

PURSUIT AND ACHIEVEMENT OF EMERGENCY MANAGEMENT PROGRAM
ACCREDITATION

A Dissertation
Submitted to the Graduate Faculty
of the
North Dakota State University
of Agriculture and Applied Science

By

Marcelo Mantovani Ferreira

In Partial Fulfillment of the Requirements
for the Degree of
DOCTOR OF PHILOSOPHY

Major Department:
Emergency Management and Disaster Science

April 2022

Fargo, North Dakota

North Dakota State University
Graduate School

Title

PURSUIT AND ACHIEVEMENT OF EMERGENCY MANAGEMENT
PROGRAM ACCREDITATION

By

Marcelo Mantovani Ferreira

The Supervisory Committee certifies that this *disquisition* complies with North Dakota
State University's regulations and meets the accepted standards for the degree of

DOCTOR OF PHILOSOPHY

SUPERVISORY COMMITTEE:

Dr. Jessica Jensen

Chair

Dr. Carol Hackerott

Dr. Sarah Kirkpatrick

Dr. Dane Mataic

Approved:

April 10, 2022

Date

Dr. Jessica Jensen

Department Chair

ABSTRACT

While accreditation of emergency management programs has been available for more than two decades, very few emergency management programs are accredited, particularly at the local level. This study examined what may facilitate or hinder the pursuit and achievement of Emergency Management Accreditation Program (EMAP) accreditation by emergency management program leaders (EMs) in programs located in a United States city with a population over 300,000 (n=69). The multidisciplinary accreditation body of literature has not matured to the point of offering a theoretical or statistical model which could guide quantitative work on the topic. Additionally, accreditation is understudied in the context of emergency management. A qualitative approach to the research was most appropriate for these reasons. In-depth interviews with thirty EMs were conducted using the Responsive Interviewing Model (Rubin & Rubin, 2012) to gather rich data related to the research questions and analyze it. The study results in a series of key findings and recommendations related to practice and research. Findings related emergency management, suggest: a) perceptions of EMs are the most important facilitator or barrier of formal pursuit of accreditation, b) emulating The Emergency Management Standard (2019) is critical to understanding the commencement of formal pursuit, c) local emergency management compliance with structuring mechanisms does not result in compliance with The Standard, and the relationship between them is not explicit or otherwise apparent, and d) while most EMs interviewed as part of this study knew of The Standard and EMAP, and valued it, awareness could be improved. Related to the accreditation body of knowledge, the results suggest: a) program leaders may have more influence than the body of accreditation work might lead one to believe, particularly in the absence of extrinsic forces, b) some facilitators and barriers to accreditation may be heavily influenced by more than one

category, c) a period of emulation was required and pursuit was delayed until the program leader believed accreditation would be achieved once the formal process got underway, and d) the period leading to formal instigation was that the most important to both pursuit and achievement.

ACKNOWLEDGMENTS

In writing this dissertation, I have received significant support and encouragement which made this all possible.

I would like to genuinely thank my dissertation advisor, Dr. Jessica Jensen, for your considerate guidance, professional insights, and support throughout this process. Your insights led to key discoveries and your partnership was integral for this study. This project would not have been possible without your dedication to my pursuit of this degree and contributions to this project. Your commitment to enhancing education and research in emergency management is an inspiration for the continued professionalization of the field.

I would also like to extend my thanks to my dissertation committee, Dr. Sarah Kirkpatrick, Dr. Caroline Hackerott, and Dr. Dane Mataic, for your advice and strong guidance during this study. Your experience, wisdom and expertise has enhanced my knowledge to better serve as a catalyst for growth in the field.

I am also extremely grateful to the emergency managers who devoted their time to support this study amidst an ongoing response to the global pandemic. Your dedication to the field and to public service is an inspiration and I thank you for your expertise and diligence in service.

Finally, I would like to thank Nicole Cantrell, who has been a consistent source of support and encouragement throughout my pursuit for higher education. I appreciate your insight and understanding into the complexities of the field. Thank you for your continued motivation to “get it done.”

DEDICATION

This paper is dedicated to my mother – a source of inspiration and a role model of resilience and resolve. My achievements would not be possible without your unwavering love and support.

TABLE OF CONTENTS

ABSTRACT.....	iii
ACKNOWLEDGMENTS	v
DEDICATION.....	vi
LIST OF TABLES.....	x
LIST OF FIGURES	xi
LIST OF ABBREVIATIONS.....	xii
CHAPTER ONE: INTRODUCTION.....	1
Accreditation	1
Accrediting Bodies	2
Critiques and Benefits of Accreditation	5
Emergency Management Accreditation	6
Challenges in the Standardization of Emergency Management.....	7
Emergency Management Standard (2019) by EMAP.....	9
City Emergency Management Programs.....	12
Significance.....	13
Conclusion.....	14
CHAPTER TWO: LITERATURE REVIEW.....	15
Emergency Management Accreditation Program (EMAP) Literature.....	15
Accreditation Literature	16
Conceptual Model for Programmatic Achievement of Accreditation.....	17
Macrosystems	19
Microsystems.....	25
Surrounding Context	29
Accrediting Body.....	30

Implication for Methodology	31
Conclusion.....	32
CHAPTER THREE: METHODOLOGY	33
Methodological Approach.....	33
Sampling Procedures.....	34
Data Collection.....	36
Data Analysis	39
Sample Characteristics	41
Emergency Management Leader (EM) Characteristics	42
Emergency Management Program & City Characteristics	43
Researcher as a Participant.....	45
Limitations	46
Summary	47
CHAPTER FOUR: PURSUIT OF ACCREDITATION	49
Value	51
What a Good Program Entails.....	51
Benchmarking.....	52
Validation	54
Lack of Intrinsic Value	56
Structuring Mechanisms.....	60
Governmental Requirements	60
Hazardscape.....	65
Capacity.....	66
Emulating	69
City Support	75

Other Added Investment	83
Conclusion.....	87
CHAPTER FIVE: ACHIEVEMENT OF ACCREDITATION	89
Steps to Accreditation	89
Activation	95
Conclusion.....	98
CHAPTER SIX: DISCUSSION	100
Implications and Recommendations Related to the Role of the EM	101
Implications and Recommendations Related to Structuring Mechanisms, Capacity, and Emulation	106
Revisiting the Literature.....	110
Conclusion.....	117
CHAPTER SEVEN: CONCLUSION	119
Key Findings and Recommendations for Practice	119
Key Findings and Recommendations for Research	120
REFERENCES	123
APPENDIX A: EMAP ACCREDITED PROGRAMS	147
APPENDIX B: EMAP STANDARD.....	149
APPENDIX C: INVITATION EMAIL	151
APPENDIX D: INFORMATION SHEET	152
APPENDIX E. INSTITUTIONAL REVIEW BOARD APPROVAL	154
APPENDIX F. INTERVIEW GUIDE – EMAP ACCREDITED PROGRAMS	155
APPENDIX G. INTERVIEW GUIDE – EMAP NONACCREDITED PROGRAMS	158
APPENDIX H. EMAP FEES (EMAP, 2020a).....	162

LIST OF TABLES

<u>Table</u>	<u>Page</u>
1. Proportion of Programs Accredited	10
2. Emergency Management Leader (EM) Characteristics	42
3. Emergency Management Program Characteristics	44
4. Relationship of Study Themes to Categories	111

LIST OF FIGURES

<u>Figure</u>	<u>Page</u>
1. Conceptual Model for Programmatic Achievement of Accreditation	18

LIST OF ABBREVIATIONS

ABA	American Bar Association
ABET	Accreditation Board for Engineering and Technology
ANS.....	American National Standards
ANSI	American National Standards Institute
CARF	Commission on Accreditation of Rehabilitation Facilities
CCNE.....	Commission on Collegiate Nursing Education
CEM.....	Certified Emergency Manager
CFAI	Commission on Fire Accreditation International
CHEA.....	Council for Higher Education Accreditation
COA	Council on Accreditation
DEAC.....	Distance Education Accrediting Commission
DHS.....	U.S. Department of Homeland Security
DOE	Department of Education
DRI.....	Disaster Recovery Institute
EOC.....	Emergency Operations Center
EM.....	Emergency Management Leader
EMAP	Emergency Management Accreditation Program
EMBAG	Emergency Management Baseline Assessment Grant
HLC.....	Higher Learning Commission
IAEM	International Association of Emergency Managers
ISO	International Standards Organization
JC	The Joint Commission on Accreditation of Healthcare Org.
NACo	National Association of Counties
NEMA.....	National Emergency Management Association

NFPANational Fire Protection Association

CHAPTER ONE: INTRODUCTION

The Emergency Management Accreditation Program (EMAP) has been endorsed as the standard for emergency management practice by leading organizations and associations within the emerging profession. Yet, few local, state, tribal nation, federal (U.S.), higher education institution, international, or private sector emergency management programs have pursued accreditation against these standards (n=112). Furthermore, there is little empirical research into EMAP in general, including the use of the standards in practice. This study explored conditions that lead to EMAP accreditation. Specifically, the research questions for this study were: 1) what facilitates or hinders the pursuit of EMAP accreditation by city emergency management programs? 2) what facilitates or hinders the achievement of EMAP accreditation by city emergency management programs?

Accreditation

Accreditation refers to “the action or process of officially recognizing someone as having a particular status or being qualified to perform a particular activity” (Oxford Dictionary, 2021a). Many fields use accreditation to measure programs, products, and management systems against a standard. Accreditation acknowledges achievement of a set of standards. A standard refers to “something used as a measure, norm, or model in comparative evaluations,” or may be a “level of quality or attainment” (Oxford Dictionary, 2021b). Standards are the measure used to assess performance, while the achievement of accreditation is realized through an assessment based on those predefined standards. An accrediting body may develop a set of standards or adopt standards from an organization that administers and coordinates consensus-based standards from across fields (e.g., American National Standards Institute [ANSI], International Standards

Organization [ISO]). “In the U.S. alone, there are more than 95,000 recognized standards” (Kelly, 2003, slide 5).

Recognized globally, “ISO is an independent, non-governmental international organization with a membership of 165 national standards bodies” (ISO, 2021a). ISO coordinates the development of standards that independent bodies may use to provide accreditation or certification, but ISO itself does not certify or accredit (ISO, 2021b). In the United States, the American National Standards Institute (ANSI) is the standards body which serves as a member of ISO. As a “coordinator and facilitator of the U.S. voluntary consensus standards and conformity assessment system,” ANSI serves as “an accreditation body for U.S. standards developers, U.S. Technical Advisory Groups, and U.S. certification programs” (Kelly, 2003, slide 7). Meaning, ANSI does not accredit individual organizations. “ANSI does not write standards; rather, the institute accredits standards developers that will establish consensus among qualified groups” (ISO, 2021c), which encompass 240 distinct organizations currently accredited to develop and maintain more than 11,000 American National Standards (ANS)” (ANSI, 2019).

Accrediting Bodies

There are several accrediting bodies associated with different fields in the United States; however, acceptance and use of accreditation is not guaranteed within all those fields. Two fields, in particular, have had success in implementing accreditation. Healthcare and higher education have widely adopted accreditation as a method of verifying quality. The primary accrediting bodies in healthcare include the Joint Commission on Accreditation of Healthcare Organizations (JC), the Council on Accreditation (COA), and the Commission on Accreditation of Rehabilitation Facilities (CARF). In higher education, the Council for Higher Education Accreditation (CHEA), the Higher Learning Commission (HLC), the Distance Education

Accrediting Commission (DEAC), and regional accrediting bodies for higher education institutions accredit at the institutional level. Accreditation is also conducted by other academic discipline-specific bodies, such as the American Bar Association (ABA) for law, the Accreditation Board for Engineering and Technology (ABET) for engineering, and the Commission on Collegiate Nursing Education (CCNE) for nursing. The application of accreditation within healthcare and higher education demonstrates the extent to which accreditation may be applied in a field where it is valued as a benchmark for quality and given extrinsic motivation to comply. Previous studies involving accreditation in healthcare and higher education can help to provide context due to the limited research into accreditation in emergency management.

Healthcare

Healthcare accreditation has been in place since 1917 (Alkhenizan & Shaw, 2011). Even though there are challenges in achieving accreditation, many healthcare entities seek accreditation due to the benefits (Alkhenizan & Shaw, 2011; Greenfield, Pawsey, Hinchcliff, Moldovan, & Braithwaite, 2012; Pomey et al., 2010). Benefits of healthcare accreditation include liability insurance cost reduction, and fulfillment of regulatory requirements in some states (Joint Commission, 2021). The importance of utilizing accreditation standards in the field is evidenced by the proportion of healthcare facilities working to achieve or maintain voluntary accreditation. For example, the JC currently accredits around 80 percent of hospitals in the United States. Comparatively, around 35 percent of other healthcare facilities are accredited by the JC, while an additional 24 percent are accredited by CARF (Statista, 2020). Literature regarding healthcare accreditation suggests a positive relationship between accreditation and performance (Alkhenizan & Shaw, 2011; Pomey et al., 2010; Ritchie et al., 2019), quality

(Alkhenizan & Shaw, 2011; Shawan, 2021), safety (Shaw et al., 2014), stakeholder perceptions (Parthasarathy, Subramanian, & Quan, 2014; Pomey et al., 2010; Ritchie, Ni, Stark, & Melnyk, 2019), and continuous improvement (Pomey et al., 2010; Shaw et al., 2014).

Higher Education

Non-governmental bodies perform higher education accreditation in the United States through a self-regulatory and peer-review process. Accrediting bodies in higher education emerged in the 1890s and evolved alongside the growth of colleges and universities. The evolution of accreditation in higher education changed how institutions are assessed (Brittingham, 2009; Prince, 2012). The initial focus on inputs and resources shifted toward processes, outcomes, and effectiveness (Brittingham, 2009; Prince, 2012). As Brittingham (2009) described, “standards have moved from quantitative to qualitative, from prescriptive to mission centered, from minimal to aspirational” (pg. 15). Instead of solely focusing on the size of the library or faculty credentials, considerations such as the quality of instruction and access to resources are emphasized. Currently, either programs or institutions are accredited in higher education (Baker, 2002; Harvey, 2004; Lubinescu, Ratcliff, & Gaffney, 2001).

Accreditation in higher education is encouraged by the Higher Education Act, which includes an accreditation requirement for student and institution access to federal funding. The Department of Education (DOE) recognizes approved accrediting bodies with authority to conduct accreditation, maintains a database of accredited postsecondary institutions and programs (DOE, 2021) and links funding to accreditation (DOE, 2021; Harvison, 2018). In some professions, attending a nonaccredited college or university yields harmful consequences. For example, many states require graduation from an accredited institution of higher education to take the bar exam and practice law (Currier, 2001; Dykstra, 1995; Ramsey, 1995).

Critiques and Benefits of Accreditation

The accreditation literature evidences mixed results regarding the value of accreditation, including the extent to which accreditation leads to effectiveness and quality. In healthcare, only sporadic evidence for improving quality or effectiveness in entities seeking accreditation has been found (Brubakk, Vist, Bukholm, Barach, Tjomsland, 2015; Greenfield et al., 2012; Nawal, Sikka, Mehta, & Lipsky, 2009; Peacock et al., 2013). A possible reason for challenges in measuring effectiveness or impact from accreditation may be organizational complexity and the diverse nature of entities seeking accreditation, such as hospital organizations (Brubakk et al., 2015). In higher education research, critiques noted the universal application of standards in schools regardless of context, such as the size of the school (Perryer & Egan, 2015). Furthermore, many have noted that accreditation is often expensive and time-consuming (Avolio & Benzaquen, 2020; McKee, Mills, & Weatherbee, 2005; Perryer & Egan, 2015; Roller, Andrews, Bovee, 2003; Yunker, 2000).

Despite the critiques, some studies have revealed benefits to those who pursue and achieve accreditation. Investing staff time and organizational resources toward the attainment of accreditation leads to an emphasis on continuous improvement and overall effectiveness (Alkhenizan & Shaw, 2011; Beatty, Mayer, Elliot, Brownson, Abdulloeva, Wojciehowski, 2015; Beatty, Mayer, Elliott, Brownson, Abdulloeva, Wojciehowski, 2016; Bogh, Falstie-Jensen, Hollnagel, Holst, Braithwait, Raben, & Johnsen, 2017; Germaine & Spencer, 2016; Lejeune, 2011; Moskal, Ellis, & Keon, 2008; Urgel, 2007). Accreditation research in healthcare demonstrated lower mortality rates and improved clinical performance outcomes in accredited organizations (Falstie-Jensen, Norgaard, Hollnagel, Larsson, & Johnsen, 2015a; Falstie-Jensen, Larsson, Hollnagel, Norgaard, Svendsen & Johnsen, 2015b). Legitimacy with external entities,

such as stakeholders and the public, is also improved through the achievement of accreditation (Beatty et al., 2016; Beatty et al., 2015; Brittingham, 2009; Chang, Lin, & Tu, 2016; Elliott, 2013; Khodabocus & Balgobin, 2011; Urgel, 2007; Zammuto, 2008). Other benefits of accreditation include access to funding (Beatty et al., 2015; Beatty et al., 2016; Brittingham, 2009; Desveaux, Mitchell, Shaw, & Ivers, 2017), improved relationships with governmental entities and insurance companies (Ritchie et al., 2019), and an ability for practitioners, instead of the government, to set standards (Brittingham, 2009).

Emergency Management Accreditation

Although emergency management distinguished itself as a separate field from fire and law enforcement (Chang & Neal, 2019; Topp, 2019), emergency management has not achieved the status of “profession” because it does not demonstrate the key characteristics of a profession (e.g., Cwiak, 2011; Gray, 2019; Oyola-Yemaiel & Wilson, 2005; Urby & McEntire, 2015). There are at least three key areas necessary for emergency management to become a profession, including having a monopoly on the specialized body of knowledge, autonomy over requirements and standards, and authority over entry into the field (Cwiak, 2011; Oyola-Yemaiel & Wilson, 2005). Emergency management lacks each of these characteristics.

Some suggest emergency management is an “emerging” profession (Cwiak, 2011; Oyola-Yemaiel & Wilson, 2005). The reference to emergency management as an “emerging profession” suggests progress in crucial areas. For example, the “Principles of Emergency Management” (FEMA Higher Education Program, 2007) helped to coalesce the field (Cwiak, 2011; Cwiak, Campbell, Cassavechia, Haynes, Lloyd, Brockway, Navarini, Piatt, & Senger, 2017). Educational opportunities in emergency management grew (Blanchard, 2003; Cwiak, 2011; Jensen, Klenow, & Youngs, 2019; O’Connor, 2005). Professional associations, such as the

International Association of Emergency Managers (IAEM), the National Emergency Management Association (NEMA), and state-level emergency management associations, expanded as well. IAEM implemented the Certified Emergency Manager (CEM) credential, requiring an undergraduate university education degree (IAEM, 2021). EMAP was endorsed by IAEM, International City/County Management Association (ICMA), National Association of Counties (NACo), and by the National Emergency Management Association (NEMA), representing growing consensus around one standard for emergency management (EMAP, 2019).

Challenges in the Standardization of Emergency Management

Accreditation in emergency management, while not yet mature, may provide support for further professionalization of the field. The federal government initially spurred the evolution of emergency management through grant requirements. These requirements give the federal government significant control over state and local operations (Drabek, 1987). Furthermore, emergency management evolved reactively globally, where laws, not standards, have driven practice (McEntire, 2007). Accreditation against a set of emergency management standards may shift the field to a more proactive understanding of what emergency management programs should entail (EMAP, 2019). The National Fire Protection Association (NFPA) 1600 is recognized by ANSI, in addition to the Emergency Management Standard (2019) (The Standard) by EMAP (ANSI, 2021). The NFPA 1600, Standard on Continuity, Emergency, and Crisis Management, has been updated eight times since 1995 when it was first promulgated (NFPA, 2021a). NFPA 1600 is still used as the standard for emergency management in some areas of practice instead of The Standard. For example, JC incorporates NFPA 1600 standards for emergency management within its standards. Additionally, the U.S. Department of Homeland

Security (DHS) had adopted the 2007, 2010, and 2013 versions of NFPA 1600 as “a voluntary consensus standard for emergency preparedness and the National Commission on Terrorist Attacks Upon the United States (9/11 Commission) recognized NFPA 1600 as our National Preparedness Standard” (NFPA, 2021). Notably, the 2019 version, the most recent version, has not been officially endorsed by DHS (NFPA, 2021b).

Differences in categorizing and naming the emerging emergency management profession, both nationally and internationally, pose a challenge for widely applying a consistent emergency management standard across sectors and nations. Internationally, “disaster risk reduction” is predominantly used by governments instead of “emergency management” (e.g., Sendai Framework for Disaster Risk Reduction). The private sector primarily relies upon ISO standards (e.g., ISO 22320 Emergency Management, ISO 22326 Security & Resilience, and ISO 37120 Resilient & Sustainable Cities). Further complicating efforts to promote a unified set of standards is an ongoing debate about the use of the terms “emergency management” and “business continuity” (e.g., EMAP and Disaster Recovery Institute International [DRI]). The DRI describes itself as “the oldest and largest nonprofit that helps organizations around the world prepare for and recover from disasters by providing education, accreditation, and thought leadership in business continuity, disaster recovery, cyber resilience and related fields” (DRI, 2021). DRI is also considered a Liaison Level A by ISO, considered an organization that effectively contributes to security and resilience. Although DRI certifies individuals rather than accrediting programs, the focus on business continuity and disaster recovery without reference to emergency management suggests an ongoing debate regarding the identity of the emergency management profession.

Emergency Management Standard (2019) by EMAP

EMAP is a voluntary accreditation designed for emergency management programs of varying sizes from across all levels of government and the private sector based on the Emergency Management Standard (2019) (The Standard). EMAP, “as an independent non-profit organization, fosters excellence and accountability in Emergency Management and Homeland Security Programs by establishing credible standards applied in a peer-reviewed Assessment and Accreditation Process.” (EMAP, 2019, pg. 3). The Standard was developed by a group of emergency management stakeholders from the public sector and was first released in 2007. The standards are revised every three years based on input from the EMAP Commissions, subcommittees, and public comments (EMAP, 2019). As an independent non-profit organization, EMAP is “intended to promote consistent quality in Emergency Management Programs” (EMAP, 2019, pg. 3).

A white paper written in 1997 inspired the inception of EMAP, and by 1998, NEMA adopted the recommendations. NEMA has been an advocate for The Standard developed by EMAP since its inception and promoted initial accreditation by state emergency management programs (NEMA, 2021). By 2002, the newly appointed EMAP Commission began accrediting emergency management programs (EMAP, 2004; EMAP, 2019). NACo adopted The Standard in 2017 for “measuring the capability of emergency management programs. Additionally, NACo supports current processes and procedures the EMAP Commission uses to update and evaluate The Standard” (NACo, 2017, pg. 45). Similarly, IAEM endorsed EMAP as the standard for programs in emergency management in 2018 (Shiley, 2018). Recognition and endorsement of EMAP and The Standard has grown since its inception.

ANSI recognizes EMAP as the only accrediting *body* in emergency management (Shiley, 2018). Although there are competing standards in emergency management, as previously discussed (e.g., DRI and NFPA 1600), there are no other bodies that perform accreditation specifically for emergency management. As of July 2021, there are a total of 112 EMAP accredited emergency management programs (20 federal programs, 36 state programs, one tribal nation program, 43 local programs, three private-sector programs, six programs in institutions of higher education, and four international programs), along with five provisionally accredited programs (EMAP, 2021a) (Appendix A). It is not possible to accurately determine how many emergency management programs there are across the types of programs. However, Table 1 shows how few programs hold EMAP accreditation. As The Standard gains recognition as the premier standard in emergency management, understanding the influences in the pursuit and achievement of accreditation may inform the facilitators and barriers experienced by emergency management programs.

Table 1. Proportion of Programs Accredited

Program	# Accredited	Estimated Total	Citation
Local (i.e., villages, townships, counties, municipalities)	43	35,879	(National League of Cities, 2021)
State	36	51*	(U.S. Census, 2021)
Tribal	1	574	(NCAI, 2021)
Federal	20	457**	(Federal Register, 2021)
Private	3	***	
Higher Ed.	6	4,298	(National Center for Education Statistics, 2018)
International	3	***	

*Includes the District of Columbia.

**Estimate for the number of agencies and sub-agencies, total programs are much higher.

***It is not possible to estimate the number of programs.

Achieving EMAP Accreditation

To achieve EMAP accreditation, emergency management programs must meet the established standards identified in The Standard. Verifications are accomplished through an application process, on-site assessment, and committee review. Furthermore, emergency management programs must maintain accreditation by regularly documenting compliance and recertifying every five years (EMAP, 2021b). In its current form, EMAP delineates the standards in four chapters (see Appendix B for further details):

- Chapter 1: Administration: describes the purpose and application of the Emergency Management Standard (EMAP, 2019).
- Chapter 2: Definitions: defines key terms within the Emergency Management Standard (EMAP, 2019).
- Chapter 3: Emergency Management Program: describes the characteristics of an Accredited Emergency Management Program as having “visible leadership support, and endorsement and engagement by stakeholders” (EMAP, 2019, pg. 7). Aspects of the emergency management program, include: a) program administration and evaluation, b) coordination, c) advisory committee, d) administration and finance, and e) laws and authorities (EMAP, 2019).
- Chapter 4: Emergency Management Program Elements includes the phases of “prevention, preparedness, mitigation, response, and recovery” (EMAP, 2019, pg. 8). The elements within the phases include: a) hazard identification, risk assessment and consequence analysis, b) hazard mitigation, c) prevention, d) operational planning and procedures, e) incident management, f) resource management, mutual aid and logistics,

g) communications and warning, h) facilities, i) training, j) exercises, evaluation, and corrective actions, k) emergency public information and education (EMAP, 2019).

Despite recent efforts to promote The Standard by national and international organizations and associations, the limited number of accredited programs suggested the need to explore what influences the pursuit and achievement of accreditation in emergency management.

City Emergency Management Programs

EMAP accreditation is available to federal agency programs, state agency programs, tribal programs, local programs, private sector programs, and programs within and outside of the United States. However, each of these entities is different in meaningful ways when considering the pursuit and achievement of accreditation. For this reason, it was appropriate to seek depth of understanding regarding accreditation in only one context.

This study focused on city emergency management programs from the largest jurisdictions in the United States. A focused approach to the study was chosen due to the lack of research into accreditation in emergency management. The city emergency management program was chosen as the unit of analysis for this study because of the local nature of implementing emergency management practices. Furthermore, cities have, in general, more resources than smaller jurisdictions.

Local programs are the first to respond to an incident and remain in place long after the incident ends. Decision-making authority and management are also the primary responsibility of the local emergency management agency (Col, 2007; Drabek, 1987). State and federal governments then provide support and assistance to local communities (Col, 2007; Drabek, 1987; Kweit & Kweit, 2006). In the United States, localism is predominant, often resulting in unit diversity, fragmentation, and a lack of standardization (Drabek, 1985). These conditions

increase challenges in coordinating initiatives to cope with the impacts from hazard events. One cannot assume widespread implementation of The Standard would be sufficient to overcome all these challenges, but rather may attenuate their impact. A focused exploration of EMAP accreditation using the context of city government emergency management programs was appropriate.

Significance

Recent support for The Standard suggests a growing interest from national and international associations in advancing a unified standard for emergency management. However, challenges remain. Findings from this study support further understanding about the pursuit and achievement of accreditation, which may inform the field of emergency management and the multidisciplinary body of work on accreditation. As emergency management continues to emerge as a profession, findings from this study may inform how standards and accreditation in emergency management may influence further professionalization.

This study advances the understanding of what facilitates or hinders accreditation by city emergency management programs. Findings provide insight into the influences that support the pursuit and achievement of EMAP accreditation. Considering few emergency management programs have achieved accreditation, findings suggest reasons for the limited adoption of The Standard and achievement of accreditation. Furthermore, findings present practical considerations for emergency managers hoping to pursue and achieve accreditation. Moreover, findings suggest how standards in emergency management can be utilized to enhance programs and increase capacity.

Conclusion

The endorsement of EMAP and The Standard by leading organizations in emergency management, coupled with the lack of application in research and practice, suggests a gap in literature. This research explored what facilitates and hinders the pursuit and achievement of EMAP by emergency management programs. Although the literature into the pursuit and achievement of accreditation is limited, literature into accreditation provided a super-organizational structure to approach initial research into emergency management accreditation. The next chapter provides a review of the literature in emergency management accreditation and multidisciplinary literature regarding the pursuit and achievement of accreditation.

CHAPTER TWO: LITERATURE REVIEW

This chapter presents a review of the literature that informed this study. The first section describes the limited research into the Emergency Management Accreditation Program (EMAP), while the second section provides a general overview of the body of work in accreditation. A review of multidisciplinary literature on accreditation suggests similar influences on programs and organizations pursuing and achieving accreditation. Although some theories have been applied toward accreditation, an accepted theory or statistical model has not emerged from this work. Based on a synthesis of the existing empirical research, the third section introduces the *Conceptual Model for Programmatic Achievement of Accreditation*, which was used to sensitize the researcher to literature.

Four categories emerged from the literature related to the pursuit and achievement of accreditation: 1) microsystems, 2) macrosystems, 3) surrounding context, and 4) accrediting body. Similar characteristics emerged in the categories from multidisciplinary research, but it was unknown whether or how they apply in an emergency management context or in a city context, particularly since research was done in different settings (e.g., healthcare, and higher education or institutional or programmatic accreditation). Furthermore, terms used in the multidisciplinary body of knowledge for accreditation were not consistently applied. The current state of the body of work influenced the qualitative methodology chosen for this study and is further described in the concluding section of this chapter.

Emergency Management Accreditation Program (EMAP) Literature

Disaster literature references EMAP as a standard for emergency management (e.g., Bentley & Waugh, 2005; Harris, Bartlett, Joyner, Hart, & Tollefson, 2021; Manning, 2020; Myers, 2015; Oyola-Yemaiel & Wilson, 2005). However, few studies examined EMAP. Two

empirical articles reported the results of research on EMAP (n=2), one qualitative and one quantitative (Lucus, 2006a; Lucas, 2006b). The qualitative study (Lucus, 2006a) describes the history of EMAP. The quantitative study (Lucus, 2006b) reports the results of state-level program assessments to determine the phase where most state resources focused. Findings suggest that state-level programs focus more resources on response than other phases (Lucus, 2006b).

The two empirical studies involving the topic of EMAP analyzed the background of the accrediting body and the accreditation of state-level emergency management programs. This review identified no studies exploring the process of EMAP accreditation in general, the pursuit or achievement of accreditation by local, tribal nation, federal (US), higher education institution, international, or private sector emergency management programs, or any other topic related to EMAP. The lack of research into EMAP demonstrates a significant gap in the literature. With limited research into accreditation in emergency management, this research provides some insight into the categories that may influence the pursuit and achievement of accreditation.

Accreditation Literature

In reviewing the literature, this study gathered 352 scholarly articles about accreditation. The multidisciplinary body of work related to accreditation involved diverse topics, including: a) the process of achieving accreditation, b) organizational performance based on the achievement of accreditation, c) quality of products and services based on accreditation status, d) the role of accreditation in organizational continuous improvement, and the e) perspectives of leaders, staff, and stakeholders regarding accreditation. Only 21 of the collected articles were directly relevant to the understanding of the pursuit and achievement of accreditation. These articles included examining indicators, barriers, predictors, organizational characteristics, and the value of

achievement. Studies were conducted from the disciplines of healthcare (n = 11) and higher education (n = 9), while there was one article that studied the accreditation of laboratories (n = 1). The methodology used in the studies included qualitative (n = 8), quantitative (n = 12), and mixed methods (n = 1).

This body of work reflects no agreed upon, consistently tested theory or statistical model to explain the achievement of accreditation. The absence of theory and statistical models may be explained by the diverse disciplinary backgrounds from which accreditation has been studied. Furthermore, differences in the unit of analysis in each study (i.e., program, agency, or organization from the public or private sectors) adds to the variation in the literature and may impact the level of theory and/or statistical models. Nevertheless, several categories consistently appear within the literature as being likely to influence the pursuit and achievement of accreditation.

