).
9. Leaders must read and understand the Articles of Incorporation, Bylaws, corporate policies, and financial statements.
10. Leaders must be cautious and protective of the assets of CAMTS Global and must ensure that they are used in the pursuit of the mission of CAMTS Global.
11. If a Director or Trustee has significant doubts about a course of action of the Board, he/she must clearly raise the concern with one or more of the following, as applicable to the issue at hand.
 - a. The Executive Director/Associate Executive Director of CAMTS Global, or

- b. The CAMTS Global Chair and/or any member of the Executive Committee. If a Committee member has significant doubts about the course of action of the Committee he/she must clearly raise the concern first with the Committee Chair, and if need be, with the Chair of the Board as applicable.

B. Fiduciary Duty

1. Maintain the highest ethical standards by conducting all transactions with payers, contractors, vendors, and constituents without accepting offers or solicitation of gifts, favours, or other improper inducements in exchange for influence or assistance in a transaction.
 - a. Known vendors of goods and service purchased by CAMTS Global must not serve as employees, Board members, or site surveyors.
 - b. Employees, Board members or site surveyors (interested person) are considered to have a conflict with regard to financial interests in the following examples:
 - (1) If the interested person has an ownership or investment in any entity with which CAMTS Global has a transaction or arrangement unless the ownership is less than 5%.
 - (2) If the interested person has a potential ownership interest, investment interest or compensation agreement with any entity or individual with which CAMTS Global is negotiating a transaction or arrangement.
 - (3) If the person has an appointment, administrative position (paid or unpaid) or investment interest in any entity that provides services and/or supplies to CAMTS Global.
 - c. Interested persons may accept an offer or recreation, entertainment or other social activity with a vendor or potential vendor if appropriate under the circumstances. However, the following must exist:

- (1) The purpose of the activity must meet the needs of CAMTS Global
- (2) The activity must be reasonable in nature, time, frequency and cost >25.00 or <100.00
- (3) Interested persons will disclose such activities to the Executive Committee within 30 days.

2. Procedures

a. Duty to Disclose—An interested person must disclose the existence of financial interests to the Executive Board and must also report:

- (1) If a family member holds a position with a vendor or competitor of CAMTS Global.
- (2) If the interested person is a director, trustee or officer of an entity that does business or is in competition with CAMTS Global.
- (3) Any business relationship between an interested person and a vendor, or potential vendor for which compensation of services of value (such as an honorarium, free travel, etc.) are received must be disclosed in advance to the Executive Committee to determine conflict of interest.
- (4) Appearance of conflict – Leaders should avoid circumstances or situations that benefit or appear to benefit the individual whether through personal gain involving a business transaction, gift, favor or other consideration that appears to result in the personal enrichment of the individual, the individual's relative, friend or business associate.

b. Addressing a conflict of financial interest

- (1) The Executive Committee will determine if a conflict of interest exists and may appoint a disinterested person or committee to investigate alternatives to a proposed transaction, if appropriate.

- (2) After exercising due diligence, the Executive Committee will determine whether CAMTS Global can obtain a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest.
 - (3) If a more advantageous transaction is not reasonably attainable under circumstances that would not give rise to a conflict of interest, the full Board will determine by majority vote whether the transaction is in the best interest of CAMTS Global
- c. Purchases of goods and services will adhere to ethical practices and not knowingly misrepresent CAMTS Global through dishonesty, inaccuracy, or perceived profits.
 - (1) Major ongoing purchase of goods and services will go through a selective process at the discretion of the Executive Board.
- d. Conserve CAMTS Global resources, whether that is money, time or commodities and accurately report financial transactions according to established policies and adherence to legal policies regarding non-profit corporation status.

C. **Conflicts of Interest** - CAMTS Global encourages and supports a culture of transparency and open disclosure, and recognizes that management of actual, potential, or perceived conflicts are critical to the operations of CAMTS Global.

- 1. A conflict of interest is a real or seeming incompatibility between a Leader's private and/or personal interest and his/her duties with respect to either CAMTS Global. "Conflicts of interest" include actual, potential, and perceived conflicts of interest.
- 2. A conflict of interest includes not only individual financial gain in conflict with an individual's duties to CAMTS Global but also conflicts arising from any interest in or duty to a medical transport service. Leaders are committed to furthering the best interests of CAMTS Global and must avoid conflicts of interest with CAMTS Global. Leaders must not profit personally from their affiliation with CAMTS Global, or favour the interests of themselves, relatives, friends, supporters, business partners, or other affiliated organisations over the interests of CAMTS Global. Leaders must not bring their interests into conflict or competition with the interests of CAMTS Global.

