

Disclaimer

This document will help you prepare your answers, should www.escardio.org/accreditation you wish to apply for EAPC Centre Accreditation. Please note that returning this document to the ESC Certification Office will **not** be considered as an official application

General information (common to all)

Domains	Questions	Additional info
General information	Name of the centre/department/outpatient clinic (further referred to as centre) Year of establishment of the centre City Country Website E-mail Phone number Please indicate the type of the centre Please indicate if the centre achieved any previous accreditation or certification in the field Applicant Name, Firstname Applicant position Applicant E-mail Applicant Phone number Please describe the centre, facilities, expertise of the centre and care provided (100 to 150 words max) Please confirm that your centre employs at least one senior staff member who is an EAPC Silver or Gold member	
Centre requirements procedures are organized in an adequate way	Please confirm if: Your centre has a strategic plan, not more than 5 years old (Including future perspectives, objectives, care programmes, patient safety, enhancement of quality of care) Your centre keeps an annual evaluation report, to monitor service delivery and outcomes Your centre has organisational team meetings on a monthly basis - which are documented Your centre has a protocol handling the complaints, and list of complaints Your centre has a protocol handling the adverse events, and list of adverse events	yes/no, if no motivation needed yes/no, if no motivation needed yes/no, if no motivation needed yes/no, if no motivation needed
Billing information	Address City Country VAT number Purchase order number	

Cardiovascular risk management and prevention

Domains	Indicators / Questions	Answer possibilities	More information	
Required facilities (adequate and when necessary updated)	Your centre has a dedicated consultation and counseling area	yes/no, if no motivation needed		
	Your centre has electronic patient files	yes/no, if no motivation needed		
	Your centre has a well calibrated device to measure blood pressure, a 12 lead ECG device and a blood pressure holter monitoring device	yes/no, if yes provide names of the devices, if no motivation needed		
	Describe the additional medical equipment (e.g. devices) your centre has to be able to provide adequate care in risk management and prevention			
	Your centre has a well established referral route to centres providing specialized assessment devices and intensive management of risk factors (i.e. cardiac rehabilitation)			
	Your centre has a list of medical equipment in use including details on maintenance (if necessary)	yes/no, if no motivation needed	Documents to support answer will be required	
	Staff requirements (trained and still competent)	Confirm if your centre has a multidisciplinary team consisting of (multiple choice possible)	Tick box list Cardiologist, Physiotherapist, Nurse, Psychologist, Dietician, general practitioner, Pharmacist, Exercise physiologist, Occupational therapist, consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon), social worker	
		Confirm which professions are not part of your team but are available on referral (multiple choice possible)	Tick box list Cardiologist, Physiotherapist, Nurse, Psychologist, Dietician, general practitioner, Pharmacist, Exercise physiologist, Occupational therapist, consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon), social worker	
		Please confirm that all professionals have a written employment/agreement contract	yes/no, if no motivation needed	
		Please confirm that for every profession within your clinic an updated job description is available	yes/no, if no motivation needed	
Please confirm that 90% of the staff completed specialization course or attended a congress/symposia in the field of cardiovascular risk management and prevention within the last 3 years		yes/no, if no motivation needed		
Please confirm that all professionals directly involved in patient care possess a valid (less than 4 years old) certificate of cardio-pulmonary resuscitation training (CPR)		yes/no, if no motivation needed		
Care requirements (according to most recent guidelines and protocols are updated when guidelines are updated)		Please confirm if:		
		Spouses and partners of patients are invited to participate in the education and counselling sessions	yes/no, if no motivation needed	
		Your centre provides risk assessment using a validated risk calculator	yes/no, if yes provide the name of the risk calculator, if no motivation needed	
		Your centre has a structural pathway system for further imaging or functional testings (on the basis of the risk scores)	yes/no, if no motivation needed	Documents to support answer will be required
	Your centre provides physical activity counselling	yes/no, if no motivation needed		
	Your centre provides prescription of exercise training	yes/no, if no motivation needed		
	Your centre provides weight control counselling	yes/no, if no motivation needed		
	Your centre provides diet/nutritional counselling	yes/no, if no motivation needed		
	Your centre provides lipid management	yes/no, if no motivation needed		
	Your centre provides blood pressure (BP) monitoring and management	yes/no, if no motivation needed		
Your centre provides smoking cessation counselling	yes/no, if no motivation needed			
Your centre encourages limitation of alcohol consumption	yes/no, if no motivation needed			
Your centre provides flying and sports counselling with respect to cardiovascular risk and management (written and/or digital information)	yes/no, if no motivation needed			
Your centre provides occupational counselling	yes/no, if no motivation needed			
Your centre provides psychosocial counselling	yes/no, if no motivation needed			
Your centre provides sexual counselling with respect to cardiovascular risk and management	yes/no, if no motivation needed			
Your centre provides a plan at discharge in case the patient was admitted in your centre	yes/no, if no motivation needed			
Your centre has an emergency protocol	yes/no, if no motivation needed			
Protocols of care delivered are available and up to date (i.e. based on, and updated according to most recent national or international cardiovascular disease prevention guidelines)	if yes, provide the name of guideline by ticking the appropriate box: 2016 European Guidelines on cardiovascular disease prevention in clinical practice, other (please provide name). If no motivation needed	Documents to support answer will be required		
Your centre provides written and/or digital health behaviour and risk factor modification information	yes/no, if no motivation needed			
Your centre assesses patient satisfaction on a regular basis	yes/no, if no motivation needed. If yes, please describe how			
Final statement	Please state the number of patients treated for cardiovascular risk management and prevention in the previous year on site or in affiliated centres			
	Confirm that the answers above are reflecting the truth	yes/no	Documents to support answer will be required	