Conceptual Model for Programmatic Achievement of Accreditation

According to the literature, influences on characteristics of pursuing and achieving accreditation can be either positive or negative, a barrier or facilitator of success. It would be ideal to have a theory or statistical model supported by robust and replicated evidence, but this does not exist. While four of the reviewed articles presented models based on their research, none were comprehensive in light of the other. The models lacked construct validity as a result. Additionally, similar factors were not labeled or categorized consistently across the articles (Ahmad & Qahmash, 2020; Ostovari, Liu, Yih, & Yu, 2021; Tashayoei, Raeissi, & Nasiripour., 2020; Zapata-Vanegas & Saturno-Hernandez, 2020). Upon analysis, the researcher developed a synthesized model of the influences on program accreditation suggested by these four studies, to organize and make sense of what was found. The super-organizational structure represented is a

blend of the models; thus, the authors of these four articles are frequently cited. The additional multi-disciplinary literature reporting the results of research on accreditation supports the categories (n=17).

The *Conceptual Model for Programmatic Achievement of Accreditation* (Figure 1) presents a synthesized model of the influences on the pursuit and achievement of program accreditation. The model includes four categories: 1) macrosystems, 2) microsystems, 3) surrounding context, and 4) accrediting body. Within each category, several characteristics may influence the pursuit and achievement of accreditation. However, these characteristics emerged from a diverse body of literature and were studied in different contexts (i.e., local jurisdiction, private organization, and facility). Some terms, such as “macrosystem” or “microsystem” may be interpreted differently across different fields but are defined below for the parameters of this study. It is unclear whether these characteristics are meaningful in the emergency management or city context due to the limited research on the topic even while the broader emergency management literature suggests the characteristics may well be relevant.

Figure 1. Conceptual Model for Programmatic Achievement of Accreditation

Macrosystems <i>(organizational characteristics)</i>	Microsystems <i>(program characteristics)</i>	Surrounding Context	Accrediting Body
<ul style="list-style-type: none"> • Governance board <i>(establishes policy)</i> • Leadership <i>(implements policy)</i> • Culture • Resources • Administrative systems • Quality performance & improvement 	<ul style="list-style-type: none"> • Design & Execution • Individual characteristics • Relationship & engagement 	<ul style="list-style-type: none"> • Size of jurisdiction • Community characteristics • Community buy-in • Disaster experience 	<ul style="list-style-type: none"> • Standards • Evaluation process • Fees • Time commitment necessary

Macrosystems

Macrosystems involve the overarching structures which influence the microsystem, or program, seeking accreditation. For example, a city government is the macrosystem for a city program or department (e.g., emergency management, public health, police, fire), a college or university is the macrosystem for a law degree program, and a hospital system may be the macrosystem for an individual hospital. The concepts most associated with macrosystems include: a) *governing entities*, b) *leadership and management*, c) *culture*, d) *resources*, e) *administrative systems*, and f) *quality performance and improvement*. Literature suggests *macrosystems* influence whether a program pursues and achieves accreditation (Ahmad & Qahmash, 2020; Chaiyaphumthanachok, Tangdhanakanond, & Sujiva, 2016; Ostovari et al., 2021; Zapata-Vanegas & Saturno-Hernandez, 2020). The characteristics reflected within macrosystems had significant support across the literature reviewed, which suggests the overarching organizational or jurisdictional structure may help us understand the pursuit and achievement of accreditation.

The most influential structure within the macrosystem appears to be *governing entities* that establish policy. Governing entities have considerable control over the setting of priorities and allocation of resources for a program. Healthcare literature studying the facilitators and barriers to accreditation has suggested the importance of support and direction from the governing structure (Beatty et al., 2015; Beatty, Erwin, Brownson, Meit, & Fey, 2018; Ostovari et al., 2021; Shah, Leep, Ye, Sellers, Liss-Levinson, & Williams, 2015; Yeager, Ferdinand, Beitsch, & Menachemi, 2015). Although macrosystems may be further categorized conceptually (e.g., governance board or council, executive, leadership teams), literature involving the pursuit and achievement of accreditation did not provide sufficient evidence to suggest further dividing

the category. For a city emergency management program, a governing entity may include bodies such as the Board of County Commissioners or the City Council. Literature has suggested that the location of the emergency management program within the locality may also influence the effectiveness of programs, even while this work did not focus on accreditation (e.g., Drabek, 1985; Quarantelli, 1997).

Leadership may drive or bar the achievement of accreditation. Related to a city emergency management program, leadership may include the advisory committees and executive functions, such as a county executive or mayor. The characteristics of leadership which appear most important include a commitment to pursuing accreditation by leadership (Avolio & Benzaquen, 2020; Germaine & Spencer, 2016; Karthiyayini & Rajendran, 2016; Reisi, Raeissi, Sokhanvar, & Kakemam, 2019; Tashayoei et al., 2020) and sufficient support provided toward a program to maintain the capacity necessary to pursue and achieve accreditation (Ahmad & Qahmash, 2020; Beatty et al., 2015; Beatty et al., 2016; Ostovari et al., 2021). Furthermore, strategic planning processes which drive the overall organization toward the same goals also influence the achievement of accreditation in healthcare (Beatty et al., 2018; Desveaux et al., 2017; Ostovari et al., 2021; Shah et al., 2015). Again, emergency management literature suggests leadership may influence a city emergency management program in work not specifically examining accreditation (e.g., Drabek, 1985; McGuire & Silvia, 2010; Quarantelli, 1997; Schneider, 1992). For example, jurisdictional politics may influence the budget and resources available to the emergency management program (e.g., McEntire, 2002; Seneviratne, Baldry, & Pathirage, 2010).

Culture, in general, as well as specific aspects of culture in the overall organization, have been found to influence accreditation (Ostovari et al., 2021; Tashayoei et al., 2020). “Culture is

the acquired knowledge people use to interpret experience and generate behavior” (Bachner, 2014, pg. 2). A people-oriented culture that recognizes and rewards employees has a positive association with the achievement of accreditation in both healthcare and higher education (Muljana, Nissenson, & Luo, 2020; Ostovari et al., 2021; Reisi et al., 2019), and continuous learning opportunities throughout the organization and jurisdiction (Avolio & Benzaquen, 2020; Reisi et al., 2019). Similarly, a cultural environment that promotes active participation (Avolio & Benzaquen, 2020; Germaine & Spencer, 2016; Reisi et al., 2019) and organizational buy-in (Desveaux et al., 2017; Germaine & Spencer, 2016; Muljana et al., 2020), allows employees to become invested in the outcomes of the macrosystem. Other characteristics of culture which were positively associated with achieving accreditation include: a culture of responsibility and accountability (Ostovari et al., 2021; Reisi et al., 2019), an innovative and future-oriented culture (Ahmad & Qahmash, 2020; Avolio & Benzaquen, 2020; Ostovari et al., 2021;), and a culture which promotes quality assurance and improvement (Ahmad & Qahmash, 2020; Germaine & Spencer, 2016; Karthiyayini & Rajendran, 2016; Zapata-Vanegas & Saturno-Hernandez, 2020). The characteristics included within *culture* appear to relate to accreditation because they describe an environment that promotes positive outcomes and allows for organizational change. Culture may influence emergency management in various ways, from explaining why better mitigation outcomes are not observed (e.g., Cannon & Schipper, 2014; Comfort, 2012; Tierney, 2014) to the outcomes in recovery from disaster (e.g., Ensor, 2009; James & Paton, 2015; Tierney & Oliver-Smith, 2007). Literature suggests that culture presumably matters in emergency management, but it is unknown how it may manifest concerning accreditation.

Resources are another aspect of macrosystems that may influence the pursuit and achievement of accreditation. As a proxy for overall capacity, available resources for

accreditation initiatives are considered. The following types of resources have been studied with respect to accreditation: a) financial resources (Avolio & Benzaquen, 2020; Beatty et al., 2018; Beatty et al., 2015; Beatty et al., 2016; DeHay, Ross, Williams, & Ponce, 2016; Desveaux et al., 2017; Shah et al., 2015; Reisi et al., 2019; Tashayoei et al., 2020), b) staff size and capacity (Beatty et al., 2015; Beatty et al., 2016; DeHay et al., 2016; Muljana et al., 2020; Meit, 2008; Tashayoei et al., 2020; Yeager et al., 2015;), c) employee training and education (Beatty et al., 2015; Beatty et al., 2016; Muljana et al., 2020; Tashayoei et al., 2020; Zapata-Vanegas & Saturno-Hernandez, 2020), d) equipment and supplies (Karthiyayini & Rajendran, 2016; Muljana et al., 2020; Reisi et al., 2019; Zapata-Vanegas & Saturno-Hernandez, 2020), and e) facilities (Ahmad & Qahmash, 2020; Avolio & Benzaquen, 2020; Karthiyayini & Rajendran, 2016; Tashayoei et al., 2020;). Regarding staffing resources, there was an emphasis on the ability to retain employees and provide for a stable work environment (Avolio & Benzaquen, 2020; Zapata-Vanegas & Saturno-Hernandez, 2020) and on overall human resource management within the macrosystem (Karthiyayini & Rajendran, 2016; Reisi et al., 2019).

As noted, resources available to the microsystem (i.e., the program) are budgeted by the macrosystem. Although the microsystem has resources, the literature suggests resources are provided to the microsystem by the macrosystem. The availability of resources and overall capacity is likely to be influential to a city emergency management program. However, some aspects highlighted in the accreditation literature, such as equipment and supplies, may not be as relevant. Resource availability is a continual challenge facing local emergency management programs, including staffing and budget allocation (Labadie, 1984; McEntire, 2007; McGuire & Silvia, 2012; Rossi, Wright, & Weber-Burdin, 1982) however, the influence of resource availability concerning accreditation has yet to be examined.

Administrative systems refer to the management of data and documentation management, along with the presence of clearly defined processes, roles, and responsibilities within the macrosystem. The processes involved in storing, maintaining, and accessing information, and technical and physical capabilities are components of administrative systems. As a part of the accreditation assessment process, accrediting bodies may review relevant documentation (e.g., policies, plans, corrective actions). The ability to maintain organization-wide data and documentation influences whether an organization or jurisdiction achieved accreditation in the literature for healthcare and higher education (Avolio & Benzaquen, 2020; Beatty et al., 2018; Muljana et al., 2020; Reisi et al., 2019). Additionally, literature in higher education also found that clearly defined roles and responsibilities, along with the overall expectations and use of processes and procedures, may enhance employee performance, and may support achievement of accreditation (Ahmad & Qahmash, 2020; Muljana et al., 2020). In emergency management, the need for timely and accurate information grows after a disaster. Thus, literature has examined the management of information and the applications of information technology in emergency management (Comfort, Waugh, Ciglar, & Springer, 2012; Petak, 1985). Administrative systems have also been considered a facilitator of disaster recovery since the 1980s (Rubin, 1985). However, how administrative systems may help us understand accreditation in a local government context has not been explored.

Quality and performance improvement also influences accreditation in healthcare and higher education (e.g., Almoajel, 2012; Beaudry, Bialek, & Moran, 2014; Beitsch, Riley, & Bender, 2014; Carroll, Thomas, & DeWolff, 2006; Scrivens, 1997; Sibthorpe, Gardner, & McAullay, 2016), through quality assurance, quality improvement and an existing team to improve quality. *Quality assurance* refers to the organization or jurisdiction's ability to fulfill its

obligations. Aspects of quality assurance and compliance have been shown, in accreditation literature, to be drivers or barriers (Ahmad & Qahmash, 2020; Avolio & Benzaquen, 2020; Chaiyaphumthanachok et al., 2016). Through the consistent and organization-wide use of quality management systems, an environment is created which is conducive to adopting standards and enhancing a culture of quality compliance (Ahmad & Qahmash, 2020; Avolio & Benzaquen, 2020). Some organizations incorporate the accreditation process as an external audit that ensures compliance and quality standards are being met (Desveaux, 2017). References toward quality and performance improvement in literature appear to be applied to the macrosystem rather than the microsystem, or individual programmatic context.

Quality improvement refers to purposeful actions taken “in response to observations, feedback or self-reflection resulting from the accreditation process” (Desveaux, 2017, pg. 945). Quantitative studies have found that having any formal quality improvement processes is significantly associated with achieving accreditation in healthcare (Tashayoei et al., 2020; Yeager et al., 2015). Similarly, the presence of a continuous improvement process, with methods to measure, monitor, and control performance, has also been found to be a driver based on literature involving healthcare and laboratory accreditation (Ahmad & Qahmash, 2020; Karthiyayini & Rajendran, 2016). The presence of a quality improvement team is also found to influence the pursuit and achievement of accreditation for healthcare and higher education (Ahmad & Qahmash, 2020; Zapata-Vanegas & Saturno-Hernandez, 2020). The presence of a leader for managing quality, along with a team invested in the process, influences an organization’s ability to improve desired tasks (Ahmad & Qahmash, 2020; Zapata-Vanegas & Saturno-Hernandez, 2020). Other considerations for the quality improvement team include: a) the level of experience and knowledge of members, b) diversity within the team, c) procedures

and techniques used for quality assurance, and d) the stability of the team (Zapata-Vanegas & Saturno-Hernandez, 2020). Quality and performance improvement support internal ongoing progress and growth based on the guidance established by the accrediting bodies.

Quality and performance improvement have rarely been studied in the emergency management literature (i.e., Comfort & Pitts, 1996; Manning, 2020; Palttala & Vos, 2012), however, literature has identified the need to improve performance by local governments across the phases of emergency management (Wolensky & Wolensky, 1990) and to measure performance more accurately (e.g., Henstra, 2010; O’Leary, 2004). In evaluating local government emergency management program frameworks, Henstra (2010) identified 30 performance areas necessary for a high-quality emergency management program which should be measured, across preparedness (e.g., hazard identification and risk assessment, training, and exercise), mitigation (e.g., mitigation plan, warning system, and public education), response (e.g., emergency operations center [EOC], incident management system, and evacuation plan), and recovery (e.g., recovery plan, continuity of operations planning, and damage assessment) (Henstra, 2010). The performance measures described by Henstra (2010) are like those listed in the Emergency Management Standard (2019). However, there has been no empirical research analyzing the link between performance, quality, and accreditation in emergency management. Overall, the characteristics of the macrosystem, which include governance structures, leadership, culture, resources, and administrative systems, influence the microsystem and may be either a driver or barrier toward accreditation.

Microsystems

Microsystems, based on the research, include the aspects of the program to be accredited, which may influence whether the goal is ultimately pursued and achieved. Microsystems operate

within a macrosystem but reflect characteristics, resources, roles, and activities that may be influential in conjunction with the aspects of the macrosystem previously discussed. In the context of this study, emergency management programs are the microsystem of interest within the macrosystem of a city. Outside of this study, examples of a microsystem may be a local health department within a local government or a degree program within a higher education institution. The themes of microsystems that emerge from the accreditation literature have not been studied widely in relation to the pursuit or achievement of accreditation compared to macrosystems or accrediting body. Furthermore, few empirical studies have investigated the role of microsystems in the achievement of accreditation, indicating that further study is needed. However, the literature does suggest some aspects of microsystems that may or may not be relevant to the context of the study, including a) *design and execution*, b) *individual characteristics*, and c) *relationship and engagement*.

Design and execution reflect the initiative to layout, shape, manage, and deliver a program's desired goals and objectives. Processes that programs rely upon are involved in the category of design and execution. Two quantitative studies focusing on higher education found this category statistically related to the successful achievement of accreditation (Ahmad & Qahmash, 2020; Chaiyaphumthanachok et al., 2016). In higher education, program design and execution are related to the programs processes: vision, mission, objectives, student learning management, curriculum design and revision, and continuous improvement centered around the microsystem (Ahmad & Qahmash, 2020). In a local emergency management program, design and execution may relate to the processes involved with strategic planning initiatives (e.g., vision, mission, objectives), program management (e.g., planning, training, exercising), and improvement planning. Literature in emergency management has suggested the importance, and

challenges, of the design and execution of local programs since the 1980s (Drabek, 1987; Comfort, 1985; Labadie, 1984). Recent studies have also analyzed strategic planning impacts on local emergency management program quality (i.e., Manning, 2020; Sturgis, 2007), however, there is no empirical research studying the relationship between design and execution of emergency management programs and accreditation.

Individual characteristics of the employees within a program have been identified, in healthcare accreditation literature, as being an important influence on the process of accreditation due to the motivations of staff (Zapata-Vanegas & Saturno-Hernandez, 2020) and the experiences individuals had with the accreditation process (Desveaux et al., 2017). In the emerging emergency management profession, empirical research has identified a diverse set of individual skills and characteristics that may influence effective program delivery. Individual characteristics necessary for an emergency management staff to be successful in their role may include: a) technical and substantive knowledge (Alexander, 2003; Blanchard, 2005; Thomas & Mileti, 2003, Tyler & Sadiq, 2019), b) professionalism (Blanchard, 2005; Kapucu, 2011; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), c) interpersonal relations (Blanchard, 2005; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), d) management (Blanchard, 2005; Kapucu, 2011; Tyler & Sadiq, 2019), e) leadership (Blanchard, 2005; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), f) legal and ethical behavior (Alexander, 2003; Blanchard, 2005; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), g) problem solving (Alexander, 2003; Kapucu, 2011; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), h) communication (Alexander, 2003; Kapucu, 2011; Thomas & Mileti, 2003; Tyler & Sadiq, 2019), and i) cultural and environmental awareness (Kapucu, 2011; Thomas & Mileti, 2003; Tyler & Sadiq, 2019). The individual leadership skills of the emergency manager were also found to be influential in the effective delivery of emergency management

programs (e.g., Drabek, 1985; McGuire & Silvia, 2010; Schneider, 1992; Quarantelli, 1997).

Here too, the emergency management literature examined individual characteristics not related to accreditation.

Relationships and engagement have been suggested as influencing drivers toward accreditation in healthcare (Avolio & Benzaquen, 2020; Desveaux et al., 2017; Shah et al., 2015). For example, local health departments seeking accreditation have suggested efforts toward sharing information and resources and engaging in efforts for mutual benefit and capacity building with stakeholders, which may influence accreditation as a driver or barrier (Avolio & Benzaquen, 2020; Shah et al., 2015). Relationships and engagement in a local emergency management agency may include stakeholders from the public and private sectors, with groups who are “increasingly numerous and diverse” (Vachette, King, & Cottrell, 2017, pg. 327). Although no studies have analyzed the role of relationships and engagement regarding emergency management accreditation, empirical research has supported the role of relationships and engagement in emergency management (e.g., McGuire & Silvia, 2010; Vachette et al, 2017; Waugh & Strieb, 2006). Furthermore, open communication and information exchange among stakeholders were found to be important in response (e.g., Comfort & Haase, 2006; Garnett & Kouzmin, 2007; Kapucu, 2006) and recovery (Cuervo et al., 2017; Johnston et al., 2012; Kendra & Wachtendorf, 2003). Moreover, literature has demonstrated the importance of integrated efforts being conducted across all relevant stakeholders within the community for the effective delivery of emergency management (e.g., Carr, 2014; Drabek, 1987; Goode, Salmon, Spencer, McArdle, & Archer, 2017; Quarantelli, 1984). Although there has been research to suggest the importance of relationships and engagement in emergency management, studies have not been applied within the context of accreditation.

Surrounding Context

Surrounding context refers to aspects of the environment in which the macrosystem functions. For a city context, the *macrosystem* refers to the city government, while the *surrounding context* refers to the conditions which influence government functions, such as population size, level of vulnerability, and disaster experience. In literature, findings suggest the *surrounding context* influences the pursuit and achievement of accreditation, however, inquiry into the surrounding context was limited to few studies. While the macrosystem involves the structures with direct influence over the microsystem, the surrounding context may involve the circumstances and unique conditions present in the local jurisdiction. The most essential contextual influence shown in studies focused on healthcare is the *size of the jurisdiction* (Beatty et al., 2018; Shah et al., 2015). The size of the jurisdiction may be a proxy for overall resources and capacity within a jurisdiction, or perhaps it helps understand accreditation differently. The literature has left it unclear. The role of context has also been linked to quality improvement and the ability of the organization to implement effective outcomes (Zapata-Vanegas & Saturno-Hernandez, 2020).

Another characteristic of the surrounding context which has arisen in the literature involving local health departments is the importance of community buy-in toward departmental achievements, such as accreditation (Beatty et al., 2015; Beatty et al., 2016). Community buy-in refers to the support of accreditation within the community where the macrosystem exists, including key stakeholders. Community buy-in may also be considered overall support from stakeholders for the pursuit of accreditation. The value placed on accreditation by the community may encourage, or discourage, prioritizing the achievement of accreditation by the macrosystem, be it a jurisdiction or organization (Beatty et al., 2015; Beatty et al., 2016). The limited support

for community buy-in and surrounding context in accreditation literature may be due to the predominance of research focused in areas not involving local government departments (i.e., higher education and healthcare facilities).

Although there were few references to the influence of the surrounding context found in accreditation literature (i.e., size of the jurisdiction), emergency management literature suggests other contextual factors, although the findings are not related to accreditation. Contextual factors may include disaster experience (e.g., Farley, Barlow, Finkelstein, & Riley, 1993; Sadiq, 2017; Siegel, Shoaf, Afifi, & Bourque, 2003), risk salience (e.g., Altinay, Rittmeyer, Morris, & Reams, 2020; Bakkensen, Ding, & Ma, 2019; Waugh & Hy, 1990), social vulnerability (e.g., Khunwishit & McEntire, 2012; Poulin, 2009; Ward & Shively, 2017; Zehran, Brody, Peacock, Vedlitz, & Grover, 2008), and the proximity to hazards (e.g., Ge, Peacock, & Lindell, 2011; Tveiten, Albrechtsen, Waero, & Wajl, 2012), which, may or may not be of relevance to this study. The state of emergency management as an emerging profession (Cwiak, 2011; Drabek, 1987; Oyola-Yemaiel & Wilson, 2005) is another contextual consideration that may influence the pursuit and achievement of emergency management accreditation. Without recognition as a profession, there may not be an acknowledged need to standardize an emergency management program or uphold a specific set of standards. The role of context concerning accreditation needs to be further explored.

Accrediting Body

The *accrediting body* assesses programs and organizations that apply against the relevant standards and determine based on the assessment, whether accreditation is granted. Accrediting bodies can shape processes and priorities for the program due to the need for specific requirements necessary for achieving accreditation. The decisions made by the accrediting body

influence the perceived value and benefit of achieving accreditation (Andrade, 2011; Beatty et al., 2015; Beatty et al., 2016; DeHay et al., 2016; Muljana et al., 2020; Shah et al., 2015).

Characteristics that are under the direct control of accrediting bodies include the evaluation process (Desveaux et al., 2017; Tashayoei et al., 2020), standards used (Beatty et al., 2018; Shah et al., 2015; Tashayoei et al., 2020), fees (Beatty et al., 2015; Beatty et al., 2016; Beatty et al., 2018; Shah et al., 2015), and the time necessary to achieve accreditation (Beatty et al., 2015; Beatty et al., 2016; Beatty et al., 2018; DeHay et al., 2016; Germaine & Spencer, 2016; Muljana et al., 2020; Tashayoei et al., 2020). Competing accountabilities, such as other standards, regulations, or requirements, may also influence whether accreditation is pursued (Desveaux et al., 2017). The accrediting body applicable to this study is EMAP. However, as previously discussed, there were no empirical studies regarding the accreditation of local emergency management programs.

Implication for Methodology

The lack of a theory or statistical model with construct validity and the lack of research into emergency management accreditation suggested that a qualitative methodology was appropriate for this initial study on the pursuit and achievement of accreditation. Although there were similarities in the factors identified in accreditation literature, the terms were not consistently defined across articles and some themes conceptually overlapped. The lack of clarity, consistency, and construct validity may leave the findings of prior literature spurious. Additionally, the varying units of analysis throughout the articles (i.e., organizational, and jurisdictional), combined with study in different settings (e.g., healthcare, and higher education), may render the findings inapplicable to either emergency management and/or local government contexts. Finally, while many findings from the work on accreditation resonate within the

emergency management literature, it was unclear whether or to what extent they would emerge as significant with respect to accreditation in emergency management. Still, the evidence in support of the basic categories in the conceptual model developed from a synthesis of the accreditation and emergency management literature was substantial (i.e., macrosystems, microsystems, surrounding context, and accrediting body). The overarching categories helped the researcher to organize and understand the prior work, but did not ultimately prove to be valuable as a coding construct during data analysis.

Conclusion

Literature has provided support for a *Conceptual Model for Programmatic Achievement of Accreditation*, which was used to make sense of the accreditation literature stemming from many sources and focusing on a variety of units of analysis. The emergency management literature generally suggests that the categories and characteristics associated with them are relevant in an emergency management context, but the extent to which they apply to city emergency management programs' pursuit or achievement of accreditation was unknown. It was originally thought the *Conceptual Model for Programmatic Achievement of Accreditation* could be used as a coding construct during data analysis, however the categories were not useful in this regard, as will be discussed further. The categories did, however, provide a means to initially organize the facilitators and barriers for the pursuit and achievement of accreditation across the multidisciplinary body of knowledge. Based on this analysis, a quantitative approach to studying accreditation in a city emergency management program context was inappropriate. Chapter 3 introduces the qualitative research design that was used instead.

CHAPTER THREE: METHODOLOGY

Chapter Three is organized into seven sections. The chapter first presents the methodological approach proposed for the study. A description of the population and sample are then provided, followed by data collection techniques used in the study. The fourth section describes the data analysis techniques. The fifth section describes the characteristics of the sample in the study. The chapter then presents the researcher as a participant and the limitations of the study.

Methodological Approach

This study used a qualitative, interpretive-constructionist approach to answer the research questions 1) what facilitates or hinders the pursuit of EMAP accreditation by local emergency management programs? 2) what facilitates or hinders the achievement of EMAP accreditation by local emergency management programs? Qualitative methodology is appropriate for use when one would like to explore topics comprehensively and holistically, including inner experiences, how meanings are formed, areas not thoroughly researched, or to discover variables that may be later tested through quantitative research (Corbin & Strauss, 2015; Creswell & Creswell, 2018; Rubin & Rubin, 2012; Yin, 2011). This approach was appropriate because review of the wider accreditation literature did not reveal a solid foundation for conducting quantitative research. Since “qualitative researchers focus on depth rather than breadth...[and] care less about finding averages and more about understanding specific situations, individuals, groups, or moments in time that are important or revealing” (Rubin & Rubin, 2012, pg. 2); a qualitative approach was beneficial since this topic had never been researched within a local emergency management setting.

This study used an interpretive constructionist perspective within the naturalist paradigm. The naturalist paradigm “emphasizes the importance of context, of complexity, of examining situations in which many factors interact” (Rubin & Rubin, 2012, pg. 19). Interpretive constructionism “argues that the core of understanding is learning what people make of the world around them, how people interpret what they encounter, and how they assign meanings and values to events or objects” (Rubin & Rubin, 2012, pg. 19). This approach places a focus on the meaning people attribute to and the distinct lens from which people view objects or events (Rubin & Rubin, 2012). An interpretive-constructionist approach further allowed for in-depth interviewing of the sample, which provides for gathering richness and depth of data (Rubin & Rubin, 2012). From the outset, this research aimed to explore accreditation through the lens of the leaders of city emergency management programs (EM). By virtue of their position, these individuals would have insight into any number of factors that might help or hinder pursuit and/or achievement. As was expected, the qualitative, interpretive constructionist approach led to a body of rich, nuanced data from directors of city emergency management programs.

Sampling Procedures

A combination of purposive and convenience sampling was used to identify and reach EMs. Purposive sampling "is a nonprobability sampling procedure in which elements are selected from the target population based on their fit with the purposes of the study and specific inclusion and exclusion criteria" (Daniel, 2012, pg. 81). Purposive sampling units are chosen with specific research purposes in mind during the early stages of research design because they have characteristics that support further exploration into the inquiry (Daniel, 2012; Rapley, 2014; Ritchie & Lewis, 2003). This study also used convenience sampling, which allowed the researcher to select the sample based on participant availability (Daniel, 2012; Salkind, 2010).

The goal was to ensure all key elements of the population were covered, with some diversity, so that the research topic could be fully explored.

EMs (e.g., Directors, Administrators) representing cities with a population over 300,000 were purposively sampled. The U.S. Census (2020) identifies 69 such cities, each of which presumably has an emergency management program. Cities with a population over 300,000 were targeted since they are more likely to have a well-resourced emergency management program than smaller populated cities. As demonstrated in the literature review, time and cost appear to be common barriers to pursuing accreditation (e.g., Avolio & Benzaquen, 2020; McKee, Mills, & Weatherbee, 2005; Perryer & Egan, 2015); larger cities were thought to be more resource-abundant when compared to smaller, or more rural municipalities (Muro & Whiton, 2017). As previously discussed, the ultimate goal was to reach the leaders of these programs because they would be in the best position to illuminate what helps and hinders accreditation pursuit and achievement.

The researcher searched the internet for all 69 cities to identify the emergency management program and contact information for the program leader. When conducting this research, it became clear that many emergency management programs represented a combination of city and county. For this study, the leader representing an emergency management program for a city with a population over 300,000 was included whether or not they also represented another jurisdiction, such as a county.

Since the aim of this study is focused on the pursuit and achievement of EMAP accreditation, emergency managers from both accredited and nonaccredited programs were sought for interviews. Of the 69 cities with a population over 300,000, 14 cities had achieved EMAP accreditation. For cities who had achieved accreditation, the emergency manager who

initially led the program through accreditation was sought for an interview. If an instance arose where the emergency management programs had earned reaccreditation, and a new individual was leading the program, the individual who initially led the emergency management program through accreditation was sought for an interview. EMs from the 55 programs who had not pursued and/or achieved EMAP accreditation were also sought for interviews.

Participants were recruited through a phone call and email invitation for a single 0.5 to 1.5-hour interview (see *Appendix C* for email invitation and *Appendix D* for information sheet). Participants contact information was gathered through publicly available sources (i.e., online websites, databases, and social media platforms). All participants who responded were scheduled for an interview based on their availability. Contact was first made with EMAP accredited program leaders (n=14) with an intent to first interview this group. Next, contact was made with nonaccredited emergency management programs (n=55).

Data Collection

The primary form of data used in this study was gathered from interviews, while documents were a secondary form of data leveraged to understand context better. Interviews were in-depth and semi-structured (Corbin & Strauss, 2015; Creswell & Creswell, 2018; Rubin & Rubin, 2012; Taylor, Bogdan, & DeVault, 2015). In-depth, or responsive, interviewing allowed the researcher to “respond to and then ask further questions about what they hear from the interviewees rather than rely exclusively on pre-determined questions” (Rubin & Rubin, 2012, pg. xv). There are three primary characteristics for in-depth interviewing: a) rich and detailed information is gathered, b) questions for interviewees are open-ended, and c) the questions asked by the interviewer are not fixed and may be modified anytime upon new insights (Rubin & Rubin, 2012). Following Institutional Review Board (IRB) approval, data collection

immediately commenced utilizing approved protocols (Appendix E for the IRB approval). One interview was conducted with each participant. Interviews were conducted via the Zoom platform, which allowed for ease of access by all participants. The semi-structured approach to the interviews provided for some pre-determined questions and probes (Rubin & Rubin, 2012). The use of semi-structured interviews allowed for choosing topics for questioning prior to the study, while maintaining flexibility and allowing for follow-up questioning regarding concepts of interest during subsequent interviews with different participants. During the course of the interviews, the interview guide was expanded upon to include follow-up questions and probes based on the emerging data analysis. Richness of data and an understanding of the context involving the topic of inquiry were the primary goals of in-depth interviews throughout the data collection process (Rubin & Rubin, 2012). See Appendix F and Appendix G for the Interview Guide and Follow-up Questions for Accredited and Nonaccredited Programs.

Every interview was recorded via Zoom, with the consent of the participants. Zoom-generated transcripts were used for data analysis after editing for accuracy. The researcher and the advisor for the dissertation accessed the data. Upon conclusion of the study, the interview recordings and transcripts will be destroyed. The final research does not present identifying characteristics of those interviewed in the study to safeguard confidentiality. When presenting quotations to support the themes identified in the study, the researcher has taken measures to protect further the participants' identities. References to names and jurisdictions were removed to safeguard confidentiality. Transcripts and quotations were also edited to remove "filler words," such as "you know," "like," "um," "uh," etcetera.

