**A Blueprint for an Efficient and Successful NAME Accreditation Inspection**

The National Association of Medical Examiners (NAME) core Inspection and Accreditation program is a peer review process performed by a certified inspector, sometimes accompanied by a ride-along inspector for training purposes, and overseen by the Inspection and Accreditation Committee.

The NAME accreditation requirements and guidelines are embodied in the Inspection and Accreditation Checklist, which is filled out and submitted by the office requesting inspection and reviewed by the inspector assigned to the office prior to the actual on-site visit. Phase II checklist items are requirements for full accreditation. While phase I Items are ideally met but the office has more leeway and can accumulate some phase I violations and still be fully accredited.

The inspection process has been greatly facilitated and streamlined by the electronic submission of the completed checklist, along with accompanying documentation. As your office prepares its response to each checklist item, it is essential to keep in mind that your peer inspector is a volunteer who does not know your death investigation system, your facility, your capabilities, and your collaborations.

Most of your yes, no, and NA responses are automatic to you because you work **in** your accredited office. The inspector must verify your responses. He/she does not know your system and must rely on explanations and supportive documentation to verify your responses. Assume nothing; put yourself in the place of the inspector to facilitate an efficient process.

Aside from a few yes, no, and NA responses that are self-evident, your checklist item responses must efficiently lead the inspector to a verification of that response. This is accomplished by entering comments, attaching documents and examples, and/or submitting photographs. The inspector must be able to verify most of your responses while reviewing the submitted checklist from afar, **before** he/she conducts an on-site visit.

Such documentation can include written materials as well as photographs. In order for an on-site visit by the inspector to run smoothly and efficiently, it is important that the following steps be followed:

* All available documentation should be attached to specific checklist items when the checklist is submitted. If your office is uploading your policies and procedures as one document, please refer to the appropriate sections/page numbers headings in the boxes provided for comments beneath each checklist item.
* Copies of physicians’ licenses and certifications, laboratory accreditations (even if your office is using off-site laboratories), investigators’ ABMDI certifications, consultants’ credentials, etc, should also be uploaded to the relevant checklist items.
* The uploading of photographs is very useful since it allows the inspector have a visual impression of relevant items or areas of the facility.

There has been some confusion in the past pertaining to the submission of written and photographic documentation when other agencies/institutions are responsible for the materials or activities related to a checklist item. In such instances, it is not appropriate to answer the checklist item as “not applicable” (N/A) Two examples follow:

* A medicolegal death investigation system that is housed in a hospital or medical center and therefore such things as personnel matters, facility maintenance, etc, fall under the institution’s auspices. \*\**It is still the office’s responsibility to provide the relevant policies and/or documentation for the inspector’s review.*
* If an office uses an outside service to transport bodies. \*\**It is still the office’s responsibility have a transport vehicle available for the inspector to observe, as well as to provide documentation of proper maintenance, such as a maintenance contract.*

Please understand that your inspector will need time to verify that the appropriate materials have been submitted prior to scheduling the date for the on-site visit. Keep in mind that uploading these materials allows the inspector to review them ahead of time, and may provide an opportunity to identify, communicate about and request additional materials to rectify issues prior to the on-site visit.

Some examples of appropriate responses to checklist items include the following:

* Office Profile, Section E (Annual Statistics): Statistics must reflect the prior calendar year unless not practical to generate (i.e., if the inspection is timed shortly after the end of a calendar year).
* General, 1.c.: “Are copies of the currently applicable statutes governing the operation of the office available and on file in the office?” A “yes” response should be supplemented by an attached copy of state law/code and a statement of how the law/code is available to office employees (e.g., in a binder in the investigations area of the office).
* General, 2.b. Is access to the facility controlled? For this question, a copy of a policy and photographs of secured doors could be uploaded. The responder could state in the Comments box “All building entrances are cardlock controlled and are subject to CCTV monitoring. Policy and photographs attached.”
* General, 3.b.: “Is each pathologist’s office furnished with a desk, shelves, file cabinets, microscope, and dictation equipment?” A “yes” response should be accompanied a photograph of a pathologist’s office.
* General, 7.d.: “Has the office participated in local or regional mass disaster exercises?” A “yes” response should state dates and collaborators of recent mass disaster exercises and/or provide copies of certifications of the exercises in which office staff participated.
* General, 8.e.: “Is there documentation of corrective action taken for identified deficiencies?” A “yes” response should be supported by a deidentified example of the office form and documentation of corrective action.

Ultimately, following this process makes good office inspection preparation a thorough and detailed job. Simply clicking “yes” is no longer adequate, as it is now so easy to link documentation. And clearly, for the sake of the inspector’s sanity, simply linking up a voluminous policy/procedure manual is insufficient preparation.

The advantages provided by adapting this new approach are several. For the office, it is an opportunity to conduct a thorough internal review and to clearly demonstrate that what is said to be true is actually true. Also, the admittedly large task of linking up all appropriate policies, procedures, and photographs to the inspection web site is done once it is done; for future inspections, while portions may need to be updated or modified, this is a minor task compared to the initial work. For the inspector, this makes much better use of your time – most of your inspector’s work can now be done on a computer, from the inspector’s office or at home, at his/her convenience.

If an office does not follow these procedures, expect your assigned inspector to contact you requesting that you do so. This necessitates reopening your checklist and may very well delay the office’s site visit.