Secondary prevention and cardiac rehabilitation

Domains	Data to collect	Answer possibilities	More information (?)
Required facilities (adequate and when necessary updated)	Please confirm if:		
	If providing a cardiac rehabilitation programme, Please indicate which phase(s) the centre is supporting (multiple choice possible)	Drop down list: Phase 1, Phase 2, Phase 3	<p>Phase 1 – early intervention during the stay in acute hospital, including early mobilization and prevention of complications secondary to immobilization.</p> <p>Phase 2 – promotes and delivers preventive and rehabilitative services to patients following an index CVD event with the aim of clinical stabilization, risk stratification and promotion of long term intervention. It may be performed in in-patient as well as in out-patient settings.</p> <p>Phase 3 – long-term out-patient CR, which seeks to provide sustained delivery of preventive and rehabilitative services in the out-patient setting and/or in the community</p>
	Your centre has a dedicated consultation area, for one on one medical screening and psychological interventions	yes/no, if no motivation needed	
	Your centre has an education and counselling area for group interventions	yes/no, if no motivation needed	
	Your centre has electronic patient files	yes/no, if no motivation needed	
	Your centre has an investigation room (e.g. for echocardiography)	yes/no, if no motivation needed	
	Your centre has exercise testing facilities (laboratory/room)	yes/no, if no motivation needed	
	Your centre has a adequate and well ventilated exercise (training) room	yes/no, if no motivation needed	Space must meet the requirements for the activities and services and the unique needs of patients (i.e.the floor space should be approximately 4 square meters per patient)
	Your centre has a resting/dress room with separate toilets and shower facilities	yes/no, if no motivation needed	
	Your centre has lockers to safely store the patients' belongings while training	yes/no, if no motivation needed	
	Your centre has equipment for assessment of clinical status: sphygmomanometer, chemistry analysis, urine analysis, ECG (Sphygmomanometer and chemistry and urine analysis may be outsourced)	yes/no, if no motivation needed	
	Your centre has equipment (possibly via outsourcing) for assessment of left ventricular function: echocardiography, radionuclide left ventriculography, or angiographic left ventriculography, depending on circumstances and type of patients	yes/no, if no motivation needed	
	Your centre has equipment (possibly via outsourcing) for assessment of arrhythmias: ambulatory ECG Holter monitoring	yes/no, if no motivation needed	
	Your centre has equipment for assessment of functional capacity: graded exercise testing (treadmill/cycle), cardiopulmonary exercise testing, six minute walk test, shuttle walk, depending on circumstances and type of patients	yes/no, if no motivation needed	
	Your centre has equipment for assessment of psychosocial status : licensed tests and screening instruments (ideally computerized)	yes/no, if no motivation needed	