The data collection process resulted in a total of 30 interviews conducted between November 2021 and March 2022 with EMs from city emergency management programs

throughout the United States (U.S.). The interviews represent 43% of the target population. Eight interviews were held with accredited programs (57% of the 14 total) and 22 with cities that have not achieved accreditation (40% of the 55 total). Five emergency managers declined to participate due to a lack of time and bandwidth, and the remaining 28 did not respond to the researcher's inquiries. One specifically mentioned they would normally participate in a request for an interview to support an academic study but did not have the time due to the ongoing COVID response. Following all interviews, a subsequent interview was held with an EMAP representative to gain further insight into the accreditation process and the steps required by programs to achieve accreditation.

Semi-structured interviews consisted of four to five main open-ended questions, including, 1) "Let's start off with talking a bit about your background. Tell me about yourself and your experience in emergency management," 2) "Tell me about your local emergency management program," 3) "What is your perspective on EMAP," 4) "Tell me the story of how your program came to seek accreditation [asked only to those who suggest they sought it in Prompt 3]" and 5) "Now, tell me the story of how your program achieved accreditation" [Asked of those who represent programs on the list of accredited programs in Appendix F]. As Appendices F and G shows, the researcher sought a variety of information with respect to each of these major questions, while guided follow-up questions and probes were also sought during the interviews.

During data collection, it was necessary to modify and add interview questions because concepts emerged through data analysis (Corbin & Strauss, 2015; Creswell & Creswell, 2018; Rubin & Rubin, 2012). The modifications to the interview guide did not impact the main interview questions but expanded upon the follow-up questions and probes, such as inquiries

regarding the requirements influencing programs and the influence of city leadership in pursuit and achievement of accreditation. For accredited programs, additional follow-up questions were added to better understand the effort placed toward pursuing accreditation compared to achieving accreditation. The final version of all questions ultimately utilized is reflected in Appendices F and G.

Technical and nontechnical documents pertinent to the topic were also gathered and analyzed throughout the study to complement the primary data gathering approach. Technical literature refers to professional and disciplinary writing and may be used to make comparisons, stimulate analytic questions, enhance sensitivity, or confirm findings. Nontechnical literature, such as letters, reports, memos, and newspaper articles, may also be used as they become available during the study, which provide insight into the process of accreditation (Corbin & Strauss, 2015). Examples of documents used in this study included local emergency management websites and publicly available plans, the EMAP Emergency Management Standard (2019) and Application Guide for Accreditation, and federal grant documents. Document analysis prior to the interviews allowed for more informed questioning because the researcher was familiar with the requirements influencing the emergency management programs and the steps necessary to achieve EMAP accreditation (Rubin & Rubin, 2012). For example, analysis of the EMAP website provided insight into the steps necessary for achieving accreditation, while reviewing websites from emergency management programs provided the researcher with basic awareness about the placement within the city structure.

Data Analysis

In-depth qualitative interviewing includes a continuous, flexible, and adaptable research design (Rubin & Rubin, 2012). For this study, some forms of data analysis were completed

immediately after each interview and on an ongoing basis. Data analysis in responsive interviews includes the following steps: a) interview summary and transcription, b) code the text based on relevant concepts, themes, and events, c) sort codes into a single data file, d) sort and resort material and compare findings from and within each group, e) integrates data and codes from the different interviews, f) generate a theory to provide an explanation based on the concepts and themes gathered, g) generalize findings beyond the particular individuals studied (Rubin & Rubin, 2012). Once an interview had concluded, the Zoom transcript was edited for accuracy and coded prior to beginning the following interview. Coding means “going through data and denoting concepts to stand for that data” (Corbin & Strauss, 2015, pg. 57). Coding was conducted by identifying concepts, themes, events, and examples, and marking them with a code to help navigate the data.

Sorting and comparing data within and among the two groups (i.e., EMAP accredited and non-EMAP accredited programs) was performed while data collection was ongoing. Once all interviews from a group had been coded, the codes and excerpts were combined into one file and sorted, then summarized. The summary highlighted collective answers to questions, key terms and definitions, and any new information found about the event (Rubin & Rubin, 2012). Information gathered during the coding process was then assessed against relevant literature and the researchers’ memos. Memos discussed emerging themes, relations among themes, relations across accredited and nonaccredited programs, suggested reformulations of research questions, captured thoughts about what interviews meant, reflections upon any bias detected by the interviewer or interviewee, and documented feelings from the researcher about how the interview had gone (Rubin & Rubin, 2012).

Coded data from the two groups (i.e., accredited and nonaccredited programs) were gathered into a single file, sorted, and then summarized. Sorting and summarizing allowed the researcher to compare codes that emerged from the data gathered across interviews to better understand similarities and differences (Rubin & Rubin, 2012). As the results narrative was being composed, the information was weighted and integrated to provide a holistic accounting of events. Generating theory, the next phase of data analysis articulated by Rubin and Rubin (2012) was not achieved as a result of this study.

The study sought to gather data from as large of a sample as possible by contacting every individual in the target population, however, the primary intent in a qualitative study is for the thoroughness of information while ensuring perspectives and ideas are adequately addressed. While a vast number of interviews are not required in an interpretive-constructivist approach to qualitative research, this study ensured each identified theme was probed so a balanced analysis could be presented (Rubin & Rubin, 2012). “In topical studies, you have interviewed enough people when you have several good interviews from each vantage point and can piece together what happened without blank spaces or unanswered questions...When no new information is forthcoming, you have reached what Glaser and Strauss (1967) term the "saturation point” (Rubin & Rubin, 2012, pg. 31). Interviews for this study ceased when saturation was reached with respect to what helps and hinders accreditation pursuit and achievement through data collected from leaders of accredited and nonaccredited city emergency management programs.

Sample Characteristics

This section presents a description of the characteristics gleaned from the sample. The data is presented for accredited and nonaccredited emergency management programs.

Emergency Management Leader (EM) Characteristics

See Table 2 for Emergency Management Leader (EM) Characteristics. A large portion of the EMs from accredited and nonaccredited programs had over ten years of experience, specifically in emergency management. Previous experience in emergency management was gained in nonprofit, healthcare, military, critical infrastructure, and government settings. The majority of those interviewed with less than ten years of experience reflected work experience in law enforcement, firefighting, and the military. Most emergency managers had a graduate degree. The area of study for degrees varied widely. Majors described by more than one participant include emergency management, homeland security, sociology, public administration, public health, fire science, and communication.

Table 2. Emergency Management Leader (EM) Characteristics

Characteristics	Accredited	Nonaccredited	Total
EM Experience*			
0-2	0	1	1
2-5	1	4	5
5-10	1	6	7
10+	6	11	17
Education			
No degree	0	2	2
Associate	0	1	1
Bachelors	3	5	8
Graduate	5	11	16
Doctorate	0	3	3

*Experience working in emergency management described by the participant, regardless of sector or level.

When asked about background and experience in emergency management, participants in the study described possessing various certifications, including the Certified Emergency Manager (n=7), FEMA National Emergency Management Academy (n=4), Harvard National

Preparedness Institute (n=2), and Business Continuity Professional (n=2). These responses were based on open-ended questions and not from specific inquiry about certifications. Some responses were more detailed than others. A consistent certification was not observed across the majority of EMs interviewed for this study.

Emergency Management Program & City Characteristics

Emergency management programs ranged from a full-time staff of one to 18, with both accredited and nonaccredited programs reflecting small to large staff sizes. There was only one emergency management program with a staff of one, which was not accredited by EMAP.

Emergency management programs were placed within the city structure under the a) Mayor (n=4), b) City Manager (n=6), c) Public Safety Director (n=6), d) Fire Chief (n=8), e) subordinate to the Fire Chief or Police Chief (n=5). See Table 3 for the differences in the size and placement of both accredited and nonaccredited programs.

Most of the emergency management programs represent cities alone, but nine (three accredited) represented city and county emergency management programs. The cities included in the study represented different forms of government, including a) Strong Mayor, b) Council-Mayor, and c) Hybrid. During interviews, emergency management programs were found to be classified under five different types of accreditation status: a) accredited (n=8), b) pursuing accreditation (n=1), c) actively preparing to formally pursue accreditation (n=6), d) considering pursuit of accreditation (n=2), and e) not pursuing accreditation (n=13).

Those who were classified as “actively preparing” to formally pursue accreditation articulated that the achievement of EMAP accreditation was in their strategic plans and were working to emulate the standards, even while they had not officially begun pursuit of accreditation. EMs who are “preparing to pursue” had EMAP in their strategic plans but had not

Table 3. Emergency Management Program Characteristics

Characteristics	Accredited	Nonaccredited	Total
Program Type			
City	5	16	21
City & County	3	6	9
Placement			
City Mayor	2	2	4
City Manager	2	4	6
Public Safety Director*	0	6	6
Fire Chief*	3	5	8
Deputy Fire or Police Chief*	0	5	5
Staff Size			
1	0	1	1
2-5	1	10	11
6-10	4	6	10
11+	3	5	8
City Population			
300k – 499k	4	16	20
500k – 1m	3	5	8
1m – 1.5m	0	0	0
Over 1.5m	1	1	2
City Governance			
Strong Mayor	6	12	18
Council-Mayor	2	8	10
Hybrid	0	2	2
Accreditation Status			
Accredited	8	0	8
Pursuing	0	1	1
Actively Preparing	0	6	6
Preparing to Pursue	0	2	2
Not Pursuing	0	13	13

*The position or equivalent is listed.

begun emulating The Standard. For the purposes of this study, the formal pursuit of accreditation begins once the Application for Accreditation (EMAP, 2020) has been submitted by the emergency management program.

Researcher as a Participant

The researcher has personal experience in emergency management and considered this reality and its potential consequences (e.g., presumptions or biases) throughout data collection and analysis, consistent with the literature (e.g., Asselin, 2003; Mullings, 1999). Based on prior experience, the researcher entered into the project believing that a) emergency management, based on best practices, adds value to local communities, b) a set of emergency management standards will support further professionalization, c) emergency management programs across public and private sectors and of differing sizes can unify under one common standard, and d) accreditation based on the Emergency Management Standard (2019) will not become widely applied in the field without incentives or a mandate.

Still, prior knowledge of EMAP was also beneficial to interpreting findings and supporting inquiry with participants in the study (Corbin & Strauss, 2015; Creswell & Creswell, 2018; Rubin & Rubin, 2012). For example, the benefits of prior experience included the ability to relate with participants in the study, understand field-specific terminology, and understand contextual clues to probe further. Rubin & Rubin (2012) suggest the researcher take time to examine assumptions about the research topic, practice self-awareness during the study, and make pre-existing beliefs known in the research product. The researcher considered biases throughout data analysis and, with the guidance of the academic advisor for the study continuously reflected upon the themes emerging in the data rather than previously held

assumptions. Memo development throughout data collection and analysis allowed the researcher to capture presumptions, comparing them with emerging findings.

Limitations

There are factors that may influence the extent to which results are generalizable, including the setting, sampling strategy, number of participants, and findings from the study (Rubin & Rubin, 2012). Limitations of this study involve the researcher's role (previously discussed), the COVID-19 context in which interviews were held, the number of programs that had earned accreditation, and the participants' role in the city and accreditation process.

The response to the COVID-19 pandemic continued to be a concern for many EMs. Some described having their EOCs continuously activated in some form for over three hundred straight days (i.e., in-person or virtual). The ongoing response likely limited the number of responses received. Some of those who had led their programs through accreditation had done so up to nine-years prior, which may have influenced the recollection of the process, reflected a previous iteration of the Emergency Management Standard (2019), or described a process which had since been updated.

Studying emergency management leaders (EM), rather than staff within the Office of Emergency Management may limit the findings of the study specifically related to details related to some of the steps necessary to achieve accreditation. In some instances, the EM and the EMAP Accreditation Manager (the individual from the emergency management program responsible for liaising between EMAP and the city) were the same individual, but the EMAP Accreditation Manager was mostly a role assigned to a staff member, typically the Deputy Emergency Manager. The decision to focus the study on EMs rather than EMAP Accreditation Managers was made to ensure consistency in the data, and because the EMs were assumed to

have more perspective on the essence of the research questions, *what facilitates or hinders the pursuit and achievement of accreditation?*

Focusing the study on large population cities rather than other municipalities or counties should be considered a limitation for the generalizability of the themes found across different contexts. The decision to focus the target population on large cities rather than other forms of government or other types of entities was deliberate due to the proportion of resources centralized in those areas and from the researcher's interest. To help control variations among resources available to emergency management programs widely seen across the United States, the interviews focused on EMs from cities with a population over 300,000.

Despite these limitations, methodological consistency, clarity of purpose, self-awareness, qualitative research training, sensitivity, hard work, creativity, methodological awareness, and a strong desire to do research are factors that enhanced the quality of this study (Corbin & Strauss, 2015; Rubin & Rubin 2012). Furthermore, the researcher was disciplined in clarifying and testing existing bias through journaling and memo creation and was reflective when presenting the findings (Corbin & Strauss, 2015; Creswell & Creswell, 2018; Rubin & Rubin, 2012). The researcher is confident that these measures ensure that the findings, as resulted in the next two chapters, are generalizable to the data collected.

Summary

EMAP has been endorsed as the standard for emergency management practice (Shiley, 2018), yet few programs have pursued accreditation against these standards, and there has been little empirical research into EMAP. The purpose of the qualitative, interpretive-constructionist approach to this study was to understand that emergency management program pursuit and achievement of EMAP in this context. Zoom-based interviews with EMs in cities with

populations of more than 300,000, who were identified through purposive and convenience sampling, led to the collection of rich data and identification of themes related to this study's research questions. As the following chapters reveal, the findings of this study support understanding of the pursuit and achievement of EMAP accreditation and reveal several implications worthy of consideration.

CHAPTER FOUR: PURSUIT OF ACCREDITATION

This chapter presents the findings for the first research question, what facilitates or hinders the pursuit of accreditation? As previously noted, interviews were conducted with emergency management program leaders (EMs) in cities with a population of over 300,000. It was necessary to gather data from EMs representing both accredited and nonaccredited programs to understand what helps and hinders the pursuit of accreditation. This chapter presents the themes associated with the pursuit of accreditation over six sections: a) value, b) structuring mechanisms, c) capacity, d) emulating, e) city support, and f) other added investment.

Before one can fully understand and appreciate the themes that illuminate the pursuit of accreditation, it is first necessary to understand the context in which those themes have significance. Data analysis revealed that EMs perceive emergency management practice across municipalities to be fundamentally unstandardized and EMs exhibit different backgrounds one to the next (e.g., education, occupation). Emergency management programs exist in various organizational structures within municipalities. EMs are supervised and supported by different leadership external to the program as result. From one municipality to the next, the programs have differing amounts of staff, budgets, grants, and hazard-specific focuses; and they must be compliant with a different network of laws and regulations.

Against this backdrop, nothing compels programs to exhibit a standardized core regarding what they do, how they do it, or what they achieve. Emergency management is not a profession. Hence, the individuals employed in these programs, and those who lead them, have no shared knowledge or experience base from which they approach the strategy and leadership of their respective programs. Accreditation is not widespread or compulsory (by virtue of incentives

or sanctions), and national laws and regulations do not set requirements or corresponding with what existing standards do.

Emergency management programs, from city to city in this study, are not the same. As an EM described, “every emergency management program is different and, if you've seen one emergency management office, you go to the next one over, completely different” or, as others put it:

If you've seen one emergency management agency, you've seen one emergency management agency. And it probably depends on the State, but... there are a lot of unique elements to each of our organizations, and I can probably pick out a few common elements, but they are so very different...

The variation in emergency management programs and the context in which they exist is not unique to the 30 settings from which participating EMs came. This variation is exhibited nationwide—anywhere emergency management programs are found. EMs in this study are aware of this reality. For example, one EM commented,

Emergency management is not recognized as a necessary profession, as a necessary thing that has to be implemented and lived up to any standard...it can be a full-time job or part-time job, fire, police public works; you can kind of define it to be whatever you want it to be.

An individual EMs vision of what emergency management is and how it should be approached within their context is essential. In fact, what EMs know, think, and perceive with respect to any aspect of their program, including accreditation, is also essential.

EMs have considerable influence regarding whether or not they will advocate for EMAP accreditation and are well aware of this fact. As one EM observed, “it’s the person who sits in this chair, like what influence you have,” and another, “I really think it’s personally based on who is sitting at the helm to make those decisions and where they want to take the departments or cities and communities.” In contrast, what an administrator of a hospital or a president of a

university might think matters little—the expectation of accreditation pursuit is well established in the field in which they work, where extrinsic forces have grown over time and intrinsic value may be less influential.

Value

EMs perceived the value of The Emergency Management Standard (2019) (The Standard) and accreditation on a continuum. On one end of the continuum are EMs who advocate passionately for adherence to The Standard and accreditation. On the other end of the continuum are EMs who do not intend to pursue accreditation. The perceptions of most EMs fall more toward the advocate end of the continuum than the other, but their perceptions are a function of the value they associate with accreditation. The value EMs associate with The Standard and/or accreditation may be influenced by their perception for what a good program entails, benchmarking, validation for the program, and/or absence of extrinsic force. Data analysis revealed that EMs perception of value varied and, further, the perceived value was the most critical influence on pursuit. EMs perception of The Standard and accreditation in this regard may help or hinder pursuit.

What a Good Program Entails

As previously noted, a shared understanding of what a good emergency management program entails is lacking in the field. Many EMs saw The Standard as a way of addressing this gap. As one EM described, "a world-class city should have a world-class emergency management program, and the gold standard for that is EMAP accreditation," and another, "I think having this process now is going to allow me... to use EMAP accreditation standard as the gold standard." Such sentiments were common:

I think it's a fantastic set of explaining what at EM program should be doing. These are things that, I feel, even if I wasn't going for EMAP accreditation, we should be doing.

I mean, we have to do that because I think it sets a framework, okay, what are we supposed to meet? Do I think big cities need it? Absolutely, you have to set the framework of what you're supposed to look like.

...I think having standards to build to is important, and they're helpful for people at the same point in time.

I think EMAP is important because it provides a standard.

When I was interviewed, I said, you're well known for wanting to be the best city in the nation, and a lot of us adore you for saying that 'how will you know when you're there? How would you compare yourself to everyone else?' And so, he did exactly what I hoped he would do; he said, 'Well, you're an emergency manager; you tell me how I should do it. And I said, 'You get accredited.'

Even EMs who thought that The Standard was not perfect in every way still saw its value in providing a sense of what a good program exemplifies. As one participant from an accredited program remarked, “maybe we don't agree with every single standard...don't let perfect be the enemy of the good.” Another EM expressed,

There needs to be some sort of standard that even if it's flawed...to be able to look at and say, these are the baselines, these are the things that you need to do. We're better off having that...than not having anything at all.

Benchmarking

Since The Standard represented to many what a good program entails, it had value and utility as a benchmarking tool. For some, it had value to benchmark the development of a program from its inception.

EMAP is very beneficial for providing a roadmap, particularly for newer programs that are starting out if they need to be able to say, what are the basics that I need to have, what are the building blocks of a comprehensive emergency management program. I think EMAP is extremely valuable in providing a roadmap.

For others, who came into a leadership position in existing programs, The Standard allowed them to evaluate the program and where it needed to go. The Standard had intrinsic and explicit value

because it could be used in a way to guide emergency management programs. Their comments make the value they associate with The Standard clear:

Having a standard to measure my program against to really be able to get like a report card on like, hey, how are we doing, what areas are we lacking on, what, what areas can we improve in.

When I became the Director, my thing was...Okay, let's make sure we're doing all the right things as an emergency management agency, what we should be doing, so I started exploring [EMAP] and started doing self-assessments, kind of made a little bit of progress and just put together like an excel spreadsheet.

My overall perspective of it is it kind of gives us a benchmark criterion as a program and on how to be a holistic and well-rounded program; the different criteria we need to be touching on and including in our program, so I would say it's a great benchmark.

I have a certain understanding, and EMAP has influenced my role, and as I've moved into actually managing a division, it has influenced how I evaluate and how I strategize for my program, like I said, building this little map and having the different components that I want to check off.

When I took the [City] Program over ...I knew what a good roadmap EMAP was because it's a set of standards that are meant to address a comprehensive program. So, with that knowledge in the back of my mind, it was relatively easy to take a look at [the city] and say, well, we're spending a whole lot of time trying to perfect our response. But we're spending precious little time on mitigation and even less time on recovery planning, and that's just not healthy for the program; you're never really going to be perfect in any of the phases of emergency management; you've got to have a more balanced approach so that that really influenced a lot of what I was trying to get accomplished.

For some EMs, there was so much value in The Standard as a benchmarking tool that it was worth working toward and maintaining compliance even without formally pursuing and achieving accreditation. As one put it, "I'm not doing EMAP just have a checkmark and to have that accreditation sign in front of [the office], I'm doing it to get our stuff done well and right," and others:

What you go through to become accredited can be just as valuable or even more so than the piece of paper that says you are accredited because it just does so much for your program, it can point out gaps for you.

I'm working towards it. To me, I think it's a great standard. I don't necessarily so much care about having the piece of paper that says you're doing it as I am doing it...to me, the higher priority is actually meeting those goals first, and then if I go back and get the piece of paper afterward, great.

The Standard has value because it provides a picture of a good program for some. For others, applying The Standard within an emergency management program provided a basis for assessing and managing their programs. Some of the EMs who perceived the value were advocates for The Standard and accreditation, but, as pointed out previously, some saw intrinsic value in The Standard even without accreditation. While some may not have necessarily perceived distinct value in accreditation, others did.

Validation

Many EMs perceived value in accreditation, not simply in The Standard. The value they associated with achieving accreditation revolved around their belief that it validates their program. For some EMs, external validation was cemented in validating the quality of their program. One EMs comment illustrates this view:

I always felt it was really important to go towards the accreditation process for a number of reasons...but having an outside entity, I think that's very credible way to evaluate your processes; it is critically important, in my mind, short of an emergency, where you are tested clearly, a real emergency...the notion that you have a third party evaluate your processes, I think, is critical.

Achievement of accreditation gives EMs a way to communicate that validity to others—a way of telling the story of the value of their program, as the following quotations illustrate:

It's going to let the citizens know, hey, these guys and ladies have put forth the effort to make sure that every standard is being met. All 66 criteria being met. There's a process; there's an app, there's an assessment, there's an audit, there's everything involved.

...gone through the due diligence of going through the whole process to see how we measure up to The Standard, and by the way, you can rest assured we meet that standard, we exceeded, so one it's about like internally focused on improving your program, and two is more like outwardly focused on telling your story.

...communicating why we got it and what it represents is going to be key, not just a piece of paper on the wall that says we're accredited but communicating what does that accreditation actually mean for our community that we are dedicated to the public safety of our citizens and organizations.

Achievement was also perceived to be valuable for communicating that the program is worthy of investment by some. One EM describes its value in justifying investment generally,

...we're using public dollars responsibly, we're protecting the public, and we've had peers come in and look, and it's a comprehensive look, and we're covering all the bases; we're doing a good job with it.

As the following quotation demonstrates, for others, the process was a valid means to argue for additional investment in the program.

Being nationally accredited gives you a certain amount of credentials...and inversely, it's also a great tool to hold up and say, 'the national standard says we should be doing this, and we're not. If you want me to do this, boss, I need resources to do that,' so it's very useful from that standpoint as well.

For other EMs, validation from external review by peers held value that seemed to cross into both the personal and the professional, such as what others in the field thought of them. One EM remarked, "it is seen as something to increase, potentially, the perception that you have a good program; it's more of a perception amongst your peers," and, as another articulated,

...I wanted us to be able to look at something that was put together from our discipline, from our peers, and say, yeah, you do meet this standard, or here are some things you need to work on still to kind of be the best of the best.

EMs who perceived value in The Standard and/or accreditation because it provided a basis for what a good program entails, a means of benchmarking, and/or validation were generally more toward the advocate end of the continuum. Perceived value in one or more of these ways facilitated pursuit among the programs represented by EMs—most who held one or more of these perceptions were preparing to pursue, pursuing, or had achieved accreditation. Yet, not all

EMs perceived value in these ways, and not all who did, were in some state of pursuit or achievement.

Lack of Intrinsic Value

Some EMs did not believe that The Standard represented something that all programs wanted to, or could, achieve. There were various reasons for this belief. One simply thought its formality made it not attractive, i.e., “I looked at EMAP pretty briefly, both that and NFPA 1600, and said that's too formal, I'm not going to go that direction.” Another EM explained that The Standard did not fit because of where the program was located within the municipality’s organizational structure, i.e., “if I were an independent office, I was not embedded in the police department...I would pursue EMAP.” Another EM thought it did not fit their jurisdiction, specifically,

In my jurisdiction, I have [multiple] different jurisdictions plus...tribes, managing and overseeing all of those resources for staff and for people; while I'm doing all the other stuff, I think that's the biggest challenge we've got. I think the reality of the situation doesn't match the expectations of the situation...I feel like the people who write the accreditations could sometimes benefit from talking to those of us who actually have to and are actually trying to live from; And so that, I think, and then it's like said it's finding the widgets of time to put it all together and to go through the process, that's been my big challenge and my big obstacle.

For some EMs, concerns about the fit of The Standard for their program diminished the value of The Standard in general. As the first example above demonstrates, a sense that The Standard does not work for their program can by itself lead to a determination not to pursue accreditation by the EM. Most EMs who were not on the advocate side of the continuum did not voice fit as the only concern. And some saw a lot of intrinsic value while still recognizing some applicability issues.

Some EMs could not see the value in accreditation themselves. As one EM stated, "I've gone back and forth in my mind because what's the return on investment or what's the benefit of

going through this?" Another EM explained it similarly, "why would I do that? Do I get an insurance break? No. Do I get better shareholder value? No. Do I perform better in a disaster? Well, we think so, but we don't really know for sure." Accreditation appears to be of dubious value to some relative to the amount of time, effort, and cost associated with its achievement. As one EM put it, "It's like five minutes of fame. And then what I don't know is that I have the resources and the wherewithal to go through that process and pay for it. What am I giving to my constituents?" Consistent with this view, another EM remarked, "When are you going to do your EMAP and, it's a lot of money, and it's a lot of time, and at the end of the day, I don't know what we get out of it right...And then crickets, right? It's like, five minutes of fame."

It is one thing for an EM to perceive intrinsic value and a different but related thing to be able to effectively articulate that value within their municipality. It is not hard to imagine that it would be difficult to articulate the value of something effectively when you do not see that value yourself. Some EMs describe accreditation as a tough sell. The following quotations are examples of evidence in support of this finding:

It's a hard sell...The cost-benefit analysis of certification is not like, okay, we're working on the APS for ourselves as emergency managers, but that doesn't really do anything for me; it doesn't help me in any way other than just to say that I did it.

I think the problem is with our office to get accredited, well, what's the value, what's the benefit that accreditation provides? Is it going to reduce our liability? Well, so far, no one's suing Emergency Management over anything, and they don't get how else it is benefiting the city...Basically, there's no incentive; there's no sales point.

I haven't seen the benefit of EMAP for local jurisdictions, and I know they're out there...the thing with emergency management, with most of the projects, is they're successful if you can somehow convey it to both the Fire Department leadership and city leadership, this is a thing we do, and this is how great it is for the city. And so, I can't, at this point, verbalize with EMAP.

In the absence of perceiving and being able to articulate the value of EMAP, extrinsic forces could compel EMs to value accreditation or, at the very least, to be motivated to pursue and

achieve it. Data analysis suggests that it just might take something like that for EMs to pursue accreditation. An extrinsic force could take the form of a legal requirement, as noted by some EMs.

Emergency management is very optional; it's whatever you want it to be. There's no legal requirement to do that; there's not really any kind of a liability concern if you don't do that; it's, it's very much just a, like a professional like a mark of professionalism, or a mark of excellence. But that's not legally required; it's not a liability issue, and that's what gets stuff done.

Alternatively, an extrinsic force could take the form of requirements attached to the receipt of grant funding from the federal or State government. One EM described,

The main reason we would pursue it, but this is not the case, is if it was directly tied to grant funding; And it is not currently tied to any of those major grant programs...I firmly believe if within the emergency management community, there was a sense or frankly from FEMA, which administers these programs, a sense that it truly was essential to follow EMAP, they would integrate it into some of those requirements.

At this point, not only is there no grant which attaches accreditation to receipt, but also no indication from the federal and State government that EMAP is the depiction of a good program or that all programs should develop around The Standard and benchmark against it.

There also does not appear to be a demand from within local government for programs to get accredited. Certainly, EMs would be responsive to being directed to conform to The Standard and achieve accreditation were they to make it a duty of the EM and an obligation of the program. Yet, as one EM remarked, "The customers seem satisfied with that so far, so no one is calling down the door saying we need you to spend five to \$12,000 getting accredited," and another, "it wasn't like the Mayor wasn't saying hey if your department can get accredited, I want you to be accredited." Other EMs described it thus,

No, we are kind of standalone on that if we want to pursue it. And we're able to pursue it, but right now, pursuing accreditation is pretty much internally, and no none of my 'electeds' care if we get it or not.

I think it's incredibly important to the field that we have this...but there's no push to really get it; it's not really super affordable right now...depending on the size of some EMs.

One might describe the extrinsic forces introduced thus far as more “negative,” but EMs did not think that was the only way they could be compelled to value and prioritize accreditation, particularly in light of its costs. Incentives could lead to an adjusted cost-benefit analysis when it comes to accreditation for some, but, as of now, there are no clear incentives, e.g., “It's not like you get ten more percent on your federal declaration for being accredited;” and “I just wish that there was some kind of a funding supplemental, like FEMA could create federal grants available to subsidize EMAP accreditation processes.”

Some EMs pointed to examples of how behavior or action is incentivized in other aspects of emergency management, such as the Community Rating System (CRS). The CRS “is a voluntary incentive program that recognizes and encourages community floodplain management practices that exceed the minimum requirements of the National Flood Insurance Program (NFIP)” (FEMA, 2021). As articulated by an emergency manager,

My leadership doesn't really understand what EMAP accreditation is and what it would get us...I think it's a difficult sell. For example, they understand CRS because your CRS rating lowers your people's risk and your flood insurance. It was a big deal to go down to CRS 1 because we saved the homeowners 5% on their flood insurance. They understand fire ratings because that takes off on homeowners' insurance. Where I think you would get the most buy-in from elected officials is if there was some sort of benefit to the community...other than it being a feather-in-my-cap; what's the point? It's not saving my population anything, it's not getting us any more money budget-wise, it takes up a lot of our time and a lot of our resources to pursue and keep up, and it's basically just for bragging rights, and I've got too much on my plate to worry about bragging right now. So, I want to say if you want to see an accreditation program that becomes widespread and widely accepted, it needs to pursue the same models as fire ratings and CRS, where it provides a direct financial incentive to jurisdictions and to municipalities to receive it.

The lack of extrinsic forces appeared to be a barrier in the pursuit of accreditation for those who did not see the intrinsic value in pursuit and accreditation (i.e., view it as what a good program

entails, benchmarking, validation). This was particularly true for those who already had concerns regarding the fit of The Standard.

Structuring Mechanisms

Every EM described structuring mechanisms as being highly influential in determining the priorities and tasks for their program. Their perception of the value of pursuit and/or accreditation set the stage for how they viewed everything else related to the topic—including structuring mechanisms. Structuring mechanisms establish the parameters within which the emergency management program may (and may not) work and set the minimum bar for what must be achieved. Critical examples of structuring mechanisms influencing programs in these ways include government requirements (e.g., law/ordinance, federal guidance, grant requirements) and the local hazardscape. Every program must deal with structuring mechanisms—they must comply with and react to the requirements they outline.

Governmental Requirements

The primary type of structuring mechanism influencing emergency management programs is from local, state, and federal government requirements. Laws, statutes, codes, ordinances, and regulations applying to city emergency management were reflected by emergency managers as setting the initial requirements for their programs. Locally, one EM described first having to consider local ordinances and legal authority upon taking the position, “The first thing to do is make sure that we had sufficient legal authority to do what we were going to do, so we reviewed the ordinance that called emergency management into being.” Local ordinances continue to matter once an EM is settled into their position. As one EM stated, “Locally, we do have some ordinances that we have to abide by...and then in addition to that, we've got some mandates by our city council based off our budget that they provide to us.” State

statutes were another layer of structural requirements that city emergency management programs had to meet. As one EM described, “the other part is what is in the [state] law that creates emergency management agencies and what do we have to perform there and then,” while another stated, “Some of it is like, for example, the title... in [the] state statute dictates that every county has to have an emergency management program that is responsible for these functions, so I have to do x, y & z”. The requirements accumulate, and EMs must track and meet them.