3. Whenever a Leader discovers an opportunity for business advantage or personal gain that is relevant to the activities of CAMTS Global, the opportunity belongs to CAMTS Global, and the Leader must present the opportunity to the Board of Directors. Only at such time as the Board by recorded vote determines not to pursue the matter and relinquishes the opportunity may the individual consider it a matter of possible personal benefit. Leaders must use extreme care to be certain that they are not using actual or perceived leverage of their Board/committee authority or influence in transactions external to their role on the Board or committee or Education and Consulting Division of CAMTS Global.

4. Investments in companies with business relevant to the activities of CAMTS Global can lead to a conflict of interest. However, the Board has determined that ownership of the following securities is not material to this Statement and need not be disclosed: (See Investment Policy Statement – 06.07.00)

(1) Ownership of stock in a public or private company, unless the company is engaged in contacts, negotiations or other circumstances of potential or actual conflict of interest.

(2) Ownership of stock through a mutual fund.

5. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which CAMTS Global is involved with accreditation decisions or negotiating a transaction may be a conflict of interest.

6. A Leader must declare any actual, potential, or perceived conflicts of interest that arise:

a. During a meeting:

(1) An Annual Update: Each Leader is required to annually complete and submit an updated Disclosure Form (*attached to this policy*).

(2) Conflict of Interest forms (program specific*) related to individual medical transport services that are on the agenda will be signed by the Leader and submitted prior to each meeting. However, if the Leader recognizes that the discussion (during a meeting) is about a service with which they have a conflict – they should immediately report that to the Executive Director/Associate Executive Director and recuse him or herself from the discussion. (See Policy 04.03.00 – Conditions Disqualifying a Director's Vote.)

- b. Changes during the year: A Leader must update the Disclosure Form if any material changes or additions to the submitted information arise during the course of the year. Whenever a new conflict is disclosed, the Leader must complete and submit an updated Disclosure Form that includes the new conflict to the CAMTS Global office.
- c. Outside of a meeting: Outside of a meeting, a Leader should communicate in writing any concern regarding an actual, potential, or perceived conflict at any time to the Board President, committee Chairman, and Executive Director.

** Disclosure form for Board members is in developmental process.*

7. How Conflicts Are Reviewed After an actual, potential or perceived conflict of interest has been identified or disclosed, an initial determination as to whether the area of concern constitutes an actual, potential, or perceived conflict of interest must be made by the Board for conflicts at the corporate level.

- a. The Board may determine that it requires the advice of legal counsel for resolution of the matter.
- b. The Leader whose involvement in the transaction or relationship is under consideration may not participate in the deliberation and vote on whether the transaction or relationship presents an actual, potential, or perceived conflict of interest. However, upon request by the Board, the Leader may provide additional information detailing the nature of the relationship or transaction.
- c. A Board may request assistance from the Executive Director or refer the matter to the Ad Hoc Ethics Committee to assist in the investigation and review of the matter.

The Ad hoc Ethics Committee may request permission to contact legal counsel for advice. Upon the conclusion of its review, the Ad hoc Ethics Committee must report its findings and recommendations to the Board.

- d. The CAMTS Global Board of Directors has final authority over the resolution of conflict of interest matters involving its members and other Leaders of CAMTS Global.
- e. No policy statement can cover every possible situation where a conflict of interest may arise. When evaluating whether a particular transaction or relationship constitutes an actual, potential, or perceived conflict of interest, the CAMTS Global Board must consider all of the relevant facts and circumstances.

8. Actions to Manage Identified Actual, Potential, or Perceived Conflict of Interest:

If the Board determines that a particular relationship or transaction represents an actual, potential, or perceived conflict of interest, the conflict will be resolved in one of the following manners.

- a. Determine that the conflict is unlikely to affect the Leader's ability to act in the best interests of the organisation;
- b. Determine that the individual Leader should be recused from all deliberations and/or decision-making/voting related to the particular transaction which gives rise to the actual, potential, or perceived conflict.
 - (1) This resolution should apply particularly when the transaction or relationship is one that presents a conflict only with respect to one or two discreet programs or activities. For example, if an individual Board member also works for a company that produces or provides a program that has an absolute conflict with program(s) under review for accreditation action or decision, the Board may determine that the Board member should be recused from all deliberations and voting related to such programs(s) both at the outset and on an ongoing basis.
 - (2) In some circumstances, it may be appropriate for the Board to decide that an individual Leader may participate in deliberations but must be recused from voting on a matter before the body.
- c. Determine that the individual Leader must resign from his/her service to CAMTS Global because the actual, potential, or perceived conflict is such that the Leader would seldom, if ever, likely be able to act in the best interests of the organisation. A discussion with the Leader involved will be held with the Chair and potentially the Ad Hoc Ethics Committee.
 - (1) For example, if an individual Board member also works for a company that produces or provides services that compete with most of the educational services provided by CAMTS Global, The Board may recommend that the individual should resign from the CAMTS Global Board.
- d. The processes of resignation and/or removal of a director are guided by the pertinent by-laws of CAMTS Global and applicable law.
- e. All disclosures and votes regarding conflicts of interest must be recorded in the minutes.
- f. Provision of services/contracts to CAMTS Global; The special procedure below is applicable to manage all instances in which a Leader (or the

Leader's) company, organisation or another entity for which the Leader serves in a leadership, employment or ownership capacity, or a member of the Leader's family) seeks to provide goods or services to CAMTS Global as a paid vendor. This procedure must not apply to pre-existing relationships with Leaders that previously have been disclosed to, and approved by the Board.