Your centre has equipment for conducting an exercise training programme: for aerobic and strength training	yes/no, if no motivation needed	Ideally the centres are equipped with the following: sphygmomanometer, electrocardiographic telemetry, exercise equipment (buckets, bricks, boxes, baskets, cases or free weights, weight training machines, treadmills, stationary cycles, arms ergometer). However, it is possible to conduct cardiac rehabilitation exercise programmes with little equipment and maintain the principles of best practice at low cost. The decision regarding equipment is partly secondary to the decision regarding the level of exercise training. High intensity exercise may be undertaken using similar equipment, but additional safety equipment is required.
Your centre has the means, on site, to summon assistance in case of emergency and has an (automated) external defibrillator in the exercise room to start life support	yes/no, if no motivation needed	
Emergency services are available within your centre or < 10 minutes away	yes/no, if no motivation needed	
Your centre has a list of medical equipment and devices in use including details on maintenance (if necessary)	yes/no, if no motivation needed	Documents to support answer will be required
Staff requirements (trained and still competent)		
Confirm if your centre has a programme director: any member of the team, with good organizational, management and interpersonal skills may have this role, to ensure proper organisation of the programme and that policies and procedures are consistent with evidence-based guidelines	yes/no, if no motivation needed	
Confirm if your centre has a medical director who has specialist cardiology training and is responsible for the oversight of programme policies and medical procedures. The medical director could have the role of programme director as well	yes/no, if no motivation needed	
Confirm if your centre has a multidisciplinary team consisting of (multiple choice possible)	Tick box list Cardiologist, Physiotherapist, Nurse, Psychologist, Dietician, General Practitioner, Pharmacist, Exercise physiologist, Occupational therapist, Consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon) , social worker.	
Confirm which professions are not part of your team but are available on referral (multiple choice possible)	Tick box list Cardiologist, Physiotherapist, Nurse, Psychologist, Dietician, General Practitioner, Pharmacist, Exercise physiologist, Occupational therapist, Consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon) , social worker.	
Please confirm that all professionals have a written employment/agreement contract	yes/no, if no motivation needed	
Please confirm that for every profession within your clinic an updated job description is available	yes/no, if no motivation needed	
Please confirm that the medical director of your clinic has attended a congress/symposia in the field of secondary prevention and/or cardiac rehabilitation, within the last 2 years, organized by recognized organisations such as the national cardiac societies	yes/no, if no motivation needed	
Please confirm that 90% of the staff completed a specialization course or attended a congress/symposia in the field of secondary prevention and/or cardiac rehabilitation, within the 3 years and organized by recognized organisations such as the national cardiac societies		
Please confirm that one of your staff members recently (actively) contributed to an relevant congress or peer-reviewed medical journal	yes/no, if yes provide type of contribution for which journal/congress	

Care requirements (according to most recent guidelines and protocols are updated when guidelines are updated)	Please confirm that all professionals directly involved in patient care possess a valid (less than 4 years old) certificate of cardio-pulmonary resuscitation training (CPR)	yes/no, if no motivation needed	
	Please confirm if:		
	Your centre has multidisciplinary team meetings at least every two weeks	yes/no, if no motivation needed	
	Spouses and partners of patients are invited to participate in health behaviour and risk factor modification education and counselling sessions	yes/no, if no motivation needed	
	Your centre offers CR to all priority groups (MI, PCI, CABG, HF)	yes/no, if no motivation needed	
	Your centre provides risk assessment	yes/no, if no motivation needed	
	Your centre provides patient assessment with medical control	yes/no, if no motivation needed	
	Your centre provides adherence to medication counselling	yes/no, if no motivation needed	
	Your centre provides physical activity counselling	yes/no, if no motivation needed	
	Your centre provides prescription of exercise training	yes/no, if no motivation needed	
	Your centre provides diet/nutritional counselling	yes/no, if no motivation needed	
	Your centre provides weight control management	yes/no, if no motivation needed	
	Your centre provides lipid management	yes/no, if no motivation needed	
	Your centre provides blood pressure (BP) monitoring and management	yes/no, if no motivation needed	
	Your centre provides smoking cessation counselling	yes/no, if no motivation needed	
	Your centre encourages limitation of alcohol consumption	yes/no, if no motivation needed	
	Your centre provides sexual counselling	yes/no, if no motivation needed	
	Your centre provides psychosocial management	yes/no, if no motivation needed	
	Your centre provides flying and sports counselling	yes/no, if no motivation needed	
	Your centre provides vocational support	yes/no, if no motivation needed	
	Your centre provides ECG monitoring when appropriate	yes/no, if no motivation needed	
	Your centre provides a plan at discharge and long-term approach, which contains a structured follow-up (i.e. coaching by phone, consults, mails and posts) and relevant contact information	yes/no, if no motivation needed	
	You centre provides a longterm approach regarding physical activity	yes/no, if no motivation needed	
	Your centre has an emergency protocol for all programmes	yes/no, if no motivation needed	
	Protocols of care delivered are available and up to date (i.e. adjusted to the most recently published version of the European Guidelines on cardiovascular disease prevention in clinical practice)	yes/no, if no motivation needed	Documents to support answer will be required
	Your centre provides written and/or digital health behaviour and risk factor modification information	yes/no, if no motivation needed	
	Your centre provides alternative programmes (supervised or self-delivered) such as: cardiac tele-rehabilitation, facilitated home-based training sessions, web-based training sessions, community based training...	yes/no, if no motivation needed. Which programmes do you provide?	
	Your centre has a system in place to identify and invite all patients with an indication for secondary prevention and CR (e.g. automatic referral)	How are patients referred to your centre? Please tick the appropriate boxes (roll down menu with possible referral options): referral by the treating cardiologist, referral by the rehabilitation physician, referral by the nurse, automatic referral, other.	
	Please specify how many eligible patients are invited to the programme	[%]	
	From the invited patients 50% started the programme	yes/no, if no motivation needed	
	Median waiting time from referral to start of CR for MI/PCI is within 14 days (except in case of medical contra indications)	yes/no, if no motivation needed	
	Median waiting time from referral to start of CR for CABG is within 28 days (except in case of medical contra indications)	yes/no, if no motivation needed	
	From the patient that started the programme 75% completed the indicated programme	yes/no, if no motivation needed	
	Median duration of CR programmes is 36 sessions (except in case of medical contra indications)	yes/no, if no motivation needed	
	>80% of core CR patients with a recorded assessment before starting CR programme	yes/no, if no motivation needed	
	>80% of core CR patients with a recorded assessment after starting CR programme	yes/no, if no motivation needed	
	Your centre assesses patient satisfaction on a regular basis	yes/no, if no motivation needed. If yes, please describe how	