Yeah, a lot of it is based on what we already know whether it's in the state statute that you have to update your plan every two years, or whether it's in city ordinance, for example. You always are going to fall back on what you're required by law to do.

My first thing was working with our county leadership and then working with our state leadership and helping them define what are my priorities and what are they waiting for me on, what needs to be done. Looking at our statutes, our requirements.

The connection between the state and local requirements and program priorities was apparent in the data. For example, one EM commented, “my first priority is working on our local emergency operations plan. We have a deadline with the state.”

EMs also described federal laws and regulations managed by multiple federal agencies influencing their programs. EMs must consider the different federal laws and regulations applying to their city and “crosswalk” those requirements for their context. One EM referenced different federal requirements that the city EM must consider,

Everybody's only operating within the extent of the law. It might be a great idea to have a mitigation plan that has human-caused hazards in today's environment, but that's not the law that empowered it; that was the Stafford Act which is wholly focused on natural hazards. If you want to talk about hazardous chemical materials, oh, you have to go over to the EPA and the Emergency Planning Community Right to Know Act, so here's the requirements for them.

The local, state, and federal government requirements appear to be one aspect of the structural mechanisms which influence city emergency management programs, but programs are also

reacting to federal *guidance*, which is separate from requirements established by law or regulation.

Guidance from the Federal Emergency Management Agency (FEMA) and the Department of Homeland Security (DHS) was frequently referenced by EMs. According to Executive Order 13891, guidance documents are “an agency statement of general applicability, intended to have a future effect on the behavior of regulated parties, that sets forth a policy on a statutory, regulatory, or technical issue, or an interpretation of a statute or regulation” (President of the United States of America, 2019). EMs described the influence of FEMA/DHS guidance on how federal legal requirements are executed, i.e., their concern is not simply that they have to do something (legal requirement) but how they do it and what the outcome looks like (policy) as well.

EMs generally described overall guidance from FEMA as influencing the way they structure and operate their programs. As one EM described,

I mean, there's a lot of national standards that are out there, and there's a lot of guidance; FEMA has a lot of guidance manuals, and EPA, and all that sort of thing but figuring out exactly when and what you want to focus on even with a relatively large office.

As the following sample quotations demonstrate, there were many different types of guidance documents influencing the execution of a range of tasks referenced by emergency managers during interviews (e.g., mitigation planning, comprehensive planning, exercise design, and delivery, and threat and hazard risk assessments).

FEMA CPG 101 is going to be more of what we're following...we're going to use that guidance document for hazard mitigation planning to direct what we do or how we can plan.

FEMA guides or mitigation plans, meeting all those the requirements of our mitigation or our plans are written in. CPG 101...are meeting all the names compliance, and we're following all that.

Our primary focus is working on pre-planning and planning stuff with CPG 101 version three coming out.

All of our exercising follows HSEEP, and so we do HSEEP templates that we utilize...everything gets laid out well in advance, and I have a long-standing two-to-three-year plan on what we're doing at any point in time.

Every EM discussed reliance upon government grants to fund their emergency management program. Grants provide needed resources for emergency management programs, but, in exchange for the funds, the state and/or federal government typically add any number of requirements grantees must fulfill. How much grant funding programs received and of which kind varied, but the general impact they had on the program did not.

The grant most referenced by EMs was the Emergency Management Performance Grant (EMPG). EMPG is “the only source of federal funding provided directly to state and local governments for all the functions which help build a robust emergency management system” (NEMA & IAEM, 2020, pg. 2). “For every dollar Congress appropriates for EMPG, state and local government must match dollar-for-dollar and typically provide a match well beyond what is required” (NEMA & IAEM, 2020, pg. 4). EMPG dollars are not free, however. As FEMA (2021) notes,

FEMA requires recipients to prioritize grant funding to demonstrate how EMPG Program-funded investments support closing capability gaps or sustaining capabilities identified in the Threat and Hazard Identification and Risk Assessment (THIRA)/Stakeholder Preparedness Review (SPR) process and other relevant information sources, such as: 1) after-action reports (AARs) following exercises or real-world events; 2) audit and monitoring findings; 3) Hazard Mitigation Plans; and/or 4) other deliberate planning products. In advance of issuing the FY 2021 EMPG Program awards, FEMA Regional Administrators will identify regional priorities based on their unique knowledge of the region's preparedness and emergency management needs and share those priorities with the states and territories within their region. The final priorities will be identified and mutually agreed to by the State or territory and Regional Administrator through a collaborative negotiation process. Ideally, all EMPG Program-funded projects, as outlined in the approved FY 2021 EMPG Program Work Plan, will support the priorities identified through this collaborative approach (pg. H-1).

Emergency managers widely discussed meeting EMPG requirements as a priority. For example, one EM described, “the requirements in the EMPG grant, obviously, is one of our deliverables in what we have to do,” while another stated, “work is being driven more by; we're being driven more by Emergency Management Performance Grant requirements.” However, EMPG was not the only funding source leveraged by emergency management programs.

There were other funding streams referenced by emergency managers as influencing their daily requirements, such as the Hazard Mitigation Grant Program (HMGP) and the Urban Areas Security Initiative (UASI). HMGP “provides funding to state, local, tribal and territorial governments so they can rebuild in a way that reduces, or mitigates, future disaster losses in their communities” (FEMA, 2022a). UASI is a “program which provides funding to enhance regional preparedness and capabilities in designated high-threat, high-density areas” (FEMA, 2022b). Programs may receive EMPG, HMGP, UASI, and/or any number of other federal or state grants, and with receipt, programs are obligated to meet all the requirements associated with each. As one EM stated, "we rely on a lot of the federal grants, EMPG, hazard mitigation, all federal funding."

Exactly what parameters emergency management programs may work within and what they must accomplish varies, as do the origins of those requirements. As one emergency manager described, "it's a hodgepodge...part of it is grant driven, what are the deliverables; the other part is what is...in the law that creates emergency management agencies." As the number of requirements accumulates, many EMs find themselves constantly reacting, continuously juggling priorities and resources to stay in compliance, but requirements are not the only things to which EMs must be responsive.

Hazardscape

The structuring mechanisms pertaining to emergency management programs had to be applied within the particular hazardscape for each city. The concept of hazardscape refers to the combination of hazards, vulnerability, and risk that exists in a given locality. Since hazards, vulnerability, and risk vary across time and space, so does the hazardscape from place to place. The hazardscape also focuses EM attention and influences how they prioritize things within the program. Sometimes, as is the case with floods and hurricanes, there is a seasonal structuring influence. An EM described recurrent consideration of flood hazards within their city as "the biggest thing for our area flooding. And so, we always, we're always talking flooding, especially this time of year." Another EM stated, with respect to hurricanes, "One of the issues that we have here is, one of the hazards we deal with is hurricanes right, and how we deal with hurricanes and providing protection for the community." The seasonal demands due to the hazardscape can be substantial:

For hurricane season we have the outside ...we have our internal agencies...we have all these separate groups knowing that we need to meet those...so it's not just all one package. It's all one package, but it's divided into different silos that we need to make sure that we have our damage assessment group, our equipment. We have a preposition contract if we need heavy equipment; we have a contract with them, so we got to make sure all that's in place. We have a contract with debris management for big events, so we need to make sure that's all in-place. So, it's just a lot of coordination and people say that hurricane season is over, that our job is done, or just beginning again, so we do coordinate the different agencies, even though it's a lot if you break it down into different sections like chapters of a book. Then that needs to happen at this time of year and this time of year, just like as we get closer to hurricane season. Okay, now it starts; let's make sure we're okay on our evacuation and how we're going to work with that, so we'll get all those agencies that that way.

Unfortunately, hazard events are also part of the hazardscape. It goes without saying that, as they occur, EMs and their program staff often turn all their time and attention to incident management, at least for certain periods. Yet, the occurrence of hazard events does not mean that

all of the structuring mechanisms previously discussed just disappear—quite the contrary, as the following quotation demonstrates.

Everything gets laid out well in advance, and I have a long-standing two-to-three-year plan on what we're doing at any point in time. ...there's this great quote by Mike Tyson that I love [which says] 'everybody has a plan until they get punched in the face.' And I recognize, I do [get punched in the] face a lot. And so, I lay these plans out...sometimes things are going to get pushed back. Other times I just interject the chaos in between my steps. Then, so that's kind of where we're at, it's, it's a juggling act or spinning plates.

The combination of government requirements and hazardscape-related structuring mechanisms certainly creates a diverse, long, and fragmented “to do” or, rather, “must do” list for EMs.

Their assessment of their particular list informs their perception of whether or not their context will allow for the evolution of their program in the form of pursuit of accreditation. Data analysis revealed that some EMs perceived that their particular structuring mechanism context was a barrier that would not allow pursuit. Yet, all programs have a variety of structuring mechanisms, and the majority of EMs reported actively preparing for pursuit, in pursuit, or having achieved accreditation. Structuring mechanisms were not a barrier for all of those in these latter categories, or, at least, structuring mechanisms were not the only barrier. Certainly, a perceived lack of value in pursuit of accreditation would be another barrier that some EMs brought into their evaluation of the structuring mechanism context and whether it would allow for pursuit.

Capacity

The capacity of the emergency management program emerged as a strong theme related to the pursuit of accreditation. EMs raised the lack of available staff and time as capacity problems that barred pursuit. As one EM described, “the other challenge with EMAP is because we're so understaffed, it's like where would we find the time to even work on that when we can barely keep our head above water with the workload we have now,” and another, “it's a

manpower issue that when we have a minute, we'll do some of these other things,” and, yet, another, “...as a staff of one, EMAP was really not attainable because you just didn't have the time or the staff to put towards it.” It seemed important to EMs to perceive enough capacity within their programs to dedicate to pursuit before they would decide the timing was right to initiate the official process.

The lack of staff and time EMs perceived was in relation to their particular mix of structuring mechanisms, which establish the minimum of what they must do. These structuring mechanisms absorb significant staff and time, as the following quotations demonstrate.

And so, what that boils down to is, there's already just a shortage of widgets of time for tasks. And so, until we settle into one of those periods where I go a couple of years without disasters, actively pursuing EMAP accreditation is probably going to be a low priority item. And that's where we're at is, So it's an aspiration to us, but it's also something that we don't have the resources to pursue.

At some point, I'd like to be able to get our agency into [accreditation] but... right now in in the way that we're staffed, and the amount of work that we have to do with the staff that we're allotted. I can't imagine being able to successfully manage, putting the work into that program while trying to keep up with what we're trying to keep up with. I just don't see it ending well. I would love to; I think there's a lot of great information and processes that go into that.

Well, unfortunately, I just haven't had time to address it. I say all the time that the hits just keep coming. I feel like every time we get above water, with COOP. We get another spin, right, or we have a notice of that or a weather event, and I want to be there; however, it is we're supposed to get there. But it's just an uphill climb right now to try to get a lot of these, these other objectives complete.

So, where I am at now is, we pretty much get to reinvent our emergency management department in line with our [state] statutes. ...and we are slowly bringing a lot of our emergency management programs back online.

EM perceptions of capacity were not formed only in light of what complying with structuring mechanisms would require. Their capacity perceptions were also formed based on their assessment of how much staff and effort would be required to get the program up to standard.

For many, their programs were far short of The Standard when they first considered pursuit. For

example, an EM reflected, "honestly, we are kind of underwater...And so I'm just trying to bring them all up to standard because they just, they haven't been taken care of." EMs were overwhelmed, at times, by how much staff and time would be required to get a program up to standard.

...the bandwidth and just the complete scope of being prepared for EMAP and then going to the actual accreditation process are huge; it is a huge lift.

It was very overwhelming. And so, just the idea of at a city level to have to achieve that, I mean, we were just churning out plans left and right to have all the boxes, all the plans checked all these procedures, so it was, it was very time consuming, and we actually went so far as to do these regular quarterly assessments and evaluate the progress that we're making; very time consuming and just didn't see the benefit of actually getting it.

It's a time-intensive program to stay on top of. If you have a small staff, one or two people, it can be challenging to stay on top of all that...It is a substantial amount of time to make sure not only do you keep all your normal documents up to date and reviewed and revised and relevant, but when EMAP comes around, having to write all of those performance indicators... and having to respond to all of the standards and how we need it um it's a time-intensive process, and that can be challenging...

If I had to rank them, I would say that the biggest hurdle is probably just staff time having the time to truly look at The Standard, understand it, and then trying to gather everything. So, I think that's probably one.

Accreditation, once achieved, is not achieved forever. The Standard must be maintained, and so too must the commitment of staff and time.

I think the only limit, there is one, the value that it brings to the city to the finance, so we already talked about process...And third is you could have a staff to work on it, and then once you do it, you've got to have staff to maintain your proof to show that you're doing those things so when you go for accreditation.

...it does give jurisdictions an ability to do that annual assessment right because that's part of the annual reports that you do is to continue to go back and reassess where you're weak points are and areas that you need to just stay engaged in because, with all of the busy, just the operational focus of responding to disasters definitely can take you off the mark, so it's a good foundation to always have.

...I was actually with the fire department. The city's local fire department when they went through their accreditation program, and I saw firsthand the resources that they had to dedicate and then a lot of the things that they had to change and prepare to

change and implement that could cost a lot of money. To keep that accreditation, and now they're having to go through it every year, they come back into reevaluate and things like that...

I think it's a good idea, but it's just a lot of work, not just to make it happen. But then continuing up record-keeping and documentation almost becomes a job in itself.

Capacity concerns were common across interviewees. No EM suggested they had ample staff and unlimited time at their disposal. Still, while acknowledging the capacity burden pursuit would require, some EMs were committed to it.

I think the challenge is that you start to manage day-to-day operations, so stuff comes up. You get a blizzard, you get a flood in that year, a prep that you're kind of diverted into other day-to-day operations, and so, I think the story is persistence, to say that we're going to accomplish this so regardless of whatever happens, this is a top priority; That we're going to get done, and so I think the first story is we could have been easily derailed in not getting to the EMAP because it's so challenging and there's just day-to-day stuff to run you've got other things you're supposed to be doing...

On a day-to-day basis, it was never the top priority, except the day before assessment, but it was always, Okay, I need this by this time you figure out when between now and then, you get it done, but I need it done by this date, so establishment was a priority, and what the time frames were. So that was just like any other project, kind of basic project management and recognizing that the minute disaster happens, all that goes out the window, and you're in response mode.

EMs who associated dubious value with EMAP, perceived their programs to be "underwater" thanks to the weight of structuring mechanisms, or who perceived a lack of capacity in their offices to do any more than they were already trying to do were either not actively pursuing EMAP or had no intention of doing so. On the other hand, EMs who saw intrinsic value in EMAP saw how they could both pursue EMAP while complying with structuring mechanisms and found a way to dedicate capacity to it were considering pursuing or had pursued EMAP in some fashion.

Emulating

Data analysis revealed that EMs who intended to initiate formal pursuit of accreditation did not do so quickly. Instead, EMs began a period of "emulating" within their programs.

Emulating is the period during which staff makes changes within the emergency management program to meet The Standard and ensure the compilation of adequate evidence that The Standard is met. The emulating period lasted for a while, but just what awhile meant varied. As one EM said, "So, it's critically important that you start from the very beginning, a year out, two years out, and you use it sort of aligning yourself, and you start documenting everything in accordance to the EMAP standards." Other EMs suggested a similar timeframe was required,

...so, I just started showing the logic of doing all the things that are inside the accreditation standards and did that *for nearly a year* before I finally said, we've got so much point for our program we could actually seek accreditation.

You've got to be reasonable about how long it will take you to get there, and so I think we took a year, so say okay. In a year, we want to get started moving with accreditation is; this year, we kind of broke up the areas in which we needed to either update a plan or get it in motion. To make sure it was EMAP-worthy, for lack of a better term, there's a time issue *that took us a year to kind of get in place...*

Yet, for other EMs, four, five, or more years were needed (emphasis added below):

It's been on the table for four or five years, and one of the things that we have done is, as we have updated our Emergency Operations Plan or other types of documents. We've been cross-walking or checking it against the standards, so we've been since this has been a goal for a while. We're not having to truly start from scratch; we've been updating and changing documents and creating things.

That's one of our long term goals, and I'm hoping at the end of five years, we can have that EMAP accreditation, so that's also kind of a starting point for me to define programs that are weak which ones are strong, and where we need to focus our energy resources to communicating that was our leadership to again telling them the why, like this is why you want us to do this because it's going to be amazing.

So, that's how *I kind of developed it over the years* and overcame it. I mean, we put the target on the wall, and we work towards it, wasn't under any illusion that it take us a year and then all of a sudden, we'd be, we'd be there. It *really took us, the entire six years* to be to a point where we say okay, I think we've covered all the bases now let's bring our friends...

The amount of time needed is determined by the extent of change and documentation required to be compliant with The Standard while also concurrently managing the demands associated with

structuring mechanisms. And again, The Standard includes 66 individual standards concerning entire areas of activity (e.g., mitigation or recovery) and specific tasks (e.g., plans). Virtually every aspect of an emergency management program needs to be reviewed for compliance. As EMs discussed:

Now, I will say that we've been very thoughtful are much more thoughtful in how we are approaching, so again, we haven't initiated formally the process, but we have already when we put together some of our major plans, or we're on our cycle this year for the hazard mitigation plan update we just updated our continuity of government plan. A year ago, we did our Emergency Operations Plan. All of those went through an EMAP review and lens; we went through the checklist, we reviewed the sections, and said, Okay, well, let's make sure this is going to meet the smell test with EMAP. As one of the criteria and one of the lenses that we went through when we did that. So, we made a very deliberate effort with that, as well as some of the things that we've done in the office and how we approach things with that.

Anytime that we begin a new initiative and tackle something I'm saying, look, let's pull up the EMAP screenshot of what the EMAP requirements are, send it, and say, here's this is the plan that needs to be developed for our public outreach and public alerting efforts. Make sure you're following these elements in your plan, and you can be created from there, so yeah, that's a little bit about how I got involved and what we focused on initially...

As previously established, the notion of concurrently emulating The Standard and meeting structuring mechanisms was overwhelming, so overwhelming that some EMs do not choose to emulate it. Those who guide their program through an emulating period seem to not see emulating The Standard as something separate from meeting structuring mechanisms, requiring a separate management process. Instead, those who engage their program in emulation see The Standard as an umbrella, a meta-organizing construct, through which structuring mechanisms may be organized. No one told the EMs to see The Standard that way. As the following quotations amply demonstrate, they just did.

We...wanted to use it like, our new version of a strategic plan, like, how do we kind of make this part of our culture right not have these parallel structures, but really use EMAP as the sort of our guiding principles our foundation.

The best way to explain it is. You can get real-world experience on how to manage disasters, or you can go get your education in it, but there's something that is lacking, and that is, you need to understand what the management system or cycle is of your emergency management program and that's what EMAP does for you. It creates like the plan-do-check-act of your management system, not a particular plan, but how does this overall program all work together.

Of course, like in particular sections, we make sure that we're meeting. Whatever the FEMA rights or mitigation plans meeting all those the requirements of our mitigation, or our plans are written in. CPG 101 or two, one or whatever it is now. Are we meeting all the names compliance and we're following all that? Does it show you how it's all supposed to work together? And so, we follow EMAP for that.

So, this will lend a little bit to the value of the EMAP. When we took EMAP on, it was to help us make sure that we were covering all of our bases from a programmatic sense, and that process really helped us identify our gaps but also gave us a good way of organizing and structuring the office, based on our priorities based on how the various areas that needed to be strengthened.

It should be baked into how you do your day-to-day business. And I think that's the differentiation between programs that thrive with the EMAP and programs that just do it and kind of check a box is that programs that thrive really look at the standard as a way to do business.

I've printed out on our plotter all the different accreditation standards... we refer to them on a constant basis, and it's my entire hallway... we are constantly looking at them and reviewing them and trying to base our plans on those. And they kind of help set those long-term goals.

It appears that EMs actually guide their program staff through most of the work of accreditation before formally initiating the process by applying for accreditation and submitting their self-study to EMAP. In fact, EMs wait to formally apply until they believe they are close to, if not completely compliant with, The Standard. As described by one EM, "I don't want to get started on it until I know for sure that I'm going to qualify to get it," while another EM expressed, "I would hate to start it and not be able to accomplish it." Comments along these lines were common.

I would say to jurisdiction is go through the standards if you're not at somewhere between 80 and 90% now like go back to the drawing board, and spend some time getting it, because it's not stuff that you can just really piece together on the fly, frankly.

We just wanted to focus on the things that we had already identified as priorities when we probably needed them for accreditation in some way. I don't think we had purely mapped out, let's do these things before we get accredited, but the logic of like, we should have these things in place before we pursue accreditation.

Once we went through kind of a thorough review of all our documentation...we were closer than we kind of thought we were anyways, and so we just decided to go ahead and put forth the effort to finish everything up and just go for that accreditation.

Emulating The Standard over time provided an opportunity for EMs to evolve the emergency management program from the historical context in which they had existed—always reacting to the hazardscape and other structuring mechanisms—to a program reflecting a meta-structure provided by The Standard. To be sure, emulation required significant staff and time to accomplish, and structuring mechanisms were an ever-present reality. It is for these reasons that emulating was most often incremental and, over time and pursuit was delayed until there was an alignment between EM perception of value, capacity, structuring mechanisms, and emulating that made them confident the time for formal pursuit was near.

Interestingly, many EMs described the positive influence of EMAP trainings, webinars, and/or assessor experience in supporting emulation of The Standard (2019). As EMs explained,

They [EMAP] have you know webinars and trainings and things like that that provide assistance with the standards, and you know. An understanding of what the standards asking for and what type of documentation it's looking for, so EMAP is helpful in that sense of being able to provide the guidance, the training, ahead of time to, so the webinars, they have in the document, and they have the accreditation manager training that they do to go through all the standards and kind of what's expected of the program and everything, so all of that was helpful ahead of time.

I took an EMAP class at EMI, and then I was sold; I think some people, everyone reacts differently to EMAP. Some people think it's boring, other people think it's like the way of the future right if we can, if we can hit on these core foundational components and build a program from there then we're going to build ourselves for success and that was my school of thought. So I brought it back to my boss I you know typed up the budget number sold [them] on how we can implement it and then from there, if we're a normal city organization, we are tasked with a lot, with not a lot of resources and stuff to get it done, so we kind of decided on a couple key tasks that we would do to just start getting some momentum with enough so low hanging fruit we started our strategic

planning process that I lead for office. So, our Office of Emergency Management strategic plan that is on our EM web page on the city web page, I worked on that from beginning to end with other city, technical assistance support to facilitate some of the meetings.

The other thing that we did was we made sure that that as many people on my staff as wanted to. have the opportunity to themselves become trained as assessors and go on assessments. So, they would understand what it was going to feel like when people came to our place so I already had that experience might my deputy at that time already had that experience on and of the 16 people on staff, I think, for others. had already been involved in in some ways assessors either through training or through an onsite assessment.

My Deputy Director, not only was an assessor but was also a team lead so [they] had a really intimate knowledge and what's it like to take a team to a different or agency in a different program look through the documentation to interview staff, etc.

When I came to the city...that's when I first took the class became an assessor and pitched it to my boss.

I applied for the assessor training for the Emergency Management Accreditation Manager training. I went down to Long Beach, to get that training completed, and we attempted to kick it off within the office and start setting up our process on how we pursue it.

An emergency manager who did not take the EMAP trainings prior to pursuit described the challenges experienced,

...it's incredibly detail focused, to an extreme degree, and if you haven't gone through the training or you haven't been through the process, it's hard to appreciate just how detailed. When they say this, and that you better have this, and you better have that. So that they want to see both of those...we were overconfident in the self-assessment because we didn't understand the self-assessment. So yeah, if we'd gone through some or sent someone what most or I don't I can't say for most I think what a lot of. programs do is if they decide to go for accreditation, they'll send someone to the training so that you have at least one person that understands what the assessors are really looking for.

Access to online resources by EMAP was granted upon initial subscription to EMAP. Programs pay a nominal fee of \$450.00 and in exchange have access to online resources and webinars providing “the necessary information, tools, and resources for personnel wishing to become an EMAP expert”, review webinars as well as an online gap analysis tool that allows them to assess where the program is at relative to The Standard initially (no documentation of compliance is

required at this stage) (EMAP, 2020b). Subscription does not constitute instigation of formal pursuit; programs could subscribe and never initiate the process. A training course by EMAP is offered in person at national emergency management training centers, and anyone approved by a state office of emergency management can take it, assuming they can travel there.

City Support

Regardless of how aligned things were for EMs who intend to pursue accreditation at some point, data analysis suggests they cannot initiate a formal pursuit until adequate city support for accreditation is present. All of the facilitators and barriers discussed to this point seem to have been necessary but, by themselves, insufficient without the support of two types of individuals: 1) leadership and 2) other city stakeholders and in two forms: 1) general and 2) capacity commitment.

General “leadership” support for the emergency management program is important to EMs, at all times. For the purpose of this study, leadership can be understood to be those to whom the emergency manager directly reports within the city structure. EMs shared challenges related to emergency management being understood, or misunderstood, by leadership; let alone valued. Local ordinances, a form of structuring mechanism discussed previously, delineate the purview of the emergency management program. This purview is idiosyncratic from city to city but, overall, often reflects a view of what emergency management is that runs counter to, and/or falls well short of, The Standard.

Structuring mechanisms do not just set program parameters for EMs and their programs. It also sets the parameters of what emergency management is for city leadership. City leaders may move in and out of their positions, changing the parameters of what emergency management is for the city and the priorities for the emergency management program in the city,

whether grounded in the ordinance or not. For example, in some cities emergency management programs may be perceived as primarily grant managers, synonymous with a range of assorted add-on responsibilities (e.g., managing communications systems, public safety, mental health support).

It stands to reason that the varying level of understanding of what emergency management is may influence a leader's perception of the program's value. EMs shared that general support can be lacking for emergency management. As one described, "We're not really on anybody's priority list, like we're the eat your vegetables part of this organization, right," and another, "So, they're supportive of it, their hearts in it, but it just always keeps getting bumped down the list of priorities..." and another, "There's times where I even fight for relevancy to be considered a city department." And these EMs were by no means alone:

...for emergency management, I think it's difficult to convey what a priority it is for a city. I think that's just an ongoing battle that we have in emergency management. I'm very positive. I'm like, I will persevere, I will keep banging our drum, and I will keep telling people every chance I have that this is a vital thing to have in the city.

Yeah, because again, we're competing, we're small, especially when we haven't had a disaster. The irony of being an emergency manager...like, I almost need a disaster to happen to really get the focus and attention and the support we need to support emergency management because it's been so long. And then we've had leaders in this position, who had didn't have emergency management background to it, it, it made the program seem very weak and unnecessary.

EMs who perceived a lack of general leadership support did not see support for the pursuit of accreditation as something likely or, in some cases, something they would even request. Yet, where EMs enjoyed general support, they also seemed to enjoy significant freedom to shape their programs. EMs present this contrasting support scenario:

When I started it, there was sort of a program on paper but, not really, and so, I've had the freedom and the responsibility to kind of develop this program, as I saw fit. I've not had a huge amount of direction from any administration, and I've been under five

different Mayor's. So, it is kind of, for better or worse, it's kind of what I've been able to develop it and come up with...

...I have an incredible amount of capital when it comes to support from executive management; even our city council they, they, they get the importance of it now, they support it. I've never been told no; we can't do that or, no, that's not a valid argument for spending money on resource x or y or undertaking this huge project. I've pretty much always got and go and do like we trust what's important. We trusted me throughout all these activations. I have the credibility built-in, and so I think whatever, after careful consideration, the recommendation I make, I think it would be supported. If I believe it's important, they will support it.

EMs who enjoyed such broad leadership support tended also to be confident of their support for accreditation:

It's not something that I need to get approval to be able to do it is just a standard accreditation, and once we formally decide when we're going to do with and we initiate the process will certainly let them know, but it's not something that I need to seek approval for in order to do in terms of when you talk about kind of buy-in.

If I could justify it, I think it's like anything else. I think if you can show where you're at now, where you want to be. And, how what the benefits would be. It's, I don't think there would be any different from any other leadership. I think if you could justify a position and show them where the benefits are not only to the city government but the city as a whole. I don't believe I would meet resistance is that both for the fire chief and the mayor city manager level.

EMs who do not enjoy such high levels of support cannot simply assume leadership support for accreditation. Instead, to varying extents, they must convince leadership to do so.

Exactly who the leadership is that EMs must convince to support accreditation varies from city to city, as discussed in Chapter 3. Emergency management programs often exist as a smaller unit within a broader department (e.g., fire, public safety), and this reality implies that the EM reports to the leadership of that broader unit (e.g., Fire Chief, Public Safety Director). Of course, EMs also exist within a city with leadership to whom they also report (e.g., Mayor, City Manager, City Council, and/or Emergency Management Council). Leadership at all levels above the EM must support the pursuit of accreditation for it to be formally pursued. In this context, the value EMs place on attaining that support cannot be underestimated:

The city has been good, and my boss, the Commissioner, has been really supportive; he has talked to the CEO and the Mayor about this, and they're supportive.

We're fortunate and have enough to have leadership, support for it. But that would be challenging if we didn't have leadership support, then we wouldn't be able to do it if leadership wasn't on board with it.

We had an executive team here in the city that was very supportive. I built relationships with the Fire Chief, was always very supportive, the City Manager, our Mayor...

They realize what the gaps are. So, I think a lot has to do also with the commitment that leadership is trying to make.

There was the executive layer. And that was the second Deputy Mayor that I had was by far the best for our department. We had what EMAP terms, executive-level support.

...[We] met with the Fire Chief and the Mayor's office and discussed it, and they were on board with the process and wanted to be a recognized accredited program, and we weren't far from it, and so yeah, we had leadership buy-in from the beginning.

Support for accreditation pursuit in the abstract is meaningful to EMs, but far more so in concrete form. Accreditation has costs associated with it. Leadership support for accreditation may not necessarily lead to the allocation of resources toward accreditation due to competing priorities. For instance, one city had the achievement of EMAP in the strategic plan for the emergency management program. Although leadership in that city was supportive of accreditation, funding for accreditation has not yet been allocated due to competing priorities.

Financial investment is needed to cover costs such as subscription, readying for the site visit, the actual site visit, and more; and, as such, must be prioritized somehow. As one EM described, once they determined they wanted to go for accreditation, they had to figure out how they were going to pay for accreditation,

Once we did the [gap analysis] and then the question of 'do we want to go through the whole thing,' it was really just a question of finding the money to do it, and that's something I'm sure you're aware of most local emergency management programs are not well funded.

It is not that EMAP accreditation costs "a lot" within the context of large city budgets, but the cost must still be covered. As an EM put it, "I mean, it's minimal, but it is still something that you have to find in a budget. Just paying for the accreditation process." Or, as another captured it, "You have to have some funding, some budget, some money, to pay for accreditation. There are some costs associated...you have to have a budget; you have to have the resources to get it done." EMs recognized the necessity of leadership support in securing the funds required to pursue accreditation:

So, you definitely have to have that, see that leadership, buy-in, is critical because you're going to need one the financial support, of course, to go through the process but also to, to give you the resources you need to accomplish it right because what self-assessment is going to provide you is areas that you need to, to, to fill in. And some of that's going to require staffing and personnel to help you, come and put the good work behind meeting that standard, so leadership is primary.

...and then the city put dollars behind it. Hiring people, giving more of a budget and all that kind of thing and that and the success just kind of came with it.

Having that support from leadership and the general fund is a huge, massive thing when you, when you try to get through it, and I feel very confident I'll have that support from leadership, why would you turn down a gold standard.

Where leadership quickly agrees to cover the added cost of accreditation or an EM can already cover the costs with their current budget, formal pursuit seemed facilitated. Alternatively, where funds were lacking, and leadership would not provide additional investment, pursuit appeared hindered. As one EM stated, "the challenge is always who can sign over the resources and the money that we need to make things happen."