- (1) The Leader must disclose to the President in advance of any related action to be taken by the Board, his/her intent to seek to provide goods or services as a paid vendor to CAMTS Global.
 - (2) The Leader must recuse himself/herself from all deliberations and voting related to the contemplated actions;
 - (3) If the value of the transaction exceeds CHF5000, CAMTS Global must, through a request for proposal process, have solicited proposals broadly from other qualified vendors or prospective contract recipients, and must receive (or attempt to receive) written bids from at least three such individuals/entities (including the Leader);
 - (4) The Board must determine whether CAMTS Global could obtain a more advantageous transaction with reasonable efforts from a person or entity that would not give rise to a conflict of interest.
 - (5) If a more advantageous transaction is not reasonably attainable, the Board must determine (without the presence or participation of the Leader) that the transaction is fair and in the best interests of CAMTS Global based on all of the facts and circumstances, and such determination (including the fact that it was made in the absence of the Leader) must be documented as part of the meeting minutes (all competing bids received must be retained as well); and If selected, the Leader may not participate in any process by which his/her performance as a vendor or contract recipient is evaluated.
- g. The Board must conduct periodic reviews of any transactions with Leaders to ensure that the corporation's activities do not jeopardize its tax-exempt status.

9. Evaluating and Reporting the Management of Conflicts of Interest:

- a. A roster of reported conflicts of interest will be maintained by the Secretary of CAMTS Global. The Board will conduct an annual evaluation process. The cumulative assessment will be confidentially reviewed by the Ad hoc Ethics Committee for two purposes:

- (1) For further evaluation of conflict management and corrective action as needed.
- (2) For a summary report to the CAMTS Global member organisations with the specific purpose of transparency in managing conflict of interest. Example: “The Leaders of the CAMTS Global Board have confidentially reviewed specific and general conflict of interest management during the past year and found no known material violations of the Statement of Leadership Responsibilities”.

10. Non-compliance

- a. The following (non-exhaustive) list of factors would indicate a violation of this Statement:
 - (1) Use of one’s role as a Leader for personal or third-party gain (including, but not limited to, the solicitation or acceptance of gifts or other items of material value or indirect inducement to provide special treatment on organisation matters).
 - (2) Placing one’s own self-interest, the interest of one’s company, organisation or another entity for which the individual serves in a leadership, employment, or ownership capacity, or the interest of any third party above that of CAMTS Global.
 - (3) Engaging in any outside business, professional or other activities that would directly or indirectly materially adversely affect CAMTS Global.
- b. In the event of a violation of the Statement, the Board may take reasonable action to remedy such violation, including, but not limited to:
 - (1) Voiding any transaction in which an actual, potential, or perceived conflict of interest was present;
 - (2) Requiring the individual in question to make CAMTS Global whole for any damages incurred as a result of his/her violation; and/or
 - (3) Recommending removal of the individual from his/her position with CAMTS Global.

D. Annual Statements

1. Each Leader with Board delegated powers must annually sign a statement that affirms that such person:

- a. Has received a copy of the Leadership Responsibilities policy
- b. Has read and understands the policy
- c. Has agreed to comply with the policy

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Investment Policy Statement

POLICY: The goal is to have 6 months of operating capital readily available in the worst case scenario to cover expenses if there is no income. Short term and long term investments are considered accordingly as income exceeds this threshold and according to the following guidelines.

GUIDELINES:

1. Recommendations regarding investing (relative to percentage of allocation) are the responsibilities of the Executive Committee and must be approved by the Full Board.
2. In general, investment opportunities will be sought with the advisement of a professional investor or investment firm.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Social Media Policy

POLICY: This policy provides expectations of staff, Board members, and site surveyors to utilize social media in a responsible manner when conducting business for or about CAMTS Global in any online platform, regardless of whether during or outside of work; the following guidelines must be followed:

GUIDELINES:

1. Identify yourself. Do not share opinions about CAMTS Global or related matters anonymously.
2. Use a disclaimer and write in first person. Make it clear you are speaking for yourself and not CAMTS Global when sharing opinions about CAMTS Global or related matters unless there is prior authorization from CAMTS Global.
3. Be aware of your role in representing CAMTS Global in online social networks. If readers are aware of your identity as a CAMTS Global employee, Board member, or site surveyor, be careful how you represent yourself to colleagues, customers, competitors and the general public (reference the code of conduct policy). Online correspondence is immediately researchable and accessible by others and subject to being re-published on other social networks or to the media. Be aware that libel, defamation, HIPAA, and data protection laws apply to your activities.
4. If someone from the media, press, or legal authority's contacts employees, Board or site surveyors about posts made in online forums that relate to CAMTS Global in any way, alert the Executive Director/Associate Executive Director or Chair of the Board of Directors before responding.
5. Respect the policy on Confidentiality and HIPPA regulations. Information submitted for accreditation or reviewed on site during a visit is extremely confidential and should not be discussed outside of peer reviews that may have pertinence to compliance with accreditation standards.
6. Be respectful and professional within a social network. When you identify yourself as an employee or affiliate of CAMTS Global, you are connected to other employees and affiliates. Remember that any information shared via social media is public information that could easily be reviewed by anyone. Use good judgment and strive for accuracy. If you make an error in your posting, correct it immediately.

7. When communicating or posting online , do not send or display any information that may be construed as offensive or harassing such as pornographic images, sexual references, racial slurs, comments regarding an individual's age, gender, sexual orientation, religious beliefs, national origin, disability or other characteristic protected by law, or comments that threaten or intimidate another person.
8. When communicating or posting online about CAMTS Global or related matters, it is unacceptable to communicate or post information that defames CAMTS Global its employees and affiliates (Board members and site surveyors), member organisations, medical transport services, etc., and will not be tolerated.
9. Employees, while at work, are not permitted to use electronic communications systems for personal communications, including social networking at any time.
10. Employees, Board members and site surveyors may not maintain an expectation of privacy with respect to public, online communications involving CAMTS Global or CAMTS Global related matters.
11. Violation of this policy may result in termination of employment or dismissal as a site surveyor or Board representative,

[CAMTS GLOBAL POLICY AND PROCEDURE MANUAL](#)

CONSULTATION SERVICE POLICIES	07.00.00
Consultation Service	07.01.00
Consultant	07.02.00
Conflict of Interest	07.03.00
Consultant Fees	07.04.00
Consultant Reimbursement	07.05.00
Contracting for a Consultant	07.06.00
Outstanding Indebtedness	07.07.00
Confidentiality	07.08.00

CONSULTATION PROGRAM POLICIES - 07.00.00

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Consultation Service

GENERAL DESCRIPTION:

The Consultation Program of the Commission on Accreditation of Medical Transport Systems (CAMTS Global) is offered to medical transport services that provide air medical services and ground critical care services and who:

- *Want to measure the quality of the service they provide in comparison to the criteria listed in the CAMTS Global accreditation standards as examined by an informed consultant.*
- *Want to have specific assistance in preparing for an accreditation site visit through a review of:*
 - Documentation, policies and materials requested for accreditation
 - Entire service by a consultant's on-site visit.

CAMTS Global does not guarantee the availability of a consultant. Services that contract with CAMTS Global for a consultant are not required to apply for accreditation and the consultant's role does not guarantee any accreditation outcome if the service is preparing for a site visit by CAMTS Global. *Services will sign a contract with a disclaimer in reference to applying for accreditation and that no accreditation outcome is guaranteed.*

CAMTS GLOBAL CONSULTANTS

Consultants will be chosen (as availability permits) from a pool of professional site surveyors and former board members or executive staff who have a minimum of six years' experience in the field of air medical and/or ground inter-facility transport.

Consultants are responsible for providing the service with a written summary report after completing an onsite visit.

Consultants may not serve as a site surveyor for the contracting service nor for a competing service for a period of four years after the consulting visit.

CONSULTING FEES

Documentation Review

There will be a CHF1000 charge for previewing documents, policies, and materials to be submitted for accreditation applicant.

On-Site Visit

There will be a flat fee of CHF3000 (CHF4000 outside of North America) for the first day with additional charges for travel, food and lodging for the consultant. The service will be billed CHF1000 per day (with additional charges for food and lodging) for every day over the first day. The flat fee is to be paid before the consultation visit. The consultant will be reimbursed by CAMTS Global for expenses and fees. Expenses for consults that require air travel of more than 8 hours (on any one flight – not cumulative flights) require business class travel.

CONFIDENTIALITY

Consultants are not permitted to discuss program information, their findings, or report with colleagues, site surveyors, CAMTS Global personnel, or others outside of the program personnel contracting for these services.

The consultant's report is considered proprietary information and will be sent directly to the service by the consultant. A copy of the report will be kept on file at the CAMTS GLOBAL office for quality improvement purposes only.

HOW TO ARRANGE

Call the CAMTS Global office at 864-287-4177 to ask for a CAMTS Global consultant or request more information about this program.

Consultants will be selected by the Executive Director/Associate Executive Director (from an approved list) based on the time frame and specific needs of the program.

- Executive Director/Associate Executive Director will pre-screen consultants for their interest and time availability before sending CVs to the service.

- Information regarding consultants' backgrounds and expertise (CVs) will be provided to the program that will ultimately choose a consultant.

- Finalizing the specific dates and times of the visit will be the responsibility of individual consultants.

- Programs are required to sign a contract with CAMTS Global outlining the terms of the consultant's role

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Consultant

General Description: Under the direction of the Commission on Accreditation of Medical Transport Systems Board.

Basic Function and Responsibilities: This position, while under formal contract, will conduct a consultative site visit and submit a summary report with recommendations based on past experience to the medical transport service.

Characteristics Duties:

1. Maintains current employment or involvement in medical transport service activities.
2. Complies with CAMTS Global Policies and Procedures.
3. Assists the Executive Director/Associate Executive Director in coordination of schedules each assigned visit.
4. Represents the Commission in a positive manner during all consultative activities.
5. Facilitates a positive relationship with the medical transport service during the consultative role by:
 - a. Communicating in a positive, open manner
 - b. Representing a positive image of CAMTS Global by presenting self in a professional manner.
6. Maintains current knowledge of Accreditation Standards and participates actively in recurrent training and revisions of these standards.
7. Prepares a written report which may include recommendations made to the service based on the consultant's past experience. This report is sent directly to the program within 30 days of the consultation visit. A copy is kept on file at the CAMTS Global office for quality improvement purposes.
8. Consultants may not serve as a site surveyor for the contracting service nor for a competing service for a period of four years after the consulting visit.
9. Prepares a payment voucher for expenses and fees and submit to the CAMTS Global office within 14 days of the site visit.
10. Performs duties only as a consultant and will not speculate about the outcome of an accreditation site visit.

11. Maintains strict confidentiality and does not discuss findings or recommendations with peers.
12. Consultants will sign a contract outlining the terms of each consultation visit. Original to be filed with the Commission office and a copy for the consultant's records. Consultants will also receive a copy of the contract signed by the contracting service.

Minimum Qualifications:

1. Six (6) years of medical transport experience and currently employed with an air medical service /ground critical care **OR** recent experience (within four (4) years), and currently involved in air medical or ground interfacility service activities.
2. Must be a current or former site surveyor. Former Board members or Executive Staff are eligible but must have served on the CAMTS Global Board of Directors for a minimum period of two years within the past four years.
3. Must have well-rounded experience or broad knowledge associated with managing a medical transport service.
4. Effective communication/interpersonal skills to interface with all services.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Conflict of Interest

POLICY: In order to preclude a potential conflict of interest with consultants, the following guidelines will be adhered to:

GUIDELINES:

A. The consultant will not accept an assignment in which he/she has had a previous capacity (within the past 4 years) as a site surveyor.

B. The consultant will not accept an assignment to conduct an accreditation site visit within four years of a consultation visit:

- To the program with which there was a consultative relationship.
- To a competing program of the service with which there was a consultative relationship.

SUBJECT: Consultant Fees

POLICY: Consultants will be reimbursed according to the following guidelines:

GUIDELINES:

A. Travel, daily room and board expenses incurred directly relating to a consultation visit will be paid by CAMTS Global. The consultant will receive CHF1000 for the one-day on-site visit and will be reimbursed for travel and on-site days at the per diem rate in Policy 07.05.00. Consultants are not reimbursed for alcoholic beverages.

B. An honorarium of CHF500 per day will be paid for each additional day on-site. Preparation time, travel time, time on site, and time to prepare a summary report are considered part of the per-day on-site fee and are not compensated additionally.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Consultant Reimbursement

POLICY: Travel expenses are reimbursed to consultants according to the following guidelines:

GUIDELINES:

A. Consultants must submit completed expense vouchers and receipts within 14 days of visit.

B. Original receipts are required for all expenses listed on the expense voucher. (Appendix G)

C. Reimbursement Limitations

1. Air travel - Reimbursement is limited to the lowest available rate via the most direct route, except under extenuating circumstances.
2. Rental Care or Private Auto - If private auto is used, reimbursement will be made at the prevailing rate allowed by the IRS.
3. Hotel - Reimbursement will be made for reasonable lodging expense (single occupancy rooms, not a suite). If a member of the traveller's family shares a room, the equivalent single occupancy charge should be included on the voucher for reimbursement. A copy of the hotel statement must accompany the voucher. Personal phone calls and movie rentals are not reimbursable.
4. Meals – There is a CHF50 per day per diem rate paid for each day on site and for travel days if travelling the day before and/or the day after the site visit. This per diem is for meals and tips. The per diem for meals and tips for travel beyond North America will be CHF75 day for U.S. based surveyors and CHF75 per day for travel beyond Global for Globalan based site surveyors.
5. Taxi and Telephone - Reimbursements are made for necessary taxi (to and from airport, for example). Use of courtesy van or multi-passenger transport is required when available. Telephone calls are reimbursed only if applicable to the survey process.
6. Other - The Commission is not responsible for "overnight" shipping costs (will pay at the regular rate) if a consultant is late in submitting a summary unless there were extenuating circumstances or if specifically requested by the Executive Director/Associate Executive Director.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Contracting for a Consultant

POLICY: The following guidelines list the steps to be taken in contracting for a consulting visit.