Monetary costs are not the sole form of investment that leadership must approve for accreditation to be pursued. As discussed, emergency management program staff time and effort must be invested in emulation leading up to formal pursuit and well past that point. Leadership support of allocation of emergency management staff time was widely described as essential. In fact, some suggested that someone needed to be a designated coordinator for accreditation in

addition to all staff supporting the effort. This designation of staff represents a significant investment in accreditation which must be approved. Again, the amount of work required to become compliant with The Standard was significant, and this designation of staff represented a significant investment in accreditation which must be sanctified and made well before formal pursuit (i.e., the emulating period may last from 1-10 years depending on the amount of change and documentation required).

At the point that we knew that we wanted to achieve accreditation, we hired someone who had an immense amount of emergency management experience in the region who had at one point been my deputy director and then retired, and we asked her to come back and be our accreditation manager. So, it didn't take any time away from other staff and their regular daily work for her to organize all of the documentation necessarily; she's just she's one of those people that, I mean, I swear her entire brain is an excel spreadsheet. So, she was just the right kind of person to put everything in the context needed. And then we haven't hand-hold with folks who didn't think that way and understand when you improve this plan; it has to show up in these following categories and be filed in a certain way. So, that helped to have her as our accreditation manager, and then we set out a timeline, so we knew when we needed to invite assessors are. And then backtrack from that one we needed to have submitted all of our documentation backtrack from that when to do we need to double-check our own assessment and then our set, and so we just did a back timeline. Of what we needed to accomplish, it took a couple of years in, but I think we did a really good job with it as well.

But it was still just one person and me and said, Well, this is not going to work. So, I actually got a retired guy that was just a really great man. He wasn't interested in a job; he was interested in being around, and he had a lot of experience. So, I said, Look, let's bring you on, give you some reimbursement anyway, make you a part-time employee...so we can get through this thing. And then, I was able to hire a contractor with some of the grant money they provide to the jurisdiction for security planning. So, he was assigned directly to me. And so, it was me, one coordinator, one part-time kind of volunteer, a paid volunteer. And then this contractor who was a former chief deputy sheriff for a local jurisdiction, so he kind of had the law enforcement credentials.

As the preceding quotations demonstrate, the addition of staff within the program was very important to formal pursuit of accreditation for some.

Staff time and effort involved are not just those in the emergency management program—it often also requires the participation of staff in units outside of the program itself

who have a role to play in accreditation. A common theme that emerged during the interviews was the need for external city support beyond leadership. The Standard defines "emergency management programs" as "all organizations, agencies, departments, and individuals having responsibilities for" activities related to "management and coordination of prevention, mitigation, preparedness, response, and recovery activities for all hazards" (EMAP, 2020, pg. 5). Depending on how program tasks are distributed within a city, units outside of the emergency management office may have emergency management responsibilities. As such, they will have to supply documentation relative to portions of The Standard that fall within their purview for accreditation to be achieved. For example, "prevention" was described as being heavily, if not wholly, in the purview of the Police Department, and their engagement would be necessary for completing the associated parts of The Standard. The distribution of program responsibilities lies well beyond a single department in many cases, as the following quotations capture:

With EMAP, it's a program-wide accreditation since it's beyond emergency management, so you had to involve the police department, fire department, involve other stakeholders outside of emergency managers because they're part of the accreditation process, and so you had to get buy-in from stakeholders at a necessity because they're going to be.

Another big factor...is having not just your leadership buy-in and your emergency management program stakeholders but also your...annual engagement with your city departments or county departments. We have common view operations plans for every single department within the city and within the county...we had to build out and make sure that all of their, their kind of operations plans were up to date. Following the EMAP standard, we have to adopt those formerly the council and commissioners' court. So yeah, it was all these different big projects that we had to knock out, so that's something that other people pursuing accreditation need to anticipate that there's going to be some big foundational corrections that you have to make within your program that that's going to require a lot of work.

Leadership support, where given, can set the stage for external stakeholder support:

...having the leadership buy-in at the city level was very important, so they were able to assist us in making sure that the other departments within a city that we needed to work

with to kind of shore up documents and the loose ends and trainings, and things like that, so the leadership buy-in at the top was. Very important from the very beginning.

When we met, and the Deputy Mayor, who was everybody's boss, said this has been a priority of the Mayor and the administration. I think that helped them to say, okay, it's important to my boss, even if I don't like it' one of them said, well, you want to get accredited, so we have to do all this extra work. Well, even having said that the deputy mayor was like this important that the Mayor is important to the administration. They were like, yep, it's important to me to vote in favor. So, there was political will and support at the executive level, chief elected officials.

...the Commissioner has also let other departments know that we may be calling upon them for some information because some of it is across the government wide. So, we may need set things from purchasing or other divisions that are government-wide applicable, but we don't pull up the document, and we may need to get that from them, so he's already kind of put that out that this is a process we're going through.

Even with leadership support, EMs still had to engage those external city stakeholders in accreditation too:

And then, it was a matter of convincing many of the planning stakeholders, not necessarily the key official, the elected officials like I had already under my thumb and. That was the easy part of this that it was convincing everyone else who had never known about accreditation there is value in that...

...a challenge to get them to do things in such a way and document things in such a way in order to support emergency management and our getting this accreditation. So that, to me, was a little bit of an inherent problem because we were asking other agencies or other entities to do things that they wouldn't normally do for our benefit because that accreditation, they didn't see it as their accreditation. That was the Office of Emergency Management accreditation, and they're doing us a favor by filling out this form or checking it this way of documenting things in a certain way so that we can satisfy the requirements.

...and that's where some of the folks were hesitant like, well what does that mean for us. A lot of it is Hey, you're fine, keep doing what you do, we really like you appreciate your work, yadda, yadda. But then it was like, oh wait a minute; you're talking about the program, which is the city's program, not just the department, like yeah, that's why you guys are in this Advisory Council meeting because you're influencing what the program is for the city.

Once gained, the expression of external city stakeholder support was not only important in terms of supplying necessary documentation related to accreditation but also through the provision of dedicated staff time in areas experienced with accreditation. Another concrete form

of support leadership provided, was from staff in other areas who were experienced with accreditation (e.g., fire department, police department). As one EM explained, “bring in reinforcements, for sure, you're going to need that additional administrative support for that.”

The knowledge and experience of such staff were invaluable to EMs where offered:

Our analyst in the fire department... did the CFAI and the accreditation. So, she's very familiar with accreditations. And she helped us build the map one and then actually helped us with this. The second time and show how we have a really good program...

Some other divisions, like our parts department, are accredited, so I think there's a mutual understanding of what that does for you internally. And yes, you can then count that on your website and other places, so with the partners, it wasn't difficult because a lot of us are in the same mindset and want to want to make our programs, the best that they very can be with the administration.

With the support of leadership and external city stakeholders, EMs appear to perceive alignment of necessary conditions to move to formal pursuit with an expectation of success. As one EM summarized it, “And I was just thankful that we were able to do it as a team, and I’m pretty sure we're going to be successful here, hopefully.”

Other Added Investment

The need for added investment, specifically for the pursuit and achievement of accreditation, was a strong theme that emerged during the study. EMs appeared more likely to formally instigate pursuit of accreditation with leadership and external city stakeholder support. Other added investments beyond those just discussed also emerged as a fascinating theme. Just how strong a role these other added investments play in the formal pursuit of accreditation is as unclear. Other added investments emerged in the form of federal grants and EM colleagues to whom EMs could turn for accreditation support.

Federal grants, such as the FEMA Emergency Management Baseline Assessment Grant (EMBAG), provide funding to augment accreditation costs. The FEMA *Emergency Management*

Baseline Assessment Grant (EMBAG) was the most referenced grant used to support the cost of accreditation. As noted by Federal Grants Wire (2022), “The purpose of the EMBAG is to help ensure that jurisdictions (state, tribal, territorial, and local communities) have accredited emergency management programs and certified emergency management professionals in place in advance of an incident.” Although nearly all of the accredited programs interviewed had received the EMBAG grant (n=7; 88%), the grant did not appear to have an influence on whether or not the EMs would have pursued accreditation.

For these EMs, they had the funding to cover accreditation or had assumed or secured the funding support from leadership. They did not necessarily know that EMBAG was available to cover any part of the cost of accreditation until they began pursuing:

Not Council, what's the right word, but they have their like Committee from EMAP, or something, had a conversation with [Name], who was the Director said, hey, have you considered going after EMAP, it's something we're really trying to get more local jurisdictions to go through and [Name] said, well that's interesting tell me more, and then they as they said there was funding for [city], they offered. If I think the price deal is basically will let you will give you the self-accreditation for free...

It is possible that grant availability may result in an adjusted timeline in which EMs would have formally instigated accreditation pursuit, but data from only two EMs supports that notion explicitly:

I went to the IAEM conference this past year, and there is now the EMAP kind of. I think they waive fees through a grant they get from FEMA, and I spoke with an onsite contact there, and they said yeah, usually around the same time every year...given how large our city is that that is an option to be able to cover the costs that the onsite assessment and everything else. It consists of So for us, we, we did not submit this year because of that, and we are planning on in August, going through that process to submit to EMAP and FEMA, the grant to be able to get that covered.

Well, we learned with our last meeting with the EMAP folks that actually, I guess they yearly or have two or three programs that they can put under a FEMA grant with DHS, and there's no cost to the jurisdiction. And we were told that in this last meeting so surprise, surprise, it appears that it's not going to cost us anything. That the FEMA

grants are going to pick up the cost, so we're clarifying that because I don't like to pull money out of a budget request, and then I'll end up needing it. But that was the interpretation my grants manager, and I had an email manager when we had the last meeting with the EMAP folks.

As the following quotations demonstrate, EMs who represent programs that formally pursue and achieve accreditation spoke of the funding as helpful but, almost as an added benefit, not an essential resource without which accreditation would not have been pursued:

The baseline was paid by FEMA. There's a standard baseline assessment that they have in EMAP, and actually, you can still do that now; you could just pay the assessment fee and get a great consultant report; I mean, you have six people come and evaluate your program. I mean to pay six consultants 40 hours would be astronomical, so if nothing else, that's a hell of a consultant deal to just pay the EMAP assessment fee, and you get six volunteers to come in, essentially do consulting for you. But the accreditation fee. we paid. I want to say we paid through EMPG funding, which is an eligible expense.

FEMA and EMAP offset the cost of our accreditation, so I really can't give you an accurate figure because we didn't pay the whole amount because we participated in that program and what that basically meant is that. Because we participated in the program and a FEMA paid for it. We were willing to give them a copy of our assessment report. So, they could have access to all of our documents and the assessors' report and everything, which we're fine.

The use of EMBAG was widely described by those who had been through the EMAP process, whether it had been an essential resource for accreditation or not. In contrast, *only two* EMs from nonaccredited programs were aware of the funding source (n=22; 91%).

Accreditation is an allowable expense under EMPG. The FEMA 2021 Preparedness Grants Manual explains that “states can encourage their local jurisdictions to pursue assessment and accreditation under the Emergency Management Accreditation Program (EMAP)” (FEMA, 2021, pg. H-27). Comments from EMs who understood it was an allowable expense reveal that they did seem to leverage the funds toward that purpose, even while, again, concern about costs do not appear to have been essential to these EMs:

It was a mix between EMPG and maybe some of our general fund, so I think there's a mix between grant and funds, but I set the tone that this is important to us we're going to find a way that the funded, and so I think we had some grant funding the State may have even helped out as I recall, so as a mix of funds that we were able to use to get accredited.

So, I don't remember, and I don't remember. Now you can go to the EMAP website. I think now they have the prices are up there; I mean, it was a few it wasn't like huge, but I mean they've gotta fly assessors, and there are some costs associated with. And I can't remember, I remember, there was an issue of whether or not we could use EMPG to pay for an EMAP or not, and I don't remember at the end if we were able to or not. And at that point, that was like scraping to come up with that money so. I don't remember how we paid for it.

Were EMs to know EMPG could be used for the purposes of accreditation, would more instigate formal pursuit? The data leaves that answer unclear, even while one of the two EMs who had not undergone accreditation suggested it may well not have led them to do so.

However, again, I think I could probably make the justification under like the planning component of the EMPG and use those funds that I receive annually to put towards it. But I wouldn't do that over like a critical response resource that we were lacking. So, you kind of gotta balance it out, and it would have to be on a year that feels like okay like at this point in time. I feel like our equipment, our response needs are met, and so I would consider going through that process, but again it's what you want to pick the money like it's so labor-intensive I would have to make sure that my command staff is on board that the city is on board because I would need to utilize other staff time as well to make sure that we get this nail there.

Here too, as was the case with EMBAG, EMs appeared to be mostly unaware of whether EMPG or any other grant funding (outside of EMBAG and EMPG) could be used for accreditation fees. While various cost considerations in relation to the necessity of leadership support (e.g., paying for accreditation, added staff/staff time and effort, participation of external city stakeholders) were of clear importance to EMs considering formal pursuit, the role of this other form of added investment in moving EMs to formally instigate pursuit is left unclear.

Also left unclear from data analysis is the impact support from EM colleagues had in moving EMs to formally instigate pursuit. EMs who had gone through the process mentioned the incredible value of their colleagues in the emulating period. As explained by them:

With the EMAP benchmarks and if we think we could go for this, and so [county] had already sought EMAP accreditation so because they had already done it, a lot of their documents that we tend to rely on we're in really great shape as far as the criteria and everything and so [Name] and I started going through all of our documents kind of using those benchmarks and the goals of where the gaps in our documentation in our program where... The assistance from [county] was also very important in achieving it.

I think it's important that if you're going to be going through the process, you have discussions with other jurisdictions that have gone through the process, and there's a lot of lessons learned that agencies gain as they go through it and have it for just from my experiences.

The [State] also helps because they were accredited, and their accreditation manager at the time [helped].

And fortunately, our area manager here in [State] is familiar with the EMAP standards because he was involved in the process in [State]. So, some knowledge from an actual accreditation site in [State] that he was involved in.

Part of the EMAP process...called other jurisdictions to talk to the State who helped us, who got through EMAP, so we really had an understanding of what it was.

Certainly, expertise from EM colleagues who have gone through the accreditation process from surrounding jurisdictions was described as being helpful. Those individuals provided their time, experience, and expertise in supporting the city emergency management programs in navigating accreditation at one or more points.

Conclusion

Formal pursuit of accreditation still appeared reliant upon a combination of EM perceptions of value, structuring mechanisms, capacity, and support in conjunction with their moving into and through a period of emulating more than other added investments in the form of federal grants and EM colleagues. The reality is that very few emergency management programs in the largest cities in the United States are accredited (n=14) or formally amidst pursuit (n=1).

Data analysis strongly suggests this reality may be explained by the manifestation (or lack thereof) of the themes suggested throughout this chapter. These findings have implications for the future of accreditation in emergency management programs and suggest avenues for future research. Yet, before discussing these topics, Chapter 5 will first present the findings related to this study's second research question: what facilitates and hinders the achievement of emergency management program accreditation?

CHAPTER FIVE: ACHIEVEMENT OF ACCREDITATION

As previously noted, only eight of the 30 EMs, or 26.7% of the sample, formally instigated pursuit and led their programs through accreditation achievement. This number is small relative to the sample, yet it represents more than half of currently accredited programs in the population for this study. Formal pursuit and achievement within the population of the 69 programs in cities with populations above 300,000 is relatively uncommon (i.e., 14 out of 69, or 20.3%). In this context, what facilitates or hinders accreditation pursuit was of interest, but so too is what facilitates or hinders the achievement of accreditation.

Key findings related to this latter question are presented in two sections. The first section describes the steps to achieving EMAP accreditation along with the experiences of the emergency management program leaders (EMs). The second section describes the phenomenon of *activation* to meet the accrediting body requirements.

Steps to Accreditation

It may seem obvious, but accreditation achievement depends on successful completion of the EMAP accreditation process once pursuit is formally instigated. EMAP identifies five steps in the process: “(1) Subscription and Emergency Management Standard Gap Analysis; (2) Application and Self-Assessment; (3) Onsite Assessment; (4) Committee Review and Commission Decision; and (5) Accreditation and Maintenance” (EMAP, 2020a, pg. 7). As discussed in Chapter 4, subscribing to EMAP and completing a gap analysis (i.e., Step 1) does not constitute instigation of formal pursuit. Instead, formal pursuit begins with completion of Step 2, i.e., application and self-assessment. Receipt and approval of an application triggers a series of events: a) an EM designates an Accreditation Manager to lead the process for the program and to act as liaison to EMAP, b) a 12 month period begins during which the on-site

assessment must be completed, c) a Code of Conduct is agreed to by all parties involved, d) the Assessment Application Fee is invoiced (Appendix H), and e) EMAP assigns a Staff Liaison to provide technical assistance throughout the accreditation process.

Upon submitting the application, the emergency management program also begins the Step 2: Self-Assessment. EMAP describes the purpose of the self-assessment as: “(1) assess its plans, processes, procedures, and capabilities against the Emergency Management Standard; (2) determine proofs of compliance for each Standard element; (3) organize, upload, and submit the proofs of compliance into the EMAP Program Assessment Tool; and (4) receive EMAP Staff Liaison technical assistance and peer document reviews” (EMAP, 2020, pg. 10). The self-assessment differs from the gap analysis programs completed prior to pursuit in two important ways. First, programs must, at this stage, supply evidence of compliance. Second, they receive official feedback regarding the evidence submitted.

EMs all noted the burden of documenting compliance with The Standard. One EM labeled it “time-intensive,” another “rigorous” and “not for the faint of heart,” and another as “no joke.” EMs described documentation as hard, but, also worth it. For example, one EM summarized it as:

Not everybody likes to do tough things and really take a look if their program is actually functioning well. EMAP sets you up to at least have those core functions running, and you do this assessment every five years, and then every year, you have to do an annual review and submit that to EMAP and just make sure that you're hitting all the major points. I don't think anybody can tell you that's gone through EMAP that it hasn't made them their program better, but it is hard.

During the emulation period leading up to formal pursuit, programs may have ensured they were performing to The Standard, but documentation of compliance is not the same. EMAP (2020) outlines three types of proof for compliance with The Standard: a) written documentation, b) interviews, and c) demonstrations. Written documentation is the primary type used for

compliance and must be completed in self-assessment. Interviews and demonstrations may be used, where applicable, during the on-site assessment (EMAP, 2020, pg. 12). The compilation of written documentation is the hard part of self-assessment for programs. As one EM explained, “it's definitely a huge time investment, and the paperwork required for the assessment itself is staggering, frankly.” Others agreed:

I think the bulk of it is, really like the lion's share of that alignment of work you have completed, how that aligns to the standards. Can you really do that matching? Can you pinpoint this standard asking for this, and this is where we can show it and just putting together the documentation; That's the lion's share...So, in the grand scheme of things, it's funny to think about carving out an entire week of time in the EMAP process; that's the smallest time requirement when, in some ways, you think that's crazy right? If you were to say, hey, host these people for a week, and they're going to be digging through your entire files; that seems like a lot, but it's actually the work even to get to that in-person visit that's the bulk of the time and energy.

A lot of it had to do with documenting so many different processes and procedures, so again, we had people on staff who had been on staff for ten or more years who just had it all in their head, but again, if that person gets hit by the bus, there goes the whole process, so it was a matter of getting things documented...

There's kind of an assessment process where you start loading in your plans and everything else, and so it's kind of getting prepared. Getting our plans of the snuff and but that first year, I think, with the challenge and opportunity was you got day-to-day operations, but then you're also pushing towards the accreditation at the same time.

The evidence programs provide cannot be general, or superficial. Instead, as EMs described, programs must provide detailed evidence:

For example, in one of the standards, whatever the standard is that we have to write out which documents cover that standard, the page numbers, all of the supporting documentation for it, so we have to provide that ahead of time.

We made sure that when the standard was there right and then our proof of compliance. That they could go to exactly that page number, and we tried to make it is sometimes people will be like look in this entire plan it's in there, and that slows the person who's doing the assessment down because now they're looking forward in 400 pages, we highlighted. Put the page number; this is where you can find the proof of compliance, right, and then we did that, for every single standard...

So, one of the things about EMAP that is very intentionally designed, and I think they've done a masterful job of doing this, is the EMAP standard itself is written very carefully, and every word of each standard is there for a reason, and, of course, now that they've gone through several iterations, every time, they refine the language a little bit more, so, if it says...your EOP must have these five things...a non-assessor might look at that list and, 'oh yeah, we've got we've got those,' but the assessors go 'okay show me A, show me B, show me C, show me D, and if you don't have all that in writing ...it's incredibly detail-focused, to an extreme degree, and if you haven't gone through the training or you haven't been through the process, it's hard to appreciate just how detailed. When they say this, and that you better have this, you better have that.

It is important to continue to keep in mind that The Standard is not a single standard but 66 standards, and detailed evidence of meeting each must be provided. One EM described the scope of the undertaking,

Mainly just the sheer volume of standards...like 66 standards and components standards, or something like, it's a ton, and these are not like, 'do you have paper in the copier standards,' these are like, you have full-blown program standards.' So, I think just the sheer volume of the reconciliation between like how we structured things or named things and how EMAP structured and named things, so just more of the cross-walking piece.

As documentation issues are discovered during self-assessment, programs must address them. As one EM reported,

As we were going through accreditation, we started to identify deficiencies. We ended up as we were, documenting all of our other processes and procedures and getting all that stuff in place, and there were areas that we were deficient in that required substantive changes across all of our emergency plans. And they were all interlinked to other things. So, the way EMAP is, you have a set standard, and each has an interest dependency on other standards. So, you have to know that there's a lot of that overlap. And that requires that you are good in every area...

The amount of time and effort necessary to demonstrate compliance with The Standard varied, but all EMs remarked on how onerous documentation was. Still, EMs noted that self-assessment prepared programs for their on-site assessments,

The importance of quality control in terms of your documentation, and that you are very explicit in your proofs and your proofs of inclusive compliance...We made sure that all of our documentation met that standard by standalone where it didn't require interpretation because what we wanted to do was minimize interpretation by assessors.

We wanted our language to be clear enough that it was very explicit in the assessors coming in that they read it, and they've been they measured that to the standard, and it was very clear, it was very crystal clear that that was there.

Self-assessment was not the only thing that prepared programs for on site assessment. Most EMs had served as a peer assessor for at least one on-site assessment, and, it appeared, EM understanding of the process increased the more assessor experience they had. One EM who had taken the EMAP Assessor Training but had not yet served as an Assessor for an on-site visit, articulated being nervous about the initial assessment,

We were nervous about it because we had heard about an initial review, we knew we had a lot to do, and there were things that we were just not familiar with.

The experience of this EM contrasted with those who served as assessors for other programs and were confident regarding what expectations would be.

On-site assessment involves a week-long visit from a group of peer assessors who examine documentation of written evidence in person and who may also conduct interviews and request demonstrations (EMAP, 2020). Before departing, the leader of the assessor team will brief the EM and program accreditation manager regarding what they learned (EMAP, 2020).

The experience of the emergency management programs undergoing the third-party assessment appears to be influenced mainly by the level at which the documentation reflects the standards before the assessors arrive on site. EMs did not suggest the assessors had no questions during their time, but anything that came up seemed minimal, as the following quotations exemplify:

...I mean, of course, things come up because they're trying to learn your program right out of the gate, but when they left here, they were very happy, and they were 66 out of 66 so which was great

We were very fortunate in that the team that was with us for a week, there's a lead, and that person was terrific; it was just one of the evaluators that were looking at some of the standards that I think just [their] background was just different from ours, and so we were just having to try to see eye to eye on some of these things. I think, also she came to give [them] some sort of credibility, [they] came from a much larger jurisdiction

where, frankly, a law enforcement agency, maybe would have done more emergency management things, so when [they] were asking us questions, it was sort of like no like we would do that here, not law enforcement, just because it's a different size, you have a different suite of tools to work with, depending on the capability in the capacity of your jurisdiction...

After the assessors depart, the team compiles a Preliminary Assessment Report and sends it to the program. The program has a 30-day period (business days) to submit additional or revised documentation to address any area(s) of concern raised in the report. EMAP (2020) identifies the purpose of this period as "intended to accommodate minor revisions to the Applicant Emergency Management Program's documentation; it is not intended to be a period where new plans, processes, and/or procedures are created, reviewed, and promulgated." Most programs had to undergo some modifications during this period, but EMs did indeed describe the changes as minor. For example, one emergency management program had to add one page to a plan to describe how they would coordinate with the state to activate National Guard resources.

Once the supplemental documentation has been submitted, the Preliminary Assessment Report is finalized. The majority of programs were able to demonstrate compliance with all 66 standards within The Emergency Management Standard (2019) after the supplemental period and were awarded accreditation. Two programs, however, were not compliant after the on-site assessment and received conditional accreditation. Conditional accreditation status allows programs to address remaining gaps within a nine-month period. An EM explained,

...I want to say we were compliant with maybe half the standards. The first time around, but of the ones we were not 100% compliant, most of them, we were pretty close. So, it helped us really focus, okay, here are the things we need and some of it was very, very easy stuff...some of the changes were much more substantial.

Both programs were ultimately accredited. Thus, all eight programs that instigated formal pursuit also achieved accreditation. When interviewed, the EMAP representative confirmed that this is the norm—the vast majority of programs that pursue accreditation achieve it.

Activation

As stated at the outset of this chapter, it seems obvious that achievement of accreditation would rest on successful completion of any process, or steps, an accrediting body would require. That EMs would recount those steps as being a part of achievement came as no surprise. It was surprising; however, how little EMs spoke about the process following instigation of formal pursuit. EM's spent little time on the topic compared to the amount of time they spent articulating their stories up to the point of formal pursuit. They also provided less detail, even when the researcher tried to glean more information through probes and follow up questions. The "EMs" referred to here is, of course, the eight EMs who achieved accreditation—the ones who one might assume would not only have something to say but might have *a lot* to say on the subject. The data was analyzed for what might explain this discovery.

Revisiting the coded interviews and memoing led the researcher back to the fundamental discovery reported in Chapter 4. Recall, the fundamental finding regarding what leads to formal pursuit was alignment of the EMs perceptions regarding value, structuring mechanisms, capacity, and support with the results of having emulated The Standard to the point of being confident they would be successful upon formally instigating pursuit. Most EMs in this study are not accredited, and many are not actively preparing pursuit or interested in accreditation. It appears that one or more things that were a facilitator in the case of the EMs whose programs do not fall into these categories (i.e., were actively preparing for pursuit, formally pursuing and/or accredited) were barriers for those that did. Barrier seems too superficial a word to describe the impact on getting to the point of formal pursuit. When EMs perceived a lack in any of these key areas, the lack seems to completely cutoff the possibility of pursuit at that time.

Presence of facilitators, much less the alignment of them, was not a given, at any point, for any of the EMs in this study. Facilitators took time to develop. EMs developed a perception of value. Assuming an EM valued accreditation, structuring mechanisms, capacity, and support had to be perceived as conducive at the time. Yet, each of this set of phenomena is dynamic what is conducive one day may not be the next, what is a facilitator one day may be a barrier the next.

Against this shifting backdrop, emulation would be initiated and proceed within some programs. Emulation required significant change. Programs had to begin doing things they had not been doing and/or change how they did things to meet The Standard. Emulation progress was not necessarily consistent or linear where attempted. Instead, emulation was begun, stopped, and restarted, was engaged in intensively or less; emulation was iterative. Perception by the EM regarding the facilitator alignment is impressive, since according to them, it is so difficult to attain. On the basis of this further analysis, it made more sense that this first part of the accreditation story, the part that leads up to formal pursuit, would dominate their narratives.

Further data analysis revealed another explanation for why this first part was such a focus in interviews, even among those representing accredited programs. Successful completion of the EMAP accreditation process following its formal start involves activation of the facilitators that were fostered prior to pursuit. Leading up to pursuit, EMs representing accredited programs had figured out how to balance structuring mechanisms with emulation. Thus, they and their staff already had developed the ability to concurrently manage day-to-day demands with those of accreditation before ever formally starting the process. Was self-assessment demanding for programs? Yes. Was the site assessment too? Also, yes. Still, they had already determined how to work within their capacity (however less than ideal it may be) prior to officially beginning

pursuit, as they aligned with The Standard, and carried that ability from formal pursuit to achievement.

EMs representing programs who achieved activation accreditation needed leadership to support accreditation both philosophically and in concrete ways before formal pursuit. Leadership needed to approve of formal pursuit, signal to external city stakeholders that their participation in the accreditation is a priority, and approve dedication of staff, time, and money for the purposes of achievement. The external city stakeholders had to be supportive of accreditation as they would be required to provide documentation, or otherwise participate in the process. EMs had waited to start formal pursuit until they perceived that these crucial pieces were in place. They had already had some proof of support during the emulation process. Following the initiation of formal pursuit, leadership continued to make good on the promise of staff and time, funds promised (or discovered in the form of EMBAG later) were supplied through to achievement, and the participation of external city stakeholders was activated to reach the end of the process.

Finally, the emulation process leading up to formal pursuit had unfolded over as long a period as was required for the EMs representing accredited programs to be confident that accreditation would be attained once the process got underway. Program staff had already begun doing new things or doing old things in new ways. Change had already happened. Once the formal process was instigated, the need to document was activated, but, outside of minor adjustments, no new major programmatic changes had to be undertaken during the self-assessment and on-site visits. Of course, while documentation was reported onerous by all, there was some variation in how much time and effort documentation required once pursuit had officially begun. The extent of time and effort required seemed to vary with how extensively the

program had emulated The Standard prior to officially beginning pursuit (e.g., had they prepared documentation in some form concurrently with making the change required to meet The Standard).

In short, reanalysis of the data from EMs representing accredited programs did not suggest that there are any brand-new influences on accreditation achievement that were not also influences on getting to the point of formal pursuit. Instead, EMs had successfully nurtured the conditions necessary to achievement before pursuit and simply brought them to bear through successful completion of the steps in the process.

Conclusion

The EM activates and follows through on the efforts accomplished prior to pursuing accreditation to achieve EMAP. Although gaps may be found on the road to accreditation, the foundations of the emergency management program (i.e., values of the EM, alignment of structuring mechanisms, sufficient capacity, active support from leadership and stakeholders, and planned investment toward accreditation) are leveraged to demonstrate compliance with The Standard and complete the steps required by EMAP. Gathering documentation to demonstrate compliance with The Standard appears to be the most onerous part of achieving accreditation, followed by the on-site assessment. Although challenging, EMs widely discussed having perceived benefits of completing accreditation, such as: a) identifying gaps, b) gaining input from peers, and c) and enhancing the overall quality of the program.

Upon completing the process of achieving accreditation, EMs from accredited programs all described perceived benefits in continuous improvement and quality of their programs. EMs referenced gaining a third-party perspective about the gaps in the program and the focused

attention of all stakeholders in the emergency management program as being supportive of continuous improvement while enhancing programmatic quality. An EM explained,

EMAP sets you up to at least have those core functions running well, and you do this assessment every five years, and then every year, you have to do an annual review and submit that into EMAP. And just make sure that you're hitting all the major points. I don't think anybody can tell you that's gone through EMAP that it hasn't made their program better.

Another EM described,

The value proposition is, what does that really get me? For sure, it gives me the ability to stand up and say look, I'm using public dollars; I'm using the public's trust, we've had industry people come in and say this is the areas that you're doing a good job in and, and you can be trusted assured that this area of public safety is being addressed adequately in your jurisdiction. Yeah, I think there's, there's a lot to be said for that feel-good recognition.

Every EM from an accredited program discussed the process of pursuing and achieving accreditation as improving the quality of their overall program in some way (n=8). A process that appears to begin prior to the official pursuit of accreditation, where the emergency management program evolves to meet The Standard is activated upon to achieve EMAP accreditation.

CHAPTER SIX: DISCUSSION

This chapter will discuss the implications of the findings presented in Chapters Four and Five. The first section discusses the implications of the findings for the structuring mechanisms related to accreditation and includes recommendations for practice moving forward. The second section discusses the implications of the findings related to the role of emergency management program leaders (EMs) in the pursuit and achievement of accreditation. This section also includes recommendations for practice given the implications of these findings. The third section compares the findings of this study to those of the prior research on accreditation and suggests topics for future research.