A. Program sends a letter or contacts the Executive Director/Associate Executive Director of CAMTS Global.

B. Consultation visit arrangements

1. Preliminary arrangements are made between program and the Executive Director/Associate Executive Director who will provide a list of consultant names and description of the consultant's background and experience (CVs) after screening interest level and time commitment with the consultants.
2. The program will select a consultant. The CAMTS Global office will make the initial contact with the consultant. Arrangements for specific dates and times travel and agenda will be made between the consultant and the program after the initial contact is made and the consultant accepts the assignment.
3. Consultants and program contracting for this service will sign a contractual agreement with CAMTS Global which includes a disclaimer that:
 - A consulting relationship does not require the service to apply for accreditation with CAMTS Global.
 - A consulting relationship does not guarantee any accreditation outcome if the service is applying for accreditation with CAMTS Global.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Outstanding Indebtedness

POLICY: CAMTS Global will not accept an application for accreditation from a service who received consultation services (from CAMTS Global) with an outstanding overdue debt until that debt has been paid.

Any Program that is delinquent in the payment of CAMTS Global fees or has an outstanding debt to CAMTS Global will not be eligible for accreditation review until the delinquency or outstanding debt is resolved to the satisfaction of CAMTS Global. Delinquent or indebted Programs may also be subject to the immediate withholding or withdrawal of any current accreditation.

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

SUBJECT: Confidentiality

POLICY: All information and recommendations resulting from a consultation visit are considered proprietary information of the contracting service.

GUIDELINES:

1. The Commission will not disclose the names of services who have requested a consultation visit.
2. The consultant's written report will go directly to the contracting service. Copies are filed with CAMTS Global for internal quality improvement purposes only.
3. Board members are not permitted to serve as a consultant while serving on the CAMTS Global Board of Directors.
 1. The board of directors, as a unit, will not be involved with problems dealing with a specific consultation. Any ethical problems resulting from a consultation will be referred to the Ethics Review Board.
 2. Personnel and process issues will be resolved by the Site Surveyor Selection Committee. Board members serving on this committee and dealing with a consultation issue would be exempt from future accreditation deliberations (for the next four years) for that service.

LETTER AGREEMENT

Applicant understands that CAMTS Global is a Peer Review Organisation, where other providers of medical transport services serve on the Commission and will review our application and information during the tenure of accreditation.

Applicant understands that the **governing agency** of my principle operating environment may be contacted to verify licensure, if applicable and to notify of accreditation actions and decisions in states or other governmental agencies that require CAMTS Global accreditation as part of their process.

Applicant understands that research on background information that is on public record including but not limited to previous litigation, aviation history, business incorporation, insurance verification, information received from public notification, complaints and concerns etc. may be considered part of the accreditation process.

Applicant understands that outcomes of a site visit (as approved by the Board of Directors) will be shared with upper management of the organisation and contributors to the application such as the Part 135 Certificate Holder or **Authority Having Jurisdiction (AHJ)** and/or ambulance operator.

*Any claim or controversy that arises out of or related to this agreement, or the breach of it, shall be settled by arbitration in accordance with the rules of **Authority Having Jurisdiction (AHJ)**. Judgment upon the award rendered may be entered in any court with jurisdiction.*

Applicant acknowledges that it has reviewed the current CAMTS Global Policy and Procedure Manual ("Manual") and hereby accepts and agrees to the policies and procedures of CAMTS Global as set forth in the Manual, which may be amended from time to time. I also acknowledge that the most current version of the Manual is located on, and may be obtained from, the CAMTS Global website (www.camtsglobal.org) or by submitting a written request for a copy to CAMTS Global, Churerstrasse 135, 8808 Pfäeffikon, Switzerland.

I also understand that the Commission will publish the names of all medical transport services accredited by the Commission on Accreditation of Medical Transport Systems Global.

Name of medical transport service: _____

Date: _____

Applicant City/State or Country of Origin: _____

Officer Signature: _____

Officer Name/Title (*please print*): _____

B. Applicant's Verification of Information

The undersigned Applicant, by its authorized officer, hereby certifies that it has reviewed the Program Information Form ("PIF") and all of the information contained herein, or submitted in support of the application for accreditation, and verify that the information is accurate and complete.