The field of emergency management exhibits a range of challenges that accreditation could help address. Leading professional organizations in the field have blessed The Emergency Management Standard (2019) (The Standard). The Emergency Management Accreditation Program (EMAP) has been accrediting emergency management programs since 2002. Yet, very few emergency management programs are accredited relative to the number that exist. Even among the population for this study, programs in cities with populations of over 300,000, only 20% are accredited. Programs within this population are presumably the best positioned to pursue accreditation at the local level due to resources available to them (e.g., the number of staff resourced at the local level and available funding). This situation piqued the researchers' curiosity and led to the research questions for this study: what facilitates and hinders the pursuit and achievement of EMAP accreditation?

The findings of this study lead the researcher to conclude that widespread local emergency management program accreditation is unlikely in the foreseeable future among the population for this study or any other, even though most EMs saw value in The Standard. The

role of the EM, structuring mechanisms, and the interplay of structuring mechanisms with capacity, as they relate to pursuit and achievement observed within this population, are significant in reaching this conclusion. The implications of each of these findings are grave if increased pursuit and achievement of accreditation at the local level were a goal within the field. As will be demonstrated in the following sections, the researcher can offer several recommendations that may support an increase in the pursuit and achievement of accreditation.

Implications and Recommendations Related to the Role of the EM

Emergency management programs were in various stages relative to accreditation. Eight programs were accredited; One was amidst formal pursuit; Six were actively preparing for pursuit; Two were considering pursuit; thirteen were not pursuing. The stage the program was at relative to accreditation pursuit and achievement appeared to be primarily a function of the perception of EMs along a number of dimensions.

As discussed in Chapter 4, EM perception of the value of The Standard and accreditation, the extent to which structuring mechanisms could be concurrently managed with emulating The Standard, program capacity in the form of staff and time, and support from leadership and external city stakeholders were all important to understanding the stage programs were with accreditation.

EMs associated The Standard and accreditation with intrinsic value or a lack thereof. All programs had to contend with the burden of structuring mechanisms, capacity challenges, and securing support. Some EMs were able to see through and across those things in such a way that they were supportive of the pursuit and achievement of accreditation, and some were not.

The notion that pursuit and achievement rest on the perception of any individual is problematic if one wants to see more programs engaging in each. EM by EM, in program after

program, in city after city must perceive circumstances to be aligned to instigate pursuit formally. It is hard to see how EMs will perceive this alignment more often than they do.

The extent to which EMs perceive value in The Standard and accreditation varied. The structuring mechanisms with which emergency management programs must comply differ. Their capacity and support for their programs were not the same, in general, much less for all things related to accreditation. In this context, it makes sense that their perceptions were not the same, and it makes sense that they were at various stages relative to the pursuit and achievement of accreditation. It is hard to see that it could have been any different, barring something that would give them a shared lens through which they would view these things.

On the surface, it might seem that EMs had meaningful similarities. Most EMs entered their roles with advanced education, extensive professional experience, and emergency management training. EMs had demonstrated a desire to approach their role with professionalism and expressed a dedication to public service. Yet, there are fundamental differences in the background of EMs.

EMs mostly had advanced degrees but had earned them in different academic disciplines (e.g., Public Administration, Health, Organizational Performance, Business Administration). Their work histories were not the same—ranging from experiences such as fire, law enforcement, military, and healthcare. EMs did not generally belong to the same professional associations, nor did they have the same certifications. The lens through which EMs saw their program and whether elements related to it were facilitators or barriers to pursuit and accreditation were likely quite different.

Perhaps EMs may have had a shared lens had emergency management been a profession and the EMs in this study members of it. Members of a profession have a shared body of

knowledge, agreement on what constitutes ethical practice, shared credentials that allow entry into professional positions, and more (Cwiak, 2011; Oyola-Yemaiel & Wilson, 2005).

Theoretically, what a good emergency management program entails would be part of what members of an EM profession would know, and perhaps, even the relationship of The Standard and accreditation to being a good program. One cannot know for certain that a shared lens by would have made a difference in perceptions related to pursuit and achievement were EM a profession, but clarity in how the structuring mechanisms apply to The Standard may increase the sense of a shared body of knowledge in the field.

EMs may have had more of a shared lens through which they approached their programs were there to have been more consistent communication regarding what emergency management is, what a good emergency management program is, and the significance of The Standard and accreditation. Indeed, the Federal Emergency Management Agency (FEMA), International Association of Emergency Managers (IAEM), National Emergency Management Association, National Association of Counties (NACo), and International City/County Management Association (ICMA) endorse The Standard and support accreditation in the field. However, the vast majority of states have their own state-level professional association, and all have a state emergency management office. Entities at this level have not coalesced around The Standard, much less accreditation. Leading national organizations should undertake focused outreach to bring about coalescence. It is unclear that consistent communication and support in these areas across all levels and organizations associated with emergency management leadership would result in a shared lens strong enough that perceptions involved with the pursuit and achievement of accreditation would be more consistent.

It does seem that a shared lens in any form would be helpful in the field of emergency management, however, it might be accomplished. There are many initiatives that might be undertaken to enhance a shared lens across those in the field regarding accreditation. The EMs in this study did not have a shared lens regarding the value of accreditation, how The Standard “fits” programs in a range of settings, what compliance with The Standard looks like, or how to articulate the value of The Standard or EMAP accreditation to others. Accreditation in emergency management is still new compared to other fields (e.g., healthcare, and higher education) where there is more consistency and a shared lens across programs.

The leading national organizations who currently endorse The Standard might develop a clear and consistent narrative around the intrinsic value of The Standard in terms of its potential to unite the field around what a good program entails, its value for benchmarking, and the validation benefit associated with accreditation. Organizational representatives should carry this narrative far and wide—through social media, meetings, trainings, and conferences and be available in print, video, and other forms—if it is to reach EMs in their various settings.

EMs in the population for this study were in the most resource-rich cities relative to their counterparts in programs in smaller cities and most other local government settings (e.g., townships, counties). Even these EMs did not perceive The Standard to “fit” their programs equally, and many EMs in this study, regardless of how they saw “fit” with respect to their programs, commented on the problem of “fit” with The Standard in these types of other settings (e.g., smaller and more resource-constrained jurisdictions). Leading national organizations who currently endorse The Standard should address this issue by developing a clear and consistent narrative around the “fit” of The Standard for emergency management programs. Such a narrative should provide a clear argument for how The Standard applies to and how compliance

may be achieved by programs incrementally, over time, and in the diverse program settings in which they work through an emulation process. Again, organizational representatives should carry the message far and wide and in the aforementioned ways. Additionally, guidance documents should be prepared and disseminated widely.

Recall, the majority of EMs had a generally positive view of The Standard and EMAP accreditation. Some EMs in this study struggled to articulate the value of accreditation to leadership and other external city stakeholders. Of course, it makes sense that there would be a struggle among those who did not themselves perceive value. Even so, it may help EMs garner more support, more quickly, for their programs and the pursuit of accreditation was there training available regarding how to formulate and present arguments along these lines. Organizational representatives of the leading organizations should promote such a resource in all of the ways mentioned previously.

Currently, the existing awareness products by EMAP and FEMA are not readily accessible or available. EMAP requires a paid subscription to utilize its online gap analysis and resources. Furthermore, FEMA only offers its EMAP training course in person in select locations in the U.S. Access to the existing tool, webinars, and training should be made accessible and available to anyone with interest, as should the items described above as they are developed. Availability of resources should include EMs in any local program or any other setting, any staff who work in any emergency management program, and future EMs in the form of students or individuals seeking to make a career transition into emergency management practice.

There are thousands of EMs beyond the thirty included in this study and the population of sixty-nine they represent. Thousands of students have graduated from emergency management degree programs, hundreds of students are degree-seeking currently, and thousands more will

complete such degrees over time. There are many opportunities to develop advocates of The Standard and EMAP accreditation and empower them with knowledge and understanding regarding achievement.

Should these recommendations be implemented, EM perceptions may more often align across the important facilitator/barrier themes identified in this research. However, the power of their perceptions is only one key finding of this research with implications. The other key findings with significant implications involve the role of structuring mechanisms and emulation in pursuit and achievement.

Implications and Recommendations Related to Structuring Mechanisms, Capacity, and Emulation

Structuring mechanisms in the form of government requirements (i.e., legal requirements, grant requirements, guidance documents) and the hazardscape dictate what emergency management programs must accomplish. EMs who participated in this study led programs that had to deal with a lot of varied structuring mechanisms. All city emergency management programs, regardless of setting, contend with some assortment of structuring mechanisms coming from different levels and requiring different things that may vary from year to year (even if they do not have to deal with as many as the EMs in this study do). It is up to EMs to discern the requirements, prioritize among them, and meet them with available capacity. As a result of these circumstances and others, emergency management programs from large cities nationwide differ in fundamental ways.

Understandably, it was essential to EMs in this study to fulfill structuring mechanism requirements first and foremost—concerns of having a program compliant with The Standard was less, but still, important. EMs may or may not have a picture of how the requirements

combine to move their program toward being compliant and their understanding of what compliance looks like and entails may vary. Based on the results of this study, it seems as though variations on this topic are likely. Some EMs reported reacting to these requirements instead of others who proactively organize them and understand their value in the context of The Standard.

EM perceptions appear to be of such influence because structuring mechanisms are not developed based on a shared definition of what emergency management or what a good emergency management program may entail. Structuring mechanisms may, in some cases, reflect requirements consistent with moving programs toward compliance with The Standard implicitly or explicitly, but the majority do not in either sense. Structuring mechanisms also do not provide extrinsic force compelling EMs to pursue compliance with The Standard or to pursue and achieve accreditation—they reflect no mandate, outline no sanctions, offer no insurance breaks, increase in grant funds, or other benefits for the city in exchange for achievement of accreditation. Structuring mechanisms are not developed in light of what all other structuring mechanisms require, and they are not created in such a way to ensure that they combine/develop to ensure a robust emergency management program. However, these observations should not be taken to mean that structuring mechanisms require nothing good of emergency management programs.

Suppose one assumes that The Standard does indeed represent what a “good” program entails. In that case the significant amount of time required to emulate The Standard and the incredible capacity it requires to accomplish, suggest that structuring mechanisms are not combining to bring programs close to compliance with The Standard in any given year or, even, year over year. EMs reported fulfilling what was required of them. Still, some EMs reported emulation periods of 1-10 years depending on the amount of change they had to undertake in the

program while concurrently meeting the demands of structuring mechanisms. EMs who reported a perceived lack of fit of The Standard described being so overwhelmed with meeting structuring requirements that they lacked the capacity to actively emulate the standard in preparation for pursuit, and/or had a lack of support to do so. Presumably, an extrinsic force would make a difference to EMs with these latter perceptions, particularly since some EMs reflected the sentiment when interviewed. When there is a perceived lack of fit, capacity, support, and/or force, it makes sense that EMs would not engage their program in active emulation of The Standard or instigate formal pursuit. A variety of initiatives might be undertaken to make fit clearer, support less challenging to secure, and enhance engagement in emulation of The Standard, if not the increased pursuit and achievement of accreditation.

Entities responsible for promulgating structuring mechanisms should begin to synchronize how they define emergency management, consistently reference and endorse The Standard, and consistently delineate the connection between requirements and The Standard. Until these steps are undertaken, what emergency management is, what a good program entails, and the relationship of The Standard to each will likely continue to be open to interpretation. It will be particularly important for entities that have already endorsed The Standard to take these steps should they want to see increased pursuit and achievement of EMAP. IAEM, NEMA, and other leading national organizations should advocate for revisions to core emergency management laws to reflect synchrony and invite state-level organizations (i.e., state offices of emergency management and state professional associations) to do the same. These same organizations should pressure FEMA to make changes since the agency can have a significant impact through how it develops regulations to support the implementation of laws, grant requirements for the grants on which local emergency management programs depend, and

guidance documents for a range of core emergency management activities (e.g., CPG 101 v2, HSEEP). As emergency management programs and structuring mechanisms become increasingly understood in the context of The Standard, EMs, and city (and other) leadership should increasingly see failure to align with The Standard as associated with potential lack of compliance with law, loss of grant funds, and more. Consideration should be given to the necessity of including requirements that do not, in fact, support fulfillment of one or more parts of The Standard because, as some might be revised or eliminated, it can have the effect of lessening the demands of emulation in terms of added staff and time. With these steps undertaken, it may be easier for EMs to “sell” accreditation and alignment with The Standard.

It may be easier to “sell” accreditation with the pressure of extrinsic forces, particularly in the form of incentives. Opportunities to provide incentives related to accreditation should be pursued. The Emergency Management Baseline Assessment Grant (EMBAG) proved to be a valuable resource for funding accreditation for some programs, but not all EMs in this study knew about it. The researcher has since learned that EMBAG funds are limited, and the funding is currently targeted for the largest city programs due to the high vulnerability and risk in these environments. Larger cities also tend to be more resource-abundant and better able to deploy to support smaller jurisdictions after a disaster. Leading national organizations should advocate for an increase in available EMBAG funds, and a widening of programs targeted to receive those funds. These same organizations should concurrently explore opportunities to incentivize accreditation with agency administrators and legislators at the state and federal levels. Financial incentives are a common form to explore, but focused, consistent messaging from entities at these levels about the intrinsic value of The Standard apart from accreditation may help change

perceptions among EMs (i.e., value in providing a picture of what a good program entails and value in benchmarking against it).

Opportunity remains even if the recommendations thus far are implemented. Structuring mechanisms are generated by entities outside of those discussed to this point. Local governments control structuring mechanisms in the form of local ordinances that set the parameters for what programs can do and establish a minimum set of requirements they must meet. NACo and ICMA have a role to play by training local governments about effective ordinances for emergency management and ensuring that emergency management is defined and what a “good” program entails are consistent with The Standard. State professional organizations could also advocate along these lines.

There are many more potential opportunities to pursue, but one final recommendation will be offered. All the recommendations suggested in this section would take time to implement, and during that period, EMs will still contend with various structuring mechanisms, and their perceptions of them concerning value, capacity, support, and emulating will be paramount. In recognition of this reality, it would be helpful if resources could be developed to help EMs visualize the relationship of The Standard to structuring mechanisms, including how it might be useful as an umbrella under which to organize and understand requirements. These resources should be available in more than one format—a combination of short videos, FEMA Independent Study course, guidance documents, “roadmaps,” and/or crosswalks might be useful.

Revisiting the Literature

An accepted theory or statistical model related to the pursuit and/or achievement of accreditation would have been useful to guide this study, yet, a careful review of the multidisciplinary accreditation literature did not yield one. In the absence of either, the

researcher developed a conceptual model to organize the diverse findings generated from the study in diverse settings by researchers in different disciplines. Recall in the literature review, the findings which emerged across studies into the pursuit and achievement of accreditation did not “neatly” fit into the categories due to inconsistent use of terminology across fields, different levels of analysis, and variations in the acceptance of accreditation within the field being studied. The model also helped sensitize the researcher to major categories of factors that the literature suggests may influence accreditation pursuit and/or achievement (i.e., macrosystem, microsystem, surrounding context, accrediting body).

The facilitator and barrier themes discovered through data analysis in this study do, in fact, group under these major categories, in spite of originating from different fields of study. Table 4 shows the relationship between the facilitator and barrier themes discovered through this study to the categories developed as a product of the literature review.

Table 4. Relationship of Study Themes to Categories

	Macrosystem	Microsystem	Surrounding Context	Accrediting Body
		X		
	X	X	X	
Pursuit	X	X		
		X		X
	X		X	
	X		X	
Achievement	X	X		X

Still, some facilitator and barrier themes that emerged in data analysis for this study had not, in the prior research on the topic and this study, yielded findings that do not appear in the prior work. Differences in the amount of time accreditation has been available and the acceptance of accreditation in the field studied may have influenced differences in the findings.

Key themes which emerged from the study, but were not evident in accreditation literature, include:

- a) the idea that program leaders, as a part of the microsystem, may have more influence than the body of accreditation work might lead one to believe,
- b) the role of structuring mechanisms,
- c) the finding that some facilitators and barriers of accreditation may be heavily influenced by more than one category,
- d) the finding that a period of emulation was required to get to the point of pursuit and pursuit was delayed until the program leader believed accreditation would be achieved once the formal process got underway, and
- e) the finding that the period leading up to formal instigation was the most important to both pursuit and achievement, given the role of activation.

Microsystem characteristics, or features of the program to be accredited, emerged relevant to understanding pursuit and achievement in the accreditation literature. However, microsystem characteristics did not appear to be the most influential category—macrosystems did. This research found that microsystem characteristics were the most critical facilitator or barrier, but not all characteristics appeared equally relevant. EMs, as just one aspect of the microsystem, and their perceptions, in particular, appear essential to understanding the pursuit and achievement in the emergency management program context. This finding diverges from

what the accreditation literature would suggest, and the divergence may be explained in several ways.

Scholars who previously investigated accreditation rarely seemed to examine the influence of individuals in the microsystem (i.e., just Desveaux et al., 2017; Zapata-Vanegas & Saturno-Hernandez, 2020). Lack of exploration of staff, or individuals, would certainly bar discovery of their role, especially since so much of the pre-existing work is quantitative. Nevertheless, scholars may not have felt the need to explore the role of staff, or individuals, on accreditation may be because staff and individuals, and their perceptions, are not very relevant in other settings. Accreditation is expected in other settings where research on pursuit and achievement has been explored. Over time, accreditation has become ingrained in the field (i.e., healthcare, and higher education). Extrinsic forces compel pursuit and achievement in those fields (e.g., keeping a hospital open relies on accreditation, insurance breaks, attracting students to a program, receipt of federal funds in higher education institutions). There is a lack of extrinsic forces to compel program accreditation in emergency management. It could be for this reason that the role of EM perceptions emerged so strongly in this study, but their equivalent did not outside of emergency management.

Structuring mechanisms (i.e., government requirements and hazardscape) in the surrounding context and macrosystem emerged as another significant facilitator/barrier theme in this research, but not on the broader literature. The explanation for why it emerged so strongly here may lie in the historical roots of emergency management, the lack of emergency management identity, and the lack of an emergency management profession, as previously discussed. The explanation for why it has not emerged as a significant influence in the wider accreditation literature may be that these fields have matured to the point that these issues are no

longer a concern (e.g., identity is established, issues related to professionalization largely resolved).

The finding that some facilitators and barriers of accreditation may be heavily influenced by more than one category discovered in this research had not been hinted at in the existing body of work on accreditation. As the reader will note when examining Table 4, the influence on six of the seven themes discovered through data analysis in this study can be traced to one or more categories. The EM perception of structuring mechanisms and the extent to which they fit with The Standard was found to be relevant to pursuit and achievement, but control over the many structuring mechanisms and what they required lay elsewhere. EM perception of capacity was important too, but control over capacity in the form of staff and demands on time from structuring mechanisms was controlled externally by the EM or their program. Emulating had to occur within the microsystem, but The Standard and what it entailed was not in their control. EMs perception of leadership and external city support was crucial, but the actual support from these parties was not theirs to grant or sustain.

Certainly, EM perceptions are the most important influence on the accreditation of programs in this study. The researcher believes this because all EMs had structuring mechanisms, capacity challenges, support to secure, and emulation to accomplish; some pursued and achieved accreditation, and some did not. At the same time, their perceptions may well improve as the actual conditions do too, and the more supportive the conditions, perhaps the more pursuit and achievement would occur. The fact that prior accreditation research did not suggest this nuance could be a function of the dominance of quantitative work, the forms of statistical analysis used, or the status of accreditation within the field studied.

The finding that a period of emulation was required to get to the point of pursuit and pursuit was delayed until the program leader believed accreditation would be achieved once the formal process got underway is another reason that the prior research on accreditation had not suggested. Again, The explanation for the lack of this finding could be the methods used in the wider work, but it could also be that this finding is obvious without needing to explicitly study or unearth it in other settings. The significance of the emulation finding in the emergency management program setting is that it took a long time (i.e., one to ten years) based on the amount of change a program had to undertake to be consistent with The Standard and the alignment to occur. The fact that it took a long time for programs to get to that place of confidence that they would achieve accreditation upon formally starting the process indicates how far short programs are in relation to The Standard programs. In terms of time and staff required, sustaining compliance is different from becoming compliant, at least theoretically. In fields where standards are well established as norms or expectations of quality programs and/or where more entities seek reaccreditation than first-time accreditation, getting initially to the point of pursuit may be of less interest to scholars.

A review of the body of work on accreditation seemed to attempt to understand the achievement of accreditation, primarily as opposed to when the pursuit is undertaken. Understanding when the pursuit is undertaken does not appear to have been the sole or explicit focus of any study. In this study, the period leading up to the point of formal instigation of pursuit dominated EM discourses. Getting to the point of pursuit required the alignment of various elements at one time. Getting to the point of pursuit was complex, hard, and, ultimately, rare across programs in the study (and within the population of the sixty-nine programs). Once formally instigated, the achievement was the product of successfully completing a series of steps

required by the accrediting body and activating the conditions fostered before the formal pursuit was underway. The challenges of getting to formal pursuit and the notion of activation were never suggested in the literature. Again, the fact that these findings did not appear in the wider literature on accreditation is unsurprising, given its focus on achievement as opposed to pursuit. In most cases, scholars were studying accreditation in settings where pursuit could be assumed, at least more widely than in emergency management. Given that reality, there is some logic to the focus on achievement instead of pursuit.

As scholars outside of emergency management continue to explore accreditation in various settings, they should consider exploring the extent to which some of the findings relevant to understanding accreditation in emergency management hold true in other settings. The explanations offered here for why the findings of this research may be unique in their significance here as opposed to in other settings or to other scholars should also be further explored. Qualitative methods may be useful to scholars as they undertake future research along these lines so that they might have rich, nuanced, and deep data.

Future research on the topic of accreditation in emergency management, and topics that seemed relevant to accreditation, should also be undertaken. This study began to address a gap in the literature, but much more is needed. Pursuit and achievement were only examined in one setting for this study—programs in the largest municipalities in the United States. Future research should examine these topics in other program settings (e.g., smaller cities, counties, states, tribal nations, federal agencies and departments, higher education institutions, and private sector programs) and in other countries. Studies involving interviews with EMs in these settings would provide the opportunity for comparison with the findings of this study, even while any

research can contribute given how little exists. Future research should also examine the extrinsic forces' role or potential role of in facilitating more pursuit and achievement of accreditation.

EMs did not perceive extrinsic forces encouraging them to pursue accreditation. The extent to which extrinsic forces are possible, the impact they would have, and their impact relative to other facilitator and barrier themes found in this study should all be studied. Some EMs in this study perceived The Standard to depict what a good emergency management program entails. Just what EMs perceive to be what a good program entails and why should be the subject of future research. EMs in this study all discussed structuring mechanisms and their influence. It would be of value for future research to explore the extent to which EMs perceive a relationship among, or across, the structuring mechanisms and/or a relationship with producing a good emergency management program. Some EMs could see how The Standard could be an umbrella, or meta-structure, under which structuring mechanisms and their requirements could be organized. However, the degree to which the requirements associated with structuring mechanisms support compliance with The Standard has never been researched. Future research on a whole host of topics associated with emergency management accreditation or findings discovered by focusing on accreditation is needed. To be sure, there remains considerable research regarding this topic.

Conclusion

Data analysis revealed that it was far more difficult for EMs from large cities in the U.S. to formally instigating pursuit than it was for their programs to achieve accreditation once the process got underway. The reasons for this difficulty were discussed at length in Chapter 4. The most significant of these reasons seems to be the reliance on the alignment of the EMs perceptions in conjunction with the impact of structuring mechanisms. As discussed, these

findings would make widespread pursuit and achievement of accreditation unlikely. Still, many opportunities exist to improve awareness of The Standard, perceptions of its value and how to communicate it and to better align structuring mechanisms with The Standard.

Implementation of these opportunities may move the field closer to having a shared understanding of what emergency management is and what a good program entails, and lead to more similarity in emergency management programs. Removing ambiguity by showing how compliance with structuring mechanisms results in progress toward The Standard will support EMs. Instead of obligations shifting based on the political administration in charge or the latest hazard event, structuring mechanisms could clearly align with the established priorities and benchmarks, allowing EMs to guide program evolution over time, deliberately and consistently. The reactive approach to policy changes, funding differences, and accounting for the impacts of hazard events must be replaced by a cohesive and proactive stance based on the alignment and synthesis of requirements across all levels of governance, without regard to disasters or leadership. For emergency management programs to further standardize, the structuring mechanisms from which they operate should support their capacity and ease the burden of advocating for the initiatives necessary to prepare for-, mitigate against-, respond to-, and recover from-, all-hazards.

CHAPTER SEVEN: CONCLUSION

While accreditation of emergency management programs has been available for more than two decades, very few emergency management programs are accredited, particularly at the local level. This study examined what may facilitate or hinder the pursuit and achievement of Emergency Management Accreditation Program (EMAP) accreditation in programs located in a United States city with a population over 300,000 (n=69). The multidisciplinary accreditation body of literature had not matured to offer a theoretical or statistical model that could guide quantitative work on the topic. Additionally, accreditation is understudied in the context of emergency management. A qualitative approach to the research was most appropriate for these reasons. In-depth interviews with thirty emergency management leaders (EMs) were conducted using the Responsive Interviewing Model (Rubin & Rubin, 2012) to gather and analyze rich data related to the research questions. The study results in a series of key findings and recommendations related to practice and research.

Key Findings and Recommendations for Practice

This study yielded a range of key findings related to the pursuit and achievement of emergency management accreditation.

1. The perceptions of EMs are the most important facilitator or barrier of formal pursuit of accreditation. The data suggests that EM perception of value, structuring mechanisms, capacity, support, and the results of the emulation process all have to be aligned for an EM to instigate formal pursuit. Poor perception related to any one of these areas closes the opportunity to instigate formal pursuit at any given point in time.

2. Emulating The Emergency Management Standard (2019) (The Standard) is critical to understanding the commencement of formal pursuit. Emulation takes from 1-10 years for programs depending on the extent of change they must undertake.
3. Local emergency management compliance with structuring mechanisms does not result in compliance with The Standard, and the relationship between structuring mechanisms, and The Standard is not explicit or otherwise apparent.
4. While most EMs interviewed as part of this study knew of The Standard/accreditation and valued it, awareness can be enhanced in several areas, including: its intrinsic value, how The Standard “fits” with a range of programs in varying contexts (e.g., urban/rural, structuring mechanisms, capacity), how to articulate the value of The Standard/accreditation to others, how The Standard can provide a useful umbrella for structuring mechanisms, how to successfully emulate The Standard and ensure appropriate documentation from the outset, existing incentives like EMBAG, and more.

Assuming there is a desire to see The Standard more broadly valued across the field, and accreditation more often pursued and achieved, these findings imply opportunities for government at all levels, EMAP, and emergency management professional associations. These opportunities were each discussed.

Key Findings and Recommendations for Research

The results of this study contribute to the accreditation body of knowledge and the emergency management body of knowledge. Specific contributions of this study to the accreditation body of knowledge included:

1. The idea that program leaders, as a part of the microsystem, may have more influence than the body of accreditation work might lead one to believe, particularly in the absence of extrinsic forces.
2. The finding that some facilitators and barriers to accreditation may be heavily influenced by more than one category (i.e., macrosystem, microsystem, surrounding context, accrediting body).
3. The finding that a period of emulation was required to get to the point of pursuit and pursuit was delayed until the program leader believed accreditation would be achieved once the formal process got underway.
4. The finding that the period leading up to formal instigation was that the most important to both pursuit and achievement, given the role of activation.

These findings should be further explored by future researchers who investigate accreditation in any context (e.g., healthcare, hospital, academic degree program, higher education institutions).

While the results of this study begin to address a gap in the emergency management literature, the study represents only a start. Significantly more research is needed. In particular, research should explore:

1. Facilitators and barriers to pursuit and accreditation outside of programs in the largest cities in the United States and abroad (e.g., in programs in smaller cities, counties, states, tribal nations, federal agencies and departments, higher education institutions, or private sector programs). Of particular interest, given this study, is future research exploring facilitators and barriers through the eyes of EMs in those settings.
2. More deeply the role, or potential role, of extrinsic forces in facilitating more pursuit and achievement of accreditation.

3. What EMs perceive good emergency management programs to entail and why.
4. How EMs perceive the relationship of structuring mechanisms, one to the next, in producing a comprehensive emergency management program.
5. The extent to which the requirements associated with structuring mechanisms relate to compliance with The Standard.

Despite the need for continuing research in the areas of emergency management program accreditation, this researcher hopes that the findings of this study support evolution of the discourse within the field of emergency management on the topic.

REFERENCES

- Ahmad, N., & Qahmash, A. (2020). Implementing fuzzy AHP and FUCOM to evaluate critical success factors for sustained academic quality assurance and ABET accreditation. *PLOS ONE*, *15*(9), e0239140. <https://doi.org/10.1371/journal.pone.0239140>
- Alexander, D. (2003). Towards the development of standards in emergency management training and education. *Disaster Prevention and Management*, *12*(2), 113–123.
<http://dx.doi.org.ezproxy.lib.ndsu.nodak.edu/10.1108/09653560310474223>
- Alkhenizan, A., & Shaw, C. (2011). Impact of accreditation on the quality of healthcare Services: A systematic review of the literature. *Annals of Saudi Medicine*, *31*(4), 407–416.
<https://doi.org/10.4103/0256-4947.83204>
- Almoajel, A. (2012). Relationship between accreditation and quality indicators in hospital care: A review of the literature. *World Applied Sciences Journal*, *17*, 598–606.
- Altinay, Z., Rittmeyer, E., Morris, L. L., & Reams, M. A. (2020). Public risk salience of sea level rise in Louisiana, United States. *Journal of Environmental Studies and Sciences*.
<https://doi.org/10.1007/s13412-020-00642-5>
- American National Standards Institute (ANSI). (2019). What Is ANSI 2019. *Brochure*. American National Standards Institute.
<https://share.ansi.org/Shared%20Documents/News%20and%20Publications/Brochures/What%20Is%20ANSI%202019%20Brochure,%20Single%20Pages.pdf>
- American National Standards Institute (ANSI). (2021). *Approved American National Standards*.
<https://share.ansi.org/shared%20documents/standards%20activities/american%20national%20standards/approved%20and%20proposed%20ans%20lists/approved%20ans.pdf>

- Andrade, M. (2011). Managing change-engaging faculty in assessment opportunities. *Innovative Higher Education*, 36(4), 217–233. <https://doi.org/10.1007/s10755-010-9169-1>
- Asselin, M. (2003). Insider research: Issues to consider when doing qualitative research in your own setting. *Journal for Nurses in Staff Development (JNSD)*, 19(2), 99–103. <https://doi.org/10.1097/00124645-200303000-00008>
- Avolio, B., & Benzaquen, J. (2020). Strategic drivers to approach business school's accreditations. *Journal of Education for Business*, 95(8), 519–526. <https://doi.org/10.1080/08832323.2019.1707751>
- Bachner, K. (2014). Promoting intercultural competencies. *International Conference on Human Resource Development for Nuclear Power Programmes: Building and Sustaining Capacity*, 25(3), 298-313, Vienna, Austria. <https://www.osti.gov/etdeweb/biblio/22255434>
- Baker, R. (2002). Evaluating quality and effectiveness: Regional accreditation principles and practices. *The Journal of Academic Librarianship*, 28(1–2), 3–7. [https://doi.org/10.1016/S0099-1333\(01\)00279-8](https://doi.org/10.1016/S0099-1333(01)00279-8)
- Bakkensen, L., Ding, X., & Ma, L. (2019). Flood risk and salience: New evidence from the sunshine state. *Southern Economic Journal*, 85(4), 1132–1158. <https://doi.org/10.1002/soej.12327>
- Beatty, K., Erwin, P., Brownson, R., Meit, M., & Fey, J. (2018). Public health agency accreditation among rural local health departments: Influencers and barriers. *Journal of Public Health Management and Practice*, 24(1), 49–56. <https://doi.org/10.1097/PHH.0000000000000509>
- Beatty, K., Mayer, J., Elliott, M., Brownson, R., Abdulloeva, S., & Wojciehowski, K. (2015). Patterns and predictors of local health department accreditation in Missouri. *Journal of*

Public Health Management and Practice : JPHMP, 21(2), 116–125.

<https://doi.org/10.1097/PHH.0000000000000089>

Beatty, K., Mayer, J., Elliott, M., Brownson, R., Abdulloeva, S., & Wojciehowski, K. (2016).

Barriers and incentives to rural health department accreditation. *Journal of Public Health Management and Practice*, 22(2), 138–148.