We are applying for:

- ☐ RW ☐ FW ☐ Ground Critical Care ☐ Ground ALS ☐ Ground BLS
☐ Surface (other than ground) – Please Specify: _____

(Check all that apply above)

I understand that we meet the eligibility requirements as applicable for CAMTS Global accreditation as listed below:

- Our service has been in operation for at least one (1) year.
- Two patient care providers are required for ALS or critical care transports.
- Our air transport service operates under:
 - ☐ FAA Part 135 certificate or is operated by a FAA Part 135 certificate holder.
 - ☐ EASA certificate or is operated by an EASA certificate holder.
 - ☐ TC certificate or is operated by a TC certificate holder.
 - ☐ Other AHJ, please name this Authority Having Jurisdiction _____
- Our air medical service carries hull insurance for each aircraft operating in the EMS environment and aircraft liability coverage and/or ambulance insurance **consistent with national norms.**

 (Please print name and title of principal official)

 (Signature of principal official)

 (Date)

 (Name of medical transport service)

 (City)

 (State, Province, or Country)

 (Zip or postal code)

C. Use of Photos

We acknowledge that the audit process designed for use in consult and accreditation site visits may include photos to indicate compliance with standards or to demonstrate the audit process for use in marketing materials, such as in brochures or displays.

CAMTS Global agrees that you are entitled to approve use of photos. These photos will not include patient identification in accordance with **Authority Having Jurisdiction (AHJ)** patient privacy rights and will be in respect of intellectual property rights (meaning any and all rights existing from time to time under patent law, copyright law, trade secret law, trademark law, unfair competition law and related laws, and any and all proprietary rights, and any and all applications, renewals, extensions, and restorations thereof, now or hereafter in force and effect worldwide).

The CAMTS Global site surveyor or consultant will take photos as part of the audit process to be submitted with their report to the CAMTS Global Board of Directors as part of the accreditation process or to be included in the consult report that is not shared with the CAMTS Global Board of Directors. Your signed approval indicates photos taken openly and in the presence of personnel have been approved. Photos are always de-identified (program names or logos are blacked out) if used as part of an accreditation review process or presentation to maintain the integrity and confidentiality of the process. Programs reviewed by the Board are only identified by a number.

If specific photos that identify the program are selected for use in CAMTS Global marketing and promotional materials, additional signed permission will be required.

Print name and date	<u>Eileen Frazer, Executive Director</u> Print name
Signature	_____ Signed by
Program and State, Province, or Country	Commission on Accreditation of Medical Transport Systems Global

BOARD OF DIRECTORS—MEMBER AGREEMENT
COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

BOARD MEMBER AGREEMENT (“Agreement”) dated _____ by and between
COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL
(**“CAMTS GLOBAL”** or **“Commission”**), (**“Board Member”**), and (**“Member Organisation”**).

GENERAL UNDERSTANDINGS

1. CAMTS GLOBAL is an organisation that offers an internationally recognized accreditation to providers of medical transport services that satisfy certain criteria and meet certain standards.
2. CAMTS GLOBAL desires to engage the services of _____ as a member of its Board of Directors, as appointed by [his/her] Member Organisation, _____, pursuant to the terms of this Agreement.
3. Unless properly terminated or amended, this Agreement shall remain in effect through the term of appointment by the Member Organisation.
4. Members of the Board of Directors are not employees of CAMTS Global and receive no compensation for their services and serve for the improvement of medical transport services. Reimbursement for expenses is outlined in the CAMTS Global Policies and Procedures, as approved by the Board of Directors.

OBLIGATIONS OF THE BOARD MEMBER

1. The Board Member shall serve as a member of the Board of Directors for the Commission by fulfilling the following expectations:
 - a. actively assisting in setting the direction of the Commission;
 - b. developing and approving accreditation standards and policies, serving on committees, and contributing to accreditation decisions;
 - c. actively participating in a minimum of two (2) in-person Board meetings annually and 80% of electronically conducted Board meetings annually;
 - d. possessing recent or current experience with medical transports in a minimum of two of the following categories: administration, medical, aviation, communications, or ground medical transport;
 - e. reviewing accreditation materials and actively participating in presenting reports and recommendations;

CAMTS Global/PPM Approved:

- f. voting on accreditation actions;
 - g. upholding the mission and policies of the Commission and presenting a positive image to the public;
 - h. participating in short and long-term planning for and of the Commission;
 - i. approving annual budgets (capital and operating) and devising strategies for cost-effective management of the budget;
 - j. acting as a liaison between member organisations and the Commission in a manner that assures two-way communications;
 - k. actively serving on a committee and completing activities as required; and
 - l. utilizing positive, effective communications in serving as a role model and resource person for the Commission.
2. The Board Member shall follow the Commission's Policies and Procedures related to any actual, potential, or perceived conflicts of interest. Board Members will excuse themselves from any discussions or votes related to any actual or potential conflict.
 3. The Board Member shall serve the Board as an independent thinker, considering the best interests of CAMTS Global, the programs applying for accreditation by CAMTS GLOBAL and general medical transport. Board Members are not to represent nor advocate for the Member Organisation unless such representation or advocacy also represents the best interests of CAMTS Global.
 4. The Board Member shall not discuss any information concerning the Medical Transport Service or its operations with any third party, except as outlined in the CAMTS Global Policies and Procedures.
 5. The Board Member shall not accept an assignment to review or present a Medical Transport Service Provider for whom the Board Member has served as a CAMTS Global consultant within the past four (4) years.
 6. The Board Member shall not operate as a paid consultant for the purpose of assisting a Medical Transport Service Provider through the CAMTS Global accreditation process.
 7. If in good standing with the Board, the Board Member, when rotating off of the Board, will assist in the orientation of their replacement.

OBLIGATIONS OF THE MEMBER ORGANISATION

The MEMBER ORGANISATION shall:

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1. Carefully select and nominate a Board Member to represent the Member Organisation. The nominee should provide an expertise in the discipline supported by the Member Organisation and have experience in medical transport. Because of the learning curve for new Board Members, the appointment should be for no less than three years but may extend for as long as the Member Organisation determines, as long as consistent with the terms of this Agreement.
2. Provide financial support for expenses incurred by its Board Member representative as defined by the Member Organisation.
3. Receive and disseminate CAMTS Global information provided by its Board Member representative, to its governing body and/or membership, as deemed appropriate by the Member Organisation.
4. Provide input to its Board Member representative on any CAMTS Global-related issues, standards, policies, and/or procedures.

OBLIGATIONS OF THE COMMISSION

In return for the acceptable performance of all obligations by the CAMTS Global Board Member and Member Organisation as set forth in this Agreement, the Commission shall:

1. Reimburse for travel expenses not otherwise covered by the supporting Member Organisation up to the maximum amount set forth in the CAMTS Global Policies and Procedures.
2. Provide insurance to its Board Members while they are acting in their official capacity as a Board Member, as provided in the CAMTS Global Policies and Procedures and as directed by the Board. Such insurance shall include:
 - a. Non-Profit Directors and Officers Liability;
 - b. Travel Insurance; and
 - c. Worker's Compensation Insurance.

RIGHT OF REFUSAL

Because the CAMTS Global Board places a high value on quality and fairness, the Board reserves the right to screen, interview and/or decline a Member Organisation Board Member nominee if, in the opinion of Board, the nominee does not poses a strong background that reflects the principles and values of CAMTS Global, lacks prior experience with CAMTS Global policies and/or process, or may represent a limited functionality to the Board due to potential conflicts in time or in Board deliberations.

BREACH AND CURE

If at any time, the CAMTS Global Board, the Board Member, and/or the Member Organisation

CAMTS Global/PPM Approved:

determine that the Board Member is unable or unwilling to meet the obligations set forth in the Agreement, the determining party shall promptly give written a notice of such determination to

the other parties to this Agreement. Upon receipt by all parties of such notice, the Board Member shall cease serving in such role immediately, unless all parties to this Agreement reach a different resolution via a writing signed by all parties. Within ninety (90) days of a Board Member ceasing to serve in such capacity, the Member Organisation shall submit a new nominee or list of nominees to the CAMTS Global Board for its consideration. The CAMTS Global Board will work with the Member Organisation to assure that candidates being considered do not create an undue hardship to the CAMTS Global Board by creating actual, potential, or perceived conflicts (e.g., too many Board Members from the same company or region, too many individual conflicts that would reduce the Board Members' productivity on the CAMTS Global Board, etc.).

This Agreement contains the entire agreement among the parties and supersedes all prior oral and written statements, and there are no terms or conditions except those specifically set forth herein.

IN WITNESS WHEREOF, the Board Member, the Member Organisation and the Commission have executed this Agreement in triplicate originals, one of which is retained by the Board Member, one of which is retained by the Member Organisation and one of which is retained by the Commission, and the day and year first above written.

BOARD OF DIRECTORS—MEMBER AGREEMENT

COMMISSION ON ACCREDITATION OF MEDICAL TRANSPORT SYSTEMS GLOBAL

Signature Page

Signature of the Board Member Date: _____

Witness by: _____ Date: _____

Signature of Witness

Signature of Member Organisation Representative Date: _____

Title: _____

Witness by: _____ Date: _____

Signature of Witness

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Signature of the
Commission on Accreditation of Medical Transport Systems Global Representative Date: _____

Title: _____

Witness by: _____ Date: _____

Signature of Witness