<https://doi.org/10.1097/PHH.0000000000000264>

Beaudry, M. L., Bialek, R., & Moran, J. W. (2014). Using quality improvement tools and

methods throughout the accreditation lifecycle. *Journal of Public Health Management and Practice*, 20(1), 49–51. <https://doi.org/10.1097/PHH.0b013e3182a778bd>

Beitsch, L. M., Riley, W., & Bender, K. (2014). Embedding quality improvement into

accreditation: evolving from theory to practice. *Journal of Public Health Management and Practice*, 20(1), 57–60. <https://doi.org/10.1097/PHH.0b013e31829a2cdd>

Bentley, E., & Waugh, W. L. (2005). Katrina and the necessity for emergency management standards. *Journal of Emergency Management*, 3(5), 9–10.

<https://doi.org/10.5055/jem.2005.0043>

Blanchard, B. W. (2005). Top ten competencies for professional emergency management.

Emergency Management Institute.

Blanchard, B. W. (2003). The new role of higher education in emergency management. *Journal of Emergency Management*, 1(2), 30. <https://doi.org/10.5055/jem.2003.0018>

Bogh, S. B., Falstie-Jensen, A. M., Hollnagel, E., Holst, R., Braithwaite, J., Raben, D. C., &

Johnsen, S. P. (2017). Predictors of the effectiveness of accreditation on hospital performance: A nationwide stepped-wedge study. *International Journal for Quality in Health Care*, 29(4), 477–483. <https://doi.org/10.1093/intqhc/mzx052>

- Brittingham, B. (2009). Accreditation in the United States: How did we get to where we are? *New Directions for Higher Education*, 2009(145), 7–27. <https://doi.org/10.1002/he.331>
- Brubakk, K., Vist, G. E., Bukholm, G., Barach, P., & Tjomsland, O. (2015). A systematic review of hospital accreditation: The challenges of measuring complex intervention effects. *BMC Health Services Research*, 15(1), 280. <https://doi.org/10.1186/s12913-015-0933-x>
- Cannon, T., & Schipper, L. (2014). World Disasters Report 2014 – Focus on culture and risk. *International Federation of Red Cross and Red Crescent Societies*.
<https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/13896>
- Carr, J. A. (2014). Pre-disaster integration of community emergency response teams within local emergency management systems. *Thesis*. [North Dakota State University].
<http://search.proquest.com/pqdtglobal/docview/1528527364/abstract/D1EE5A9D75AD4FE6PQ/9>
- Carroll, V. S., Thomas, G., & DeWolff, D. (2006). Academic quality improvement program: using quality improvement as tool for the accreditation of nursing education. *Quality Management in Health Care*. 15(4), 291-295.
- Chaiyaphumthanachok, C., Tangdhanakanond, K., & Sujiva, S. (2016). Indicators development for accreditation of teacher education programs in Thailand. *Procedia - Social and Behavioral Sciences*, 217, 430–434. <https://doi.org/10.1016/j.sbspro.2016.02.008>
- Chang, R. H., & Neal, D. (2019). Promotion or transition: From fire officer to emergency manager. *Journal of Emergency Management*, 17(2), 101.
<https://doi.org/10.5055/jem.2019.0402>

- Chang, Y., Lin, K., & Tu, T. (2016). The Impact of AACSB Accreditation on Business School Students in Taiwan. *The Asia-Pacific Education Researcher*, 25(4), 615–625.
<https://doi.org/10.1007/s40299-016-0289-y>
- Col, J. M. (2007). Managing Disasters: The role of local government. *Public Administration Review*, 67, 114–124. <http://www.jstor.org/stable/4624689>
- Comfort, L. K. (1985). Integrating organizational action in emergency management; Strategies for change. *Public Administration Review*, 45, 155–164. <https://doi.org/10.2307/3135010>
- Comfort, L. K. (2012). Designing disaster resilience and public policy: Comparative perspectives. *Journal of Comparative Policy Analysis: Research and Practice*, 14(2), 109–113. <https://doi.org/10.1080/13876988.2012.664709>
- Comfort, L. K., & Haase, T. W. (2006). Communication, coherence, and collective action: The impact of Hurricane Katrina on communications infrastructure. *Public Works Management & Policy*, 10(4), 328–343. <https://doi.org/10.1177/1087724X06289052>
- Comfort, L. K., & Pitts, K. (1996). Improving emergency management: A total quality management approach. *International Journal of Public Administration*, 11–12, 2113–2139.
- Comfort, L. K., Waugh, W. L., Cigler, B. A., & Springer, C. G. (2012). Emergency management research and practice in public administration: Emergence, evolution, expansion, and future directions [with Commentary]. *Public Administration Review*, 72(4), 539–549.
<http://www.jstor.org/stable/41506804>
- Corbin, J., & Strauss, A. (2015). *Basics of qualitative research*. SAGE Publications, Inc.
- Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th edition). SAGE Publications, Inc.

- Currier, B. A. (2001). Assuring quality in legal education: The accreditation process of the American Bar Association. *South Texas Law Review*, 43, 337.
<https://heinonline.org/HOL/Page?handle=hein.journals/stexlr43&id=353&div=&collection=>
- Cwiak, C. (2011). Framing the future: What should emergency management graduates know? *Journal of Homeland Security and Emergency Management*, 8(2).
<https://doi.org/10.2202/1547-7355.1910>
- Cwiak, C., Campbell, R., Cassavechia, M. G., Haynes, C., Lloyd, M. S., Brockway, N., Navarini, G. O., Piatt, B. E., & Senger, M. (2017). Emergency management leadership in 2030: Shaping the next generation meta-leader. *Journal of Emergency Management*, 15(2), 81–97.
<https://doi.org/10.5055/jem.2017.0317>
- Daniel, J. (2012). *Sampling essentials: Practical guidelines for making sampling choices*. SAGE Publications, Inc. <https://doi.org/10.4135/9781452272047>
- DeHay, T., Ross, S., Williams, J., & Ponce, A. N. (2016). Factors associated with accreditation: A comparison of accredited and nonaccredited psychology doctoral internship programs. *Training and Education in Professional Psychology*, 10(3), 125–132.
<https://doi.org/10.1037/tep0000124>
- Desveaux, L., Mitchell, J. I., Shaw, J., & Ivers, N. M. (2017). Understanding the impact of accreditation on quality in healthcare: A grounded theory approach. *International Journal for Quality in Health Care*, 29(7), 941–947. <https://doi.org/10.1093/intqhc/mzx136>
- Disaster Recovery Institute International (DRI). (2021). *Who We Are*. Retrieved September 9, 2021, from <https://www.dri.edu/about/who-we-are/>
- Drabek, T. E. (1985). Managing the emergency response. *Public Administration Review*, 45(Special), 85–92. <https://doi.org/10.2307/3135002>

- Drabek, T. E. (1987). The Professional emergency manager: Structures and strategies for successes. *Institute of Behavioral Science*, University of Colorado.
- Dykstra, M. E. (1995). Why can't Johnny sit for the Idaho Bar—The unfair effect of ABA accreditation standards on state bar admission requirements. *San Diego Justice Journal*, 3, 285.
<https://heinonline.org/HOL/Page?handle=hein.journals/tjeflr17&id=291&div=&collection=>
- Elliott, C. (2013). The impact of AACSB accreditation: A multiple case study of Canadian university business schools. *Canadian Journal of Administrative Sciences / Revue Canadienne des Sciences de l'Administration*, 30(3), 203–218.
<https://doi.org/10.1002/cjas.1257>
- Emergency Management Accreditation Program (EMAP). (2004). *Building strong emergency preparedness programs*. Emergency Management Higher Education Conference.
<https://training.fema.gov/emiweb/downloads/demers%20-%20emap%20em%20accreditation%20program.pdf>
- Emergency Management Accreditation Program (EMAP). (2019). *Emergency Management Standard: ANSI/EMAP EMS 5-2019*. <https://emap.org/index.php/root/about-emap/96-emap-em-4-2016/file>
- Emergency Management Accreditation Program (EMAP). (2020a). *Application for Accreditation: October 2020*.
https://www.emap.org/images/2020_EMAP_Applicant_Guide_to_Accreditation.pdf
- Emergency Management Accreditation Program (EMAP) (2020b). *E0122: Emergency Management Standard Training*. <https://www.emap.org/index.php/component/jcalpro/20-emap-training/107-e0122-emergency-management-standard-training?Itemid=101>

Emergency Management Accreditation Program (EMAP). (2021a). *EMAP Accredited Programs*.

<https://emap.org/index.php/what-is-emap/who-is-accredited>

Emergency Management Accreditation Program (EMAP). (2021b). *Steps to Accreditation*.

<https://emap.org/index.php/program-resources/steps-to-accreditation>

Ensor, M. O. (2009). *The legacy of Hurricane Mitch: Lessons from post-disaster reconstruction in Honduras*. University of Arizona Press.

Falstie-Jensen, A. M., Larsson, H., Hollnagel, E., Nørgaard, M., Svendsen, M. L. O., & Johnsen, S. P. (2015). Compliance with hospital accreditation and patient mortality: A Danish nationwide population-based study. *International Journal for Quality in Health Care*, 27(3), 165–174. <https://doi.org/10.1093/intqhc/mzv023>

Falstie-Jensen, A. M., Nørgaard, M., Hollnagel, E., Larsson, H., & Johnsen, S. P. (2015). Is compliance with hospital accreditation associated with length of stay and acute readmission? A Danish nationwide population-based study. *International Journal for Quality in Health Care*, 27(6), 451–458. <https://doi.org/10.1093/intqhc/mzv070>

Farley, J. E., Barlow, H. D., Finkelstein, M. S., & Riley, L. (1993). Earthquake hysteria, before and after: A survey and follow-up on public response to the browning forecast. *International Journal of Mass Emergencies and Disasters*, 11(3), 271–277.

[https://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds\[\]=citjournalarticle_55889_29](https://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds[]=citjournalarticle_55889_29)

Federal Emergency Management Agency (FEMA) Higher Education Program. (2007). Principles of Emergency Management. <https://irp.fas.org/agency/dhs/fema/principles.pdf>

- Federal Emergency Management Agency (FEMA). (2021). *Community Rating System*.
<https://www.fema.gov/floodplain-management/community-rating-system?msclkid=b33fa292af4e11ecad50fb94b7099dca>
- Federal Emergency Management Agency (FEMA). (2022a). Hazard Mitigation Grant Program (HMPG). <https://www.fema.gov/grants/mitigation/hazard-mitigation>
- Federal Emergency Management Agency (FEMA). (2022b). Homeland Security Grant Program. <https://www.fema.gov/grants/preparedness/homeland-security>
- Federal Grants Wire. (2022). *Emergency Management Baseline Grant (EMBAG)*.
<https://www.federalgrantswire.com/emergency-management-baseline-assessments-grant-embag.html#.YjhSPU3MLSI>
- Federal Register. (2021). *Agencies*. Retrieved September 9, 2021
(<https://www.federalregister.gov/agencies>).
- Garnett, J. L., & Kouzmin, A. (2007). Communicating throughout Katrina: Competing and complementary conceptual lenses on crisis communication. *Public Administration Review*, 67(s1), 171–188. <https://doi.org/10.1111/j.1540-6210.2007.00826.x>
- Ge, Y., Peacock, W. G., & Lindell, M. K. (2011). Florida households' expected responses to hurricane hazard mitigation incentives. *Risk Analysis: An International Journal*, 31(10), 1676–1691. <https://doi.org/10.1111/j.1539-6924.2011.01606.x>
- Germaine, R., & Spencer, L. (2016). Faculty perceptions of a seven-year accreditation process. *Journal of Assessment and Institutional Effectiveness*, 6(1), 67.
<https://doi.org/10.5325/jasseinsteffe.6.1.0067>

- Goode, N., Salmon, P. M., Spencer, C., McArdle, D., & Archer, F. (2017). Defining disaster resilience: Comparisons from key stakeholders involved in emergency management in Victoria, Australia. *Disasters*, *41*(1), 171–193. <https://doi.org/10.1111/disa.12189>
- Gray, J. R. (2019). Professionalization of emergency management: Are we our own worst enemy? *Journal of Emergency Management*, *17*(2), 136–138. <https://doi.org/10.5055/jem.2019.0405>
- Greenfield, D., Pawsey, M., Hinchcliff, R., Moldovan, M., & Braithwaite, J. (2012). The standard of healthcare accreditation standards: A review of empirical research underpinning their development and impact. *BMC Health Services Research*, *12*(1), 329. <https://doi.org/10.1186/1472-6963-12-329>
- Harris, J. B., Bartlett, G., Joyner, T. A., Hart, M., & Tollefson, W. (2021). Modification of the priority risk Index: Adapting to emergency management accreditation program standards for institutes of higher learning hazard mitigation plans. *Journal of Emergency Management*, *19*(2), 165–171. <https://doi.org/10.5055/jem.0568>
- Harvey, L. (2004). The power of accreditation: Views of academics. *Journal of Higher Education Policy and Management*, *26*(2), 207–223. <https://doi.org/10.1080/1360080042000218267>
- Harvison, N. (2018). (AOTA) *Current trends in Accreditation and Higher Education*.
- Henstra, D. (2010). Evaluating local government emergency management programs: What framework should public managers adopt? *Public Administration Review*, *70*(2), 236–246. <https://doi.org/10.1111/j.1540-6210.2010.02130.x>

- International Association of Emergency Managers (IAEM). (2021). *Getting started: Congratulations on your decision to pursue the IAEM certification*.
<https://www.iaem.org/Certification/Getting-Started>
- ISO. (2021a). *About Us*. ISO. <https://www.iso.org/about-us.html>
- ISO. (2021b). *Certification & Conformity: Certification*. ISO.
<https://www.iso.org/certification.html>
- ISO. (2021c). *Members: ANSI: United States*. ISO.
<https://www.iso.org/cms/render/live/en/sites/isoorg/contents/data/member/00/21/2188.html>
- James, H., & Paton, D. (2015). Social capital and the cultural contexts of disaster recovery outcomes in Myanmar and Taiwan. *Global Change, Peace & Security*, 27(2), 207–228.
<https://doi.org/10.1080/14781158.2015.1030380>
- Jensen, J., Klenow, D., & Youngs, G. (2019). Curricular innovation and emergency management in higher education: Making the general education connection. *Journal of Emergency Management*, 17(2), 87–99. <https://doi.org/10.5055/jem.2019.0401>
- Johnson, R. R. (2015). Examining the effects of agency accreditation on police officer behavior. *Public Organization Review*, 15(1), 139–155. <https://doi.org/10.1007/s11115-013-0265-4>
- Joint Commission. (2021). *Why Achieve Accreditation*.
<https://www.jointcommission.org/accreditation-and-certification/become-accredited/why-achieve-accreditation/>
- Kapucu, N. (2006). Emergency logistics planning and disaster preparedness. *Journal of Emergency Management*, 4(6), 21. <https://doi.org/10.5055/jem.2006.0049>

- Kapucu, N. (2011). Developing competency-based emergency management degree programs in public affairs and administration. *Journal of Public Affairs Education*, 17(4), 501–521.
<https://doi.org/10.1080/15236803.2011.12001659>
- Karthiyayini, N., & Rajendran, C. (2016). Critical factors and performance indicators: Accreditation of testing- and calibration-laboratories. *Benchmarking: An International Journal*, 24(7), 1814–1833. <https://doi.org/10.1108/BIJ-04-2016-0058>
- Kelly, W. E. (2003). *Role of standards in the globalization of higher education*. Eleventh Annual Forum on the Globalization of Higher Education, Washington, D.C.
- Khodabocus, F., & Balgobin, K. (2011). Implementation and practical benefits of ISO/IEC 17025:2005 in a Testing Laboratory. *University of Mauritius Research Journal*, 17(1), 27–60. <https://doi.org/10.4314/umrj.v17i1.70730>
- Khunwishit, S., & McEntire, D. A. (2012). Testing social vulnerability theory: A quantitative study of Hurricane Katrina’s perceived impact on residents living in FEMA designated disaster areas. *Journal of Homeland Security and Emergency Management*, 9(1).
<https://doi.org/10.1515/1547-7355.1950>
- Kweit, M. G., & Kweit, R. W. (2006). A tale of two disasters. *Publius: The Journal of Federalism*, 36(3), 375–392. <https://doi.org/10.1093/publius/pjj023>
- Labadie, J. R. (1984). Problems in local emergency management. *Environmental Management*, 8(6), 489–494. <https://doi.org/10.1007/BF01871574>
- Lejeune, C. (2011). Is continuous improvement through accreditation sustainable?: A capability-based view. *Management Decision*. 49(9), 1535-1548.
<https://doi.org/10.1108/00251741111173970>

- Lubinescu, E. S., Ratcliff, J. L., & Gaffney, M. A. (2001). Two continuums collide: Accreditation and assessment. *New Directions for Higher Education*, 2001(113), 5–21.
<https://doi.org/10.1002/he.1>
- Lucus, V. (2006a). A history of the Emergency Management Accreditation Program (EMAP). *Journal of Emergency Management*, 4(5), 75–79.
- Lucus, V. (2006b). Analysis of the baseline assessments conducted in 35 U.S. State/Territory emergency management programs: Emergency Management Accreditation Program (EMAP) 2003-2004. *Journal of Homeland Security and Emergency Management*, 3(2).
<https://doi.org/10.2202/1547-7355.1212>
- Manning, S. R. (2020). Strategic planning in emergency management: Evaluating the impacts on local program quality. *Journal of Homeland Security and Emergency Management*, 17(3), 20190051. <https://doi.org/10.1515/jhsem-2019-0051>
- McEntire, D. A., Fuller, C., Johnston, C. W., & Weber, R. (2002). A Comparison of disaster paradigms: The search for a holistic policy guide. *Public Administration Review*, 62(3), 267–281. <https://doi.org/10.1111/1540-6210.00178>
- McEntire, D. A. (2007). The historical challenges facing emergency management and homeland security. *Journal of Emergency Management*, 5(4), 17.
<https://doi.org/10.5055/jem.2007.0011>
- McGuire, M., & Silvia, C. (2010). The effect of problem severity, managerial and organizational capacity, and agency structure on intergovernmental collaboration: Evidence from local emergency management. *Public Administration Review*, 70(2), 279–288.
<https://doi.org/10.1111/j.1540-6210.2010.02134.x>

- McKee, M. C., Mills, A. J., & Weatherbee, T. (2005). Institutional field of dreams: Exploring the AACSB and the new legitimacy of Canadian business schools. *Canadian Journal of Administrative Sciences (Canadian Journal of Administrative Sciences)*, 22(4), 288–301. <https://ezproxy.lib.ndsu.nodak.edu/login?url=https://search.ebscohost.com/login.aspx?direct=true&db=keh&AN=20934900&site=ehost-live&scope=site>
- Meit, M. (2008). Rural Public Health Agency Accreditation: Final Report. *Walsh Center for Rural Health Analysis*. 59. Bethesda, MD.
- Moskal, P., Ellis, T., & Keon, T. (2008). Summary of assessment in higher education and the management of student-learning data. *Academy of Management Learning & Education*, 7(2), 269–278. <https://doi.org/10.5465/AMLE.2008.32712624>
- Muljana, P. S., Nissenson, P. M., & Luo, T. (2020). Examining factors influencing faculty buy-in and involvement in the accreditation process: A cause analysis grounded in systems thinking. *TechTrends*, 64(5), 730–739. <https://doi.org/10.1007/s11528-020-00526-z>
- Mullings, B. (1999). Insider or outsider, both or neither: Some dilemmas of interviewing in a cross-cultural setting. *Geoforum*, 30(4), 337–350. [https://doi.org/10.1016/S0016-7185\(99\)00025-1](https://doi.org/10.1016/S0016-7185(99)00025-1)
- Muro, M., & Whiton, J. (2017). Big cities, small cities – and the gaps. *The Avenue*. <https://www.brookings.edu/blog/the-avenue/2017/10/17/big-cities-small-cities-and-the-gaps/>
- Myers, G. A. (2015). Assessing the performance management of national preparedness—A conceptual model: Defense Technical Information Center. Thesis. [Naval Postgraduate School]. <https://doi.org/10.21236/AD1009172>

National Association of Counties (NACo). (2017). *Proposed policy resolutions and platform changes: As recommended by the NACo Board of Directors sitting as Resolutions Committee*. https://www.naco.org/sites/default/files/documents/2017%20Post-Board%20Resolutions%20Packet%20-%20For%20Full%20Membership%20FINAL_1.pdf

National Center for Education Statistics (2021). *The NCES fast facts tool provides quick answers to many education questions (National Center for Education Statistics)*. Retrieved September 9, 2021. <https://nces.ed.gov/fastfacts/display.asp?id=84>.

National Congress of American Indians (NCAI). (2021) *Tribal Nations & the United States: An Introduction*. Retrieved September 9, 2021. <https://www.ncai.org/about-tribes>.

National Emergency Management Association (NEMA) & International Association of Emergency Managers (IAEM). (2020). *Emergency Management Performance Grant: 10 years of the nation's return on investment*. <https://www.iaem.org/Portals/25/documents/EMPG-ROI-Report-2020.pdf>

National Emergency Management Association (NEMA). (2021). *NEMA Partners*. National Emergency Management Association. <https://www.nemaweb.org/index.php/partners>

National Fire Protection Association (NFPA). (2021a). *Catalog: NFPA 1600, Standard on Continuity, Emergency, and Crisis Management*. <https://catalog.nfpa.org/NFPA-1600-Standard-on-Continuity-Emergency-and-Crisis-Management-P1438.aspx>

National Fire Protection Association (NFPA). (2021b). *Catalog: NFPA 1600 (2016) and Handbook Set*. <https://catalog.nfpa.org/NFPA-1600-2016-and-Handbook-Set-P17577.aspx>

National League of Cities. (2016). *Cities 101 — Number of Local Governments*. Retrieved September 9, 2021. <https://www.nlc.org/resource/cities-101-number-of-local-governments/>.

- Nawal, L., Sikka, A., Mehta, S., & Lipsky, M. (2009). Comparison of US accredited and non-accredited rural critical access hospitals. *International Journal for Quality in Health Care*, 21(2), 112–118.
- O'Connor, M. J. (2005). *From chaos to clarity: Educating emergency managers*. Dissertation. [The University of Akron].
<http://www.proquest.com/docview/305022580/abstract/92A50A3C01ED430FPQ/1>
- O'Leary, M. (2004). *Measuring disaster preparedness: A Practical guide to indicator development and application*. iUniverse.
- Ostovari, M., Liu, S. S., Yih, Y., & Yu, D. (2021). Understanding local health departments decision to pursue/defer accreditation: A mixed-method systems thinking approach. *IJSE Transactions on Healthcare Systems Engineering*, 11(1), 70–78.
<https://doi.org/10.1080/24725579.2020.1854396>
- Oxford Dictionary. (2021a). *Accreditation*. Lexico Dictionaries | English.
<https://www.lexico.com/definition/accreditation>
- Oxford Dictionary. (2021b). *Standard*. Lexico Dictionaries.
<https://www.lexico.com/definition/standard>
- Oyola-Yemaiel, A., & Wilson, J. (2005). Three essential strategies for emergency management professionalization in the U. S. *International Journal of Mass Emergencies and Disasters*, 23(1), 8.
- Palttala, P., & Vos, M. (2012). Quality indicators for crisis communication to support Emergency management by public authorities. *Journal of Contingencies & Crisis Management*, 20(1), 39–51. <https://doi.org/10.1111/j.1468-5973.2011.00654.x>

- Parthasarathy, S., Subramanian, S., & Quan, S. F. (2014). A multicenter prospective comparative effectiveness study of the effect of physician certification and center accreditation on patient-centered outcomes in obstructive sleep apnea. *Journal of Clinical Sleep Medicine*, *10*(03), 243–249. <https://doi.org/10.5664/jcsm.3518>
- Peacock, W. F., Kontos, M. C., Amsterdam, E., Cannon, C. P., Diercks, D., Garvey, L., Graff, L., Holmes, D., Holmes, K. S., McCord, J., Newby, K., Roe, M., Dadkhah, S., Siler-Fisher, A., & Ross, M. (2013). Impact of society of cardiovascular patient care accreditation on quality: An action registry-get with the guidelines: Analysis. *Critical Pathways in Cardiology: A Journal of Evidence-Based Medicine*, *12*(3), 116–120. <https://doi.org/10.1097/HPC.0b013e31828940e3>
- Perryer, C., & Egan, V. (2015). Business school accreditation in developing countries: A case in Kazakhstan. *Journal of Eastern European and Central Asian Research (JEECAR)*, *2*(2), 11–11. <https://doi.org/10.15549/jeecar.v2i2.95>
- Pomey, M.-P., Lemieux-Charles, L., Champagne, F., Angus, D., Shabah, A., & Contandriopoulos, A.-P. (2010). Does accreditation stimulate change? A study of the impact of the accreditation process on Canadian healthcare organizations. *Implementation Science*, *5*(31), 14. <https://doi.org/10.1186/1748-5908-5-31>
- Poulin, T. E. (2009). Review of social vulnerability to disasters. *Journal of Homeland Security and Emergency Management*, *6*(1). <https://doi.org/10.2202/1547-7355.1670>
- President of the United States of America. (2019). Executive Order 13891: Promoting the rule of law through improved agency guidance documents. The White House [FR Doc. 2019-22623].

- Prince, D. (2012). American accreditation: Why do it? *Higher Learning Research Communications*, 2(3), 45. <https://doi.org/10.18870/hlrc.v2i3.71>
- Quarantelli, E. L. (1984). Chemical disaster preparedness at the local community level. *Journal of Hazardous Materials*, 8(3), 239–249. [https://doi.org/10.1016/0304-3894\(84\)85004-9](https://doi.org/10.1016/0304-3894(84)85004-9)
- Quarantelli, E. L. (1997). Ten criteria for evaluating the management of community disasters. *Disasters*, 21(1), 39–56. <https://doi.org/10.1111/1467-7717.00043>
- Ramsey, H. J. (1995). The history, organization, and accomplishments of the American Bar Association Accreditation Process. *Wake Forest Law Review*, 30, 267.
<https://heinonline.org/HOL/Page?handle=hein.journals/wflr30&id=279&div=&collection=>
- Rapley, T. (2014). Sampling strategies in qualitative research design. In *The SAGE Handbook of Qualitative Data Analysis*. SAGE Publications Ltd. <https://doi.org/10.4135/9781446282243>
- Reisi, N., Raeissi, P., Sokhanvar, M., & Kakemam, E. (2019). The impact of accreditation on nurses' perceptions of quality of care in Iran and its barriers and facilitators. *The International Journal of Health Planning and Management*, 34(1), e230–e240.
<https://doi.org/10.1002/hpm.2642>
- Ritchie, J., & Lewis, J. (2003). *Qualitative research practice: A guide for social science students and researchers*. SAGE Publications, Inc.
- Ritchie, W. J., Ni, J., Stark, E. M., & Melnyk, S. A. (2019). The effectiveness of ISO 9001-based healthcare accreditation surveyors and standards on hospital performance outcomes: A balanced scorecard perspective. *Quality Management Journal*, 26(4), 162–173.
<https://doi.org/10.1080/10686967.2019.1647770>

- Roller, R. H., Andrews, B. K., & Bovee, S. L. (2003). Specialized accreditation of business schools: A comparison of alternative costs, benefits, and motivations. *Journal of Education for Business*, 78(4), 197–204. <https://doi.org/10.1080/08832320309598601>
- Rossi, P. H., Wright, J. D., & Weber-Burdin, E. (1982). *Natural hazards and public choice: The state and local politics of hazard mitigation*. Elsevier.
- Rubin, C. B. (1985). The community recovery process in the united states after a major natural disaster. *International Journal of Mass Emergencies & Disasters*, 3(2), 9–28.
<https://training.fema.gov/emiweb/downloads/ijems/articles/the%20community%20recovery%20process%20in%20the%20united%20states%20aftr%20a%20m.pdf>
- Rubin, H. J., & Rubin, I. S. (2012). *Qualitative interviewing: The art of hearing data*. SAGE Publications.
- Sadiq, A. (2017). Determinants of organizational preparedness for floods: U.S. employees' perceptions. *Risk, Hazards & Crisis in Public Policy*, 8(1), 28–47.
<https://doi.org/10.1002/rhc3.12104>
- Salkind, N. (2010). Probability sampling. In *Encyclopedia of Research Design*. SAGE Publications, Inc. <https://doi.org/10.4135/9781412961288>
- Schneider, S. K. (1992). Governmental response to disasters: The conflict between bureaucratic procedures and emergent norms. *Public Administration Review*, 52(2), 135–145.
<https://doi.org/10.2307/976467>
- Scrivens, E. (1997). Putting continuous quality improvement into accreditation: Improving approaches to quality assessment. *Quality and Safety in Health Care*, 6(4), 212–218.
<https://doi.org/10.1136/qshc.6.4.212>

- Seneviratne, K., Baldry, D., & Pathirage, C. (2010). Disaster knowledge factors in managing disasters successfully. *International Journal of Strategic Property Management*, 14(4), 376–390. <https://doi.org/10.3846/ijspm.2010.28>
- Shah, G. H., Leep, C. J., Ye, J., Sellers, K., Liss-Levinson, R., & Williams, K. S. (2015). Public health agencies' level of engagement in and perceived barriers to PHAB national voluntary accreditation. *Journal of Public Health Management and Practice*, 21(2), 107–115. <https://doi.org/10.1097/PHH.000000000000117>
- Shaw, C. D., Groene, O., Botje, D., Sunol, R., Kutryba, B., Klazinga, N., Bruneau, C., Hammer, A., Wang, A., Arah, O. A., Wagner, C., on behalf of the DUQuE Project Consortium, Klazinga, N., Kringos, D., Lombarts, K., Plochg, T., Lopez, M., Secanell, M., Sunol, R., ... Thompson, A. (2014). The effect of certification and accreditation on quality management in 4 clinical services in 73 European hospitals. *International Journal for Quality in Health Care*, 26(s1), 100–107. <https://doi.org/10.1093/intqhc/mzu023>
- Shawan, D. A. (2021). The effectiveness of the Joint Commission International Accreditation in improving quality at King Fahd University Hospital, Saudi Arabia: A Mixed Methods Approach. *Journal of Healthcare Leadership*, 13, 47–61. <https://doi.org/10.2147/JHL.S288682>
- Shiley, D. (2018). *News Release: IAEM Endorses EMAP as the Standard for Emergency Management Programs*. Falls Church, VA. International Association of Emergency Managers (IAEM).
- Sibthorpe, B., Gardner, K., & McAullay, D. (2016). Furthering the quality agenda in Aboriginal community controlled health services: Understanding the relationship between accreditation, continuous quality improvement and national key performance indicator

reporting. *Australian Journal of Primary Health*, 22(4), 270.

<https://doi.org/10.1071/PY15139>

Siegel, J. M., Shoaf, K. I., Afifi, A. A., & Bourque, L. B. (2003). Surviving two disasters: Does reaction to the first predict response to the second? *Environment and Behavior*, 35(5), 637–654. <https://doi.org/10.1177/0013916503254754>

Statista. (2020). *Mental health facilities share by licensing or certification U.S. 2019*. Statista. <https://www.statista.com/statistics/712861/mental-health-facilities-in-the-us-by-licensing-or-certification/>

Sturgis, R. (2007). Strategic planning for emergency managers. *Journal of Emergency Management*, 5(2), 9.

Tashayoei, N., Raeissi, P., & Nasiripour, A. A. (2020). Challenges of implementation of hospital accreditation in Iran: An exploratory factor analysis. *Journal of the Egyptian Public Health Association*, 95(1), 5. <https://doi.org/10.1186/s42506-019-0033-6>

Taylor, S. J., Bogdan, R., & DeVault, M. (2015). *Introduction to Qualitative Research Methods: A Guidebook and Resource*. John Wiley & Sons.

Thomas, D., & Mileti, D. S. (2003, October 22). *Designing educational opportunities for the hazards manager of the 21st century*. Hazard Management Higher Education Workshop, Denver, Colorado. <https://training.fema.gov/emiweb/downloads/thomas%20and%20milleti.pdf>

Tierney, K. (2014). The social roots of risk: Producing disasters, promoting resilience. *The Social Roots of Risk*. Stanford University Press. <https://doi.org/10.1515/9780804791403>

Tierney, K., & Oliver-Smith, A. (2007). *Social Dimensions of Disaster Recovery*.

- Topp, W. S. (2019). Making the transition from law enforcement to emergency management: Organizational, occupational, and cultural issues. *Journal of Emergency Management*, 17(1), 8.
- Tveiten, C. K., Albrechtsen, E., Wærø, I., & Wahl, A. M. (2012). Building resilience into emergency management. *Safety Science*, 50(10), 1960–1966.
<https://doi.org/10.1016/j.ssci.2012.03.001>
- Tyler, M. S. J., & Sadiq, P. A.-A. (2019). The essential skill set of a resilient emergency manager. *Journal of Emergency Management*, 17(1), 35–43.
<https://doi.org/10.5055/jem.2019.0395>
- Urby, H., & McEntire, D. (2015). Field, discipline, and profession: Understanding three major labels of emergency management. *Journal of Emergency Management*, 13, 389–400.
<https://doi.org/10.5055/jem.2015.0250>
- Urgel, J. (2007). EQUIS accreditation: Value and benefits for international business schools. *Journal of Management Development*, 26(1), 73–83.
<https://doi.org/10.1108/02621710710721698>
- U.S. Department of Education (DOE). (2021). *Frequently asked questions regarding federal recognition for accrediting agencies*. <https://www2.ed.gov/admins/finaid/accred/faqs-accrediting-agencies.pdf>
- U.S. Census Bureau. (2021). *First 2020 Census Data Release Shows U.S. Resident Population of 331,449,281*. Retrieved September 9, 2021
(<https://www.census.gov/library/stories/2021/04/2020-census-data-release.html>).

- Vachette, A., King, D., & Cottrell, A. (2017). Bonding, bridging and linking social networks: A qualitative study of the emergency management of Cyclone Pam, Vanuatu. *Asia Pacific Viewpoint*, 58(3), 315–330. <https://doi.org/10.1111/apv.12150>
- Ward, P. S., & Shively, G. E. (2017). Disaster risk, social vulnerability, and economic development. *Disasters*, 41(2), 324–351. <https://doi.org/10.1111/disa.12199>
- Waugh, W. L., & Hy, R. J. (1990). *Handbook of Emergency Management: Programs and Policies Dealing with Major Hazards and Disasters*. Greenwood Publishing Group.
- Waugh, W. L., & Streib, G. (2006). Collaboration and leadership for effective emergency management. *Public Administration Review*, 66(s1), 131–140. <https://doi.org/10.1111/j.1540-6210.2006.00673.x>
- Wolensky, R. P., & Wolensky, K. C. (1990). Local government's problem with disaster management: A literature review and structural analysis. *Policy Studies Review*, 9(4), 703–725. <https://doi.org/10.1111/j.1541-1338.1990.tb01074.x>
- Yeager, V. A., Ferdinand, A. O., Beitsch, L. M., & Menachemi, N. (2015). Local public health department characteristics associated with likelihood to participate in national accreditation. *American Journal of Public Health*, 105(8), 1653–1659. <https://doi.org/10.2105/AJPH.2014.302503>
- Yin, R. K. (2011). *Qualitative research from start to finish*. Guilford Press.
- Yunker, J. A. (2000). Doing things the hard way—Problems with mission-linked AACSB accreditation standards and suggestions for improvement. *Journal of Education for Business*, 75(6), 348. <https://doi.org/10.1080/08832320009599039>

Zammuto, R. F. (2008). Accreditation and the globalization of business. *Academy of Management Learning & Education*, 7(2), 256–268.

<https://doi.org/10.5465/AMLE.2008.32712623>

Zapata-Vanegas, M. A., & Saturno-Hernández, P. J. (2020). Contextual factors favouring success in the accreditation process in Colombian hospitals: A nationwide observational study. *BMC Health Services Research*, 20(1), 772. <https://doi.org/10.1186/s12913-020-05582-y>

APPENDIX A: EMAP ACCREDITED PROGRAMS

State Programs (n=36)

State of Alabama
State of Arizona,
State of Arkansas
State of California
State of Colorado
State of Connecticut
State of Delaware
State of Florida
State of Georgia
State of Idaho
State of Illinois
State of Iowa
State of Kansas
State of Louisiana,
State of Maryland
Commonwealth of Massachusetts
State of Michigan
State of Mississippi
State of Missouri
State of Nebraska
State of Nevada
State of New Jersey
State of New York
State of North Carolina
State of North Dakota
State of Ohio
State of Oklahoma
Commonwealth of Pennsylvania
State of Rhode Island
State of South Carolina
State of Tennessee
State of Utah
State of Vermont
Commonwealth of Virginia
State of Washington

State of Wisconsin

Tribal Programs (n=1)

Choctaw Nation of Oklahoma

Local Programs (by State) (n = 43)

District of Columbia
County of San Diego, California
City of Colorado Springs, Colorado
Brevard County, Florida
Broward County, Florida
Charlotte County, Florida
City of Fort Lauderdale, Florida
Indian River County, Florida
Hillsborough County, Florida
City of Jacksonville/Duval County, Florida
Marion County, Florida
Miami-Dade County, Florida
Osceola County, Florida
City of Orlando, Florida
Palm Beach County, Florida
Seminole County, Florida
City of St. Petersburg, Florida
Sumter County, Florida
Volusia County, Florida
Gwinnett County, Georgia
East Baton Rouge Parish, Louisiana
Saint Charles Parish, Louisiana
City of Boston, Massachusetts
City of St. Paul, Minnesota
Ramsey County, Minnesota
Springfield-Greene County, Missouri
City of Henderson, Nevada
Washoe County, Nevada
Guilford County, North Carolina
Cuyahoga County, Ohio
Chester County, Pennsylvania

Local Programs (continued)

City of Philadelphia, Pennsylvania
City of Providence, Rhode Island
Charleston County, South Carolina
Shelby County, Tennessee
Williamson County, Tennessee
City of Arlington, Texas
City of Austin, Texas
City of Dallas, Texas
City/County El Paso, Texas
King County, Washington
Pierce County, Washington
City of Seattle, Washington

Federal Programs (n=20)

Centers for Disease Control and Prevention
FEMA Region VI
Huntington District, US Army Core of Engineers (USACE)
Kansas City District, USACE
Louisville District, USACE
Memphis District, USACE
Mobile District, USACE
Mississippi Valley Division, USACE
Nashville District, USACE
Northwest Division, USACE
New Orleans District, USACE
Omaha District, USACE
Philadelphia District, USACE
Rock Island District, USACE
Saint Louis District, USACE
Saint Paul District, USACE
Seattle District, USACE
Vicksburg District, USACE
Walla Walla District, USACE
Wilmington District, USACE

Private Sector Programs (n=3)

Amtrak

DC Water & Sewer Authority
Greater Orlando Aviation Authority

Institutions of Higher Ed. Programs (n=6)

Florida International University
Michigan State University
Tufts University
University of Alabama, Alabama
University of Central Florida, Florida
Washington University in St. Louis, Missouri

International Programs (n=3)

Government of the British Virgin Islands
King Faisal Specialist Hospital and Research Center
Ottawa, Ontario

Source: EMAP Who Is Accredited:
<https://emap.org/index.php/what-is-emap/who-is-accredited>

APPENDIX B: EMAP STANDARD

CHAPTER 3: Emergency Management Program (ANSI/EMAP, 2019)

Overview

An Accredited Emergency Management Program is characterized by visible leadership support, and endorsement and engagement by stakeholders.

3.1: Program Administration and Evaluation

3.1.1 The Emergency Management Program has a multi-year Strategic Plan, developed with input from stakeholders, that includes the following:

- (1) vision statement for emergency management;
- (2) mission, goals, objectives, and milestones for the Emergency Management Program;
- (3) a method for Plan implementation; and
- (4) a maintenance process, which includes a method and schedule for evaluation and revision.

3.2: Coordination

3.2.1 The jurisdiction has a designated emergency management agency, department, or office established and empowered with the authority to administer the Emergency Management Program.

3.2.2 The jurisdiction has a designated individual empowered with the authority to execute the Emergency Management Program.

3.3: Advisory Committee

3.3.1 The Emergency Management Program has a process utilizing one or more committees that provides for coordinated input by stakeholders in the preparation, implementation, evaluation, and revision of the Program.

3.3.2 The advisory committee(s) meets with a frequency determined by the Emergency Management Program to provide for regular input.

3.4: Administration and Finance

3.4.1 The Emergency Management Program has administrative and financial procedures for use before, during, and after an emergency/disaster.

3.4.2 The administrative and financial procedures provide the ability to request, receive, manage, and apply funds in emergency situations for the delivery of assistance and cost recovery.

3.4.3 The Emergency Management Program has a maintenance process for the procedures identified in Standards 3.4.1 and 3.4.2, which includes a method and schedule for evaluation and revision.

3.5: Laws and Authorities

3.5.1 The Emergency Management Program's authorities and responsibilities are established and executed in accordance with statutes, regulations, directives, or policies.

3.5.2 The Emergency Management Program has a process for identifying and addressing proposed legislative and regulatory changes.

APPENDIX C: INVITATION EMAIL

NOTE: This invitation was sent by email. It looked as follows:

North Dakota State University
Department of Emergency Management and Disaster Science
Department 2351
P.O. Box 6050
Fargo, ND 58108-6050

Dear [Potential Participant Name],

Your help is necessary for a study exploring accreditation by the Emergency Management Accreditation Program (EMAP) among emergency management programs from cities with a population over 300,000. You are being contacted because you have been identified as an emergency manager in a city emergency management program.

To date, there has been minimal research regarding EMAP accreditation and few emergency management programs from cities are currently accredited. This lack of research exists despite EMAP being recognized by International Association of Emergency Managers (IAEM), International City/County Management Association (ICMA), National Association of Counties (NACo), and National Emergency Management Association (NEMA). This study desires to understand what facilitates or hinders accreditation and may provide insights for local emergency management programs in areas of importance and to support accreditation initiatives.

I am eager to learn more about your perspective of EMAP and the accreditation process. I hope you will be willing to share your insights with me for inclusion in my research. If you are willing, I would like to arrange a time and date that are convenient for you to set up a virtual meeting. The results of this study can inform and solidify the future emergency management accreditation and performance standards which will shape emergency management for many years to come.

Please look at the information sheet attached and let me know if you have any questions. Please contact me at marcelo.ferreira@ndsu.edu or (302) 373-3190. You may also contact my thesis advisor, Dr. Jessica Jensen, with any questions at ja.jensen@ndsu.edu or (701) 231-5886. I look forward to hearing from you to schedule a virtual interview and want to thank you for your time in reviewing this request.

Sincerely,

Marcelo Ferreira, MA, CEM, PMP

APPENDIX D: INFORMATION SHEET

NDSU

North Dakota State University

Department of Emergency Management and Disaster Science
North Dakota State University
Department 2351
P.O. Box 6050
Fargo, ND 58108-6050

Pursuit and Achievement of Emergency Management Accreditation

Dear [Potential Participant Name]:

My name is Marcelo Ferreira. I am a graduate student in Emergency Management and Disaster Science at North Dakota State University (NDSU), and I am conducting a research project to better understand what facilitates or hinders achievement of EMAP. It is our hope, that with this research, we will learn more about EMAP Accreditation.

Because you are an emergency manager from a city with a population over 300,000, you are invited to participate in this research project.

You may find it interesting and thought provoking to participate in the interview. If, however, you feel uncomfortable in any way during the interview session, you have the right to decline to answer any question(s), or to end the interview.

It should take about 0.5 to 1.5 hours to complete the interview. I will ask you about your background, emergency management program, and areas related to EMAP accreditation. The interview will be audio recorded. We will keep private all research records that identify you. When the interview is transcribed, you will be given a pseudonym, and other potentially identifying information will be left out of the transcripts. In any written documents (including publications) regarding the study, only the pseudonym will be used.

Audio files will be stored in a password protected file on a computer that is only accessible to the principal investigator and co-investigators. Electronic copies of the interview transcripts will be saved and protected in the same fashion. After the data has been analyzed, the audio recordings will be deleted.

If you have any questions about the study, please contact me at Marcelo Ferreira, marcelo.ferreira@ndsu.edu, 302-373-3190, or contact my advisor at Jessica Jensen, ja.jensen@ndsu.edu, 701-231-5595.

You have rights as a research participant. If you have questions about your rights or complaints about this research, you may talk to the researcher or contact the NDSU Human Research Protection Program at 701.231.8995, toll-free at 1-855-800-6717, by email at

ndsuirb@ndsuedu, or by mail at: NDSU HRPP Office, NDSU Dept. 4000, P.O. Box 6050, Fargo, ND 58108-6050.

Thank you for your taking part in this research. If you wish to receive a copy of the results, please email Marcelo Ferreira at marcelo.ferreira@ndsuedu.

APPENDIX E. INSTITUTIONAL REVIEW BOARD APPROVAL



11/09/2021

Dr. Jessica Anne Jensen
Emergency Management

Re: IRB Determination of Exempt Human Subjects Research:
Protocol #IRB0003991, "Pursuit and Achievement of Emergency Management Accreditation"

NDSU Co-investigator(s) and research team:

- Jessica Anne Jensen
- Marcelo Mantovani Ferreira

Approval Date: 11/09/2021

Expiration Date: 11/08/2024

Study site(s): Research will be conducted in Fargo, ND and will use Zoom to conduct interviews with participants from across the United States.

Funding Agency:

The above referenced human subjects research project has been determined exempt (category 2) in accordance with federal regulations (Code of Federal Regulations, Title 45, Part 46, *Protection of Human Subjects*).

Please also note the following:

- The study must be conducted as described in the approved protocol.
- Changes to this protocol must be approved prior to initiating, unless the changes are necessary to eliminate an immediate hazard to subjects.
- Promptly report adverse events, unanticipated problems involving risks to subjects or others, or protocol deviations related to this project.

Thank you for your cooperation with NDSU IRB procedures. Best wishes for a successful study.

NDSU has an approved FederalWide Assurance with the Department of Health and Human Services: FWA00002439.

RESEARCH INTEGRITY AND COMPLIANCE

NDSU Dept 4000 | PO Box 6050 | Fargo ND 58108-6050 | nds.research@nds.edu

Shipping Address: Research 1, 1735 NDSU Research Park Drive, Fargo ND 58102

NDSU is an EO/AA university.

APPENDIX F. INTERVIEW GUIDE – EMAP ACCREDITED PROGRAMS

Introductory script: Before we begin, I wanted to make sure that you are comfortable with a few things related to this project. Are you comfortable with the fact that you have been selected for participation in this research due to your role as a volunteer; that your participation in this project is voluntary; that you can let me know if you want to stop participating anytime; that while your confidentiality is not guaranteed, we will not use your name in the final write-up of the data collected for this research; and, that our conversation is going to be recorded? Do you have any questions before we begin?

1. Let's start off with talking a bit about your background. Tell me about yourself and your experience in emergency management.

Information Sought:

- Description of **background, education, and experience.**
2. Tell me about your local emergency management program.

Information Sought:

- **Size** of emergency management program (i.e., staff size).
- **Placement** of the emergency management program in the jurisdictional structure
 - (i.e., where positioned within the department, what influence the leaders have over the program, whether Fire priorities influencing emergency management program, what is the support and direction from Mayor)
- **Opportunity** – describe the general history of the program? Have there been any changes in the program recently?
 - *Recent opportunities opened which allow for pursuit or achievement of accreditation.*
 - **Change in conditions**
 - **Perceptions from EM leadership**
 - **Structural mechanisms** (laws, ordinances, grants).
 - **Conditions to evolve** (ability to change from what program is historically understood to be)
- **Priorities** for the emergency management program and how time and labor are allocated.
- **Structure** of the emergency management program, how daily tasks are determined, and what is used to determine the work for the program (*i.e., Emergency Management Standard, NFPA 1600, municipal codes and ordinances, strategic planning from the city*).
- **Concurrently managed priorities** – the management of the daily operations, emergency/disaster incidents, and accreditation efforts, if necessary. Handling of structural mechanism, daily operations, and incident response/recovery within the office of emergency management (i.e., bandwidth to support, shifting of prioritizing, reprioritizing).
- **Funding** – what sources of funding are used in the program (general funding and/or grant funding, such as EMPG and UASI).

- **Phases** the office is involved in (Preparedness, Response, Recovery, Mitigation)
 - **Active engagement from stakeholders** of the emergency management program with community and stakeholders (internal, external). How much of the work could be accomplished without stakeholder involvement?
3. What is your perspective on the Emergency Management Accreditation Program (EMAP)?

Information Sought:

- How first learned about EMAP and when, relative to when they began their position.
 - Whether perspectives are **positive, negative, or indifferent** towards EMAP.
 - **Level of endorsement/advocacy/buy-in** to EMAP – *fierce advocate, good to have, waste of time.*
 - **Awareness** of the support for the Emergency Management Standard and EMAP by **leading organizations associated** with emergency management.
 - **Perception of the leading organizations** associated with emergency management.
 - Knowledge about **what accreditation entails**.
 - Whether EMAP accreditation has been **pursued** by the program.
 - Whether the individual or anyone in the office is an **assessor for EMAP** or have taken **trainings from EMAP**.
4. Tell me the story of how your program came to seek accreditation [Asked only to those who suggest they sought it in Prompt 3].

Information Sought:

- When the program **first pursued** accreditation.
- **Timing** of when decided to pursue.
 - **Leadership buy-in** timeline.
 - **Added Investment for Accreditation**, such as FEMA Baseline Assessment funding or general funding.
 - **Stakeholder involvement** discussions and timeline.
- **Process of pursuit**, including who was involved, and the experience of pursuing.
- Perception of **meaningfulness and impact** of pursuit of accreditation.
 - **Site visit** meaningfulness, value added, experience.
 - **Changes** made to the program during pursuit of accreditation.
- **Involvement of accrediting body** during the pursuit of accreditation.
- Explanations for **why pursued**:
 - Influence of macrosystems, if any (i.e., **governance board or committee, leadership, culture, resources, administrative systems, quality performance and improvement**).
 - Influence of microsystems, if any (i.e., **design & execution, individual characteristics, relationship & engagement**).

- Influence of surrounding context, if any (e.g., **size of jurisdiction, community characteristics, community buy-in, disaster experience**).
 - Influence of **accrediting body**, if any.
5. Now, tell me the story of how your program achieved accreditation [Asked of those who represent programs on the list of accredited programs in Appendix A].

Information Sought:

- **Timing** of achievement relative to decision to pursue and process of pursuit.
 - **Extent to which achieved immediately**, or remediation of issues required first.
 - Importance of **funding sources** to achieve accreditation (FEMA EMBAG).
 - Explanations of what **led to achievement**:
 - i. Influence of macrosystems, if any (i.e., **governance board or committee, leadership, culture, resources, administrative systems, quality performance and improvement**).
 - ii. Influence of microsystems, if any (i.e., **design & execution, individual characteristics, relationship & engagement**).
 - iii. Influence of surrounding context, if any (**size of jurisdiction, community characteristics, community buy-in, disaster experience**).
 - iv. Influence of **accrediting body**, if any.
 - Whether they were **involved in all accreditations and reaccreditations**, if not, which.
6. Is there anything else you think I should know that we haven't already discussed, about the EMAP standards or otherwise relevant to this study?
7. Do you know of any other local emergency managers who may have a perspective to share on the EMAP accreditation process?
8. Do you have any questions for me?
9. May I contact you if I have any follow up questions?

STOP RECORDING

- Thank you so much for participating in the study.

For Interviewer Only:	
Date:	Start Time: End Time:
Location:	
Participant Name:	Participant Code:
Participant E-mail:	Participant Phone Number:

APPENDIX G. INTERVIEW GUIDE – EMAP NONACCREDITED PROGRAMS

Introductory script: Before we begin, I wanted to make sure that you are comfortable with a few things related to this project. Are you comfortable with the fact that you have been selected for participation in this research due to your role as a volunteer; that your participation in this project is voluntary; that you can let me know if you want to stop participating anytime; that while your confidentiality is not guaranteed, we will not use your name in the final write-up of the data collected for this research; and, that our conversation is going to be recorded? Do you have any questions before we begin?

1. Let's start off with talking a bit about your background. Tell me about yourself and your experience in emergency management.

Information Sought:

- Description of **background, education, and experience.**
2. Tell me about your local emergency management program.

Information Sought:

- **Size** of emergency management program (i.e., staff size).
 - **Placement** of the emergency management program in the jurisdictional structure
 - (i.e., where positioned within the department, what influence the leaders have over the program, whether Fire priorities influencing emergency management program, what is the support and direction from Mayor)
 - **Funding** – what sources of funding are used in the program (*general funding and/or grant funding, such as EMPG and UASI*).
 - **Active engagement from stakeholders** of the emergency management program with community and stakeholders (internal, external). How much of the work could be accomplished without stakeholder involvement?
3. Now, can you tell me a bit about the priorities and tasks for your program and how you determine what those are?
 - **Priorities** for the emergency management program and how time and labor are allocated.
 - **Structural mechanisms shaping the program**, how daily tasks are determined, and what is used to determine the work for the program (*i.e., Emergency Management Standard, NFPA 1600, municipal codes and ordinances, strategic planning from the city*).
 - **Phases** the office is involved in (Preparedness, Response, Recovery, Mitigation)
 - **Concurrently managed priorities** – the management of the daily operations, emergency/disaster incidents, and accreditation efforts, if necessary. Handling of structural mechanism, daily operations, and incident response/recovery within the office of emergency management (i.e., bandwidth to support, shifting of prioritizing, reprioritizing).

4. You've just told me about what your program is focused on and why. I want to shift slightly now and explore the context for your program.

Explicit follow up questions and probes:

- Tell me about the general history of your program (to the extent you know).
 - What's it like to work in your program right now day to day?
 - Tell me about any recent changes to your program lately, like changes to budget, responsibilities, staffing, disaster events, etc.
 - Pretend for a moment that you are your immediate supervisor, what do you think that person thinks emergency management is and does?
 - How about your mayor/city manager?
5. Transition now to EMAP, tell me about how and when you first learned about EMAP.
 6. To what extent do you think you know a lot about EMAP?

Information Sought:

- How much they know about the actual standards
 - How familiar they are with the process
 - How familiar they are with any resources to support accreditation (*e.g., EMBAG, webinars, training*)
 - How familiar they are with the organization
7. How do you feel about EMAP?

Information Sought:

Whether perspectives are **positive**, **negative**, or **indifferent** towards EMAP. **Level of endorsement/advocacy/buy-in** to EMAP – *fierce advocate, good to have, waste of time.*

- If **positive** about EMAP
 - i. Reasons for perception (*e.g., standard, benchmark, validation*)
 - If **negative** about EMAP
 - i. Prior engagements with EMAP?
 - ii. Reasons for perception (*e.g., cost, assessors, time*).
 - iii. Considering other forms of certifications or accreditation?
8. To what extent have you given thought to pursuing EMAP accreditation and why?

Information Sought:

- Can you give me an example of something you're working on? Describe something you are trying to make progress on?
- Their rationale for why EMAP has not been pursued. (*e.g., time, cost, other priorities*)
- What would have to be in place for EMAP to be pursued?
- Whether any effort has been taken to pursue EMAP.

9. (IF DID NOT NATURALLY ANSWER), If you were to go to your agency/department leadership and ask permission to initiate the accreditation process, what do you anticipate they would say and why?
10. (IF DID NOT NATURALLY ANSWER), Setting aside your perceptions of your immediate leadership, how about at that next level up? What do you think your Mayor/City Manager would say if you asked their permission to initiate the accreditation process today and why?
11. Now, tell me the story of how your program achieved accreditation [Asked of those who represent programs on the list of accredited programs in Appendix A].

Information Sought:

- **Timing** of achievement relative to decision to pursue and process of pursuit.
 - **Extent to which achieved immediately**, or remediation of issues required first.
 - Importance of **funding sources** to achieve accreditation (FEMA EMBAG).
 - Explanations of what **led to achievement**:
 - i. Influence of macrosystems, if any (i.e., **governance board or committee, leadership, culture, resources, administrative systems, quality performance and improvement**).
 - ii. Influence of microsystems, if any (i.e., **design & execution, individual characteristics, relationship & engagement**).
 - iii. Influence of surrounding context, if any (**size of jurisdiction, community characteristics, community buy-in, disaster experience**).
 - iv. Influence of **accrediting body**, if any.
 - Whether they were **involved in all accreditations and reaccreditations**, if not, which.
12. Is there anything else you think I should know that we haven't already discussed, about the EMAP standards or otherwise relevant to this study?
 13. Do you know of any other local emergency managers who may have a perspective to share on the EMAP accreditation process?
 14. Do you have any questions for me?
 15. May I contact you if I have any follow up questions?

STOP RECORDING

- Thank you so much for participating in the study.

For Interviewer Only:	
Date:	Start Time:
	End Time:
Location:	
Participant Name:	Participant Code:
Participant E-mail:	Participant Phone Number:

APPENDIX H. EMAP FEES (EMAP, 2020a)

EMAP Fees

Subscription Fees

Valid for one (1) calendar year: \$450 USD

Renewals paid thirty (30) business days or more prior to the EMAP Subscription expiration date are discounted 5%.

The EMAP Subscription is applicable for an entire jurisdiction or agency. Organizations paying for multiple EMAP Subscriptions such as a state paying for EMAP Subscriptions for their counties qualify for discounts based on the tiered rates below:

Number of Subscriptions	Subscriptions Fee
1	\$450 USD
2-25	\$427.50 USD (5% discount)
26-50	\$405 USD (10% discount)
51-100	\$382.50 USD (15% discount)
101 and over	\$360 USD (20% discount)

Subscription Delinquent Accounts Policy

Thirty (30) business days after the EMAP Subscription expires, delinquent accounts are frozen. Access to the EMAP Program Assessment Tool and full access to the EMAP website is denied. Once the EMAP Subscription has expired, the Emergency Management Program will be required to purchase the EMAP Subscription again without the discounted rate.

Webinar Subscription Fees

Valid for one (1) calendar year: \$500 USD

The EMAP Webinar Subscription is valid for monthly webinars that are designed to focus on the practical experiences of Accredited Emergency Management Programs and the real-world application of Standards.

- Subscribed Emergency Management Programs: \$0 – the monthly webinars are part of the EMAP Subscription.
- Unsubscribed Emergency Management Programs: \$25 USD per webinar or \$250 USD for an EMAP Webinar Subscription good for one (1) calendar year.
- Contractors & Consultants: \$50 USD per webinar or \$500 USD for an EMAP Webinar Subscription good for one (1) calendar year.

Training Fees

To host either the *Emergency Management Standard Training* and/or the *Training & Standards Orientation Workshop*, payment of the appropriate *Training Fee* below and the travel costs of the

EMAP Training Coordinator, the EMAP Trainer, and/or the EMAP Staff Liaison to conduct the training will be invoiced. The primary travel costs associated with the trainings include airfare or mileage, ground transportation, hotel accommodations, and federal per diem rates for domestic trainings and United States State Department per diem rates for international trainings.

Host Emergency Management Standard Training	\$2,750 USD
Training & Standard Orientation Workshop	\$4,000 USD

Payment of the training must be received thirty (30) business days prior to the start of the Host *Emergency Management Standard* Training or the Training & Standard Orientation Workshop. If payment is not received, then the Host Training or Training & Standard Orientation Workshop will be cancelled.

Application Fees

EMAP Pre-Assessment Fees

The EMAP Pre-Assessment is a service, provided by EMAP, that allows an Applicant Emergency Management Program the opportunity to have three (3) or four (4) Standard Areas assessed prior to the Applicant Emergency Management Program’s on-site assessment.

Pre-Assessment (3 Standard Areas)	\$1,000 USD
Pre-Assessment (4 Standard Areas)	\$1,500 USD

Application for Assessment Fee

The Application for Assessment Fee is paid by the Applicant Emergency Management Program when it submits the *Application for Assessment* to EMAP to start the assessment and accreditation effort.

Application for Assessment Fee	\$7,500 USD
--------------------------------	-------------

Consecutive Accreditation Application for Assessment Fees

The *Consecutive Accreditation Application for Assessment Fee* is paid when an Accredited Emergency Management Programs meets the [eligibility requirements](#), as determined by EMAP.

Consecutive Accreditation Application for Assessment Fee	\$5,500 USD
--	-------------

Conditional Assessment Fees

A Conditionally Accredited Emergency Management Program is responsible for paying the *Conditional Assessment Fees* associated with either a remote conditional assessment or a conditional on-site assessment.

Remote Conditional Assessment (<5 Standards)	\$1,500 USD
Conditional On-Site Assessment (>6 Standards)	\$3,000 USD

Assessment Fees

The Applicant Emergency Management Program pays for the travel costs associated with the pre-assessment, on-site assessment, and/or conditional on-site assessment. Travel costs associated with the pre-assessment, on-site assessment, and/or conditional on-site assessment includes airfare and/or mileage, ground transportation, hotel accommodations, and federal per diem rates for domestic assessments and the United States State Department per diem rates for international assessments, for each member of the assessment team. The

pre-assessment, on-site assessment, and/or conditional on-site assessment fees need to be paid thirty (30) days in advance of the pre-assessment, on-site assessment, and/or conditional on-site assessment.

Accreditation Fees

Applicant Emergency Management Programs are responsible for paying the appropriate Accreditation Fee thirty (30) days before the on-site assessment.

State & Territorial Accreditation Fees

The State & Territorial Accreditation Fees are based on population.

Up to 2,000,000	\$4,500 USD
2,000,0001 to 6,000,000	\$6,000 USD
6,000,001+	\$7,500 USD

Local Accreditation Fees

The Local Accreditation Fees are based on population and are applicable to domestic and international tribes, municipalities, counties, parishes, and boroughs. The *Local Accreditation Fees* are based on population.

Up to 50,000	\$2,000 USD
50,001 to 500,000	\$3,500 USD
500,001 to 2,000,000	\$4,500 USD
2,000,001+	\$6,000 USD

Institutions of Higher Education Accreditation Fees

The Institutions of Higher Education Accreditation Fees are based on the college or university classification and is applicable to domestic and international, private and public, colleges and universities.

Baccalaureate & Associate's Colleges	\$4,500 USD
Master's Universities	\$6,000 USD
Doctoral Universities	\$7,500 USD

Assessment and Accreditation Fees for Federal Agencies

Federal agencies pay a flat rate cost for the entire EMAP Accreditation Process. The flat rate includes all of the steps of the EMAP Accreditation Process and the following services:

1. EMAP Subscription;
2. Training & Standard Orientation Workshop; and
3. EMAP Staff Liaison technical assistance throughout the assessment and accreditation process.

Federal agencies have eighteen (18) months to complete the assessment and accreditation effort.

One (1) Program	\$50,000 USD
Multiple Program Discount	\$40,000 USD each location

**Please contact the EMAP Executive Director for information on the federal agency assessment accreditation process and associated fees.

Assessment and Accreditation Fees for Atypical Emergency Management Program (Private Sector Agencies)

Atypical Emergency Management Programs include, but are not limited to, hospitals and health care systems, air and ground transportation and transit companies (including transportation and port authorities), oil companies, utility companies (including power authorities), entertainment companies, etc., and pay a flat rate cost for the entire EMAP Accreditation Process. The flat rate includes all of the steps of the EMAP Accreditation Process and the following services:

1. EMAP Subscription;
2. Training & Standard Orientation Workshop;
3. EMAP Staff Liaison technical assistance throughout the assessment and accreditation process; and
4. After action review and discussion.

Atypical Emergency Management Programs have eighteen (18) months to complete the EMAP Accreditation Process.

Within the Continental United States	\$50,000 USD
Outside of the Continental United States	\$75,000 USD

**Please contact the EMAP Assistant Director for information on the assessment and accreditation process for atypical programs and the associated fees.

Payment Options

In order to ease the costs associated with the EMAP Accreditation, EMAP has developed various payment plans to assist an Emergency Management Program with the costs associated with the on-site assessment. EMAP provides payment plans catered to the needs of an Emergency Management Program and provides estimates to assist in budget planning. Please contact EMAP at emap@emap.org to learn more about these options.

Appeals Fee

If an Emergency Management Program chooses to appeal an EMAP Accreditation decision, a nonrefundable Appeals Fee of \$500 USD will be invoiced to the Appellant Emergency Management Program.

All fees are nonrefundable.