Your centre has a database in which clinical outcomes (e.g. yes/no, if no motivation needed blood pressure, cholesterol) are entered on a regular basis (at least every 2 years) from all or a random sample of the patients

Please state the number of patients treated in the previous year on site or in affiliated centres

Final statement

Confirm that the answers above are reflecting the truth yes/no

Documents to support answer will be required

Sports Cardiology				
Domains	Data to collect	Answer possibilities	More information (?)	
Required facilities (adequate and when necessary updated)	Please confirm if:			
	Your centre has an investigation room	yes/no, if no motivation needed		
	Your centre has electronic patient files	yes/no, if no motivation needed		
	Your centre has a 12-lead ECG device	yes/no, if no motivation needed		
	Your centre has a transthoracic echocardiogram	yes/no, if no motivation needed		
	Your centre has exercise testing tools (e.g. exercise treadmill test or cycle ergometer)	yes/no, if no motivation needed		
	Your centre has equipment for assessment of arrhythmias: ambulatory ECG Holter 24-h monitoring	yes/no, if no motivation needed		
	Your centre has fitness assessments tools (e.g. cardiopulmonary exercise testing tool)	yes/no, if no motivation needed		
	Your centre has the following specialized assessment tools: cardiac magnetic resonance, CT scan, EP study, genetic counselling. If not available at the centre, there is an established referral route/access to the centres that can provide such services	yes/no, if no motivation needed		
	Your centre has a list of medical equipment (e.g. devices) in use including details on maintenance (if necessary)	yes/no, if no motivation needed		
	Your centre is accessible to disabled athletes	yes/no, if no motivation needed		
	Staff requirements (trained and still competent)	Confirm that your centre has a cardiologist with an interest in sports cardiology as evident by one of the following: 1. Working in the field of Sports Cardiology for ≥ 3 years, 2. Peer recognition at National/International level, 3. Contribution to research in the field	yes/no, if no motivation needed	
		Confirm if your centre has a multidisciplinary team consisting of (multiple choice possible)	Tick box list Cardiologist, Cardiac geneticist, Physiologists, Physiotherapist, Nurse, Psychologist, Dietician, general practitioner, Pharmacist, Exercise physiologist, Occupational therapist, genetic counsellors, consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon), social worker	
		Confirm which professions are not part of your team but are available on referral (multiple choice possible)	Tick box list Cardiologist, Cardiac geneticist, Physiologists, Physiotherapist, Nurse, Psychologist, Dietician, general practitioner, Pharmacist, Exercise physiologist, Occupational therapist, genetic counsellors, consultant professionals (i.e. internist, neurologist, diabetologist, cardiac surgeon), social worker	
Please confirm that all professionals have a written employment agreement (irrespective of the basis, e.g. permanent, visiting, consultancy)		yes/no, if no motivation needed		
Please confirm that for every profession within your clinic an updated job description is available		yes/no, if no motivation needed		
Please confirm that 90% of the staff professionals directly involved in patient care completed ≥ 7 CPD points (Course, congress, symposium, webinars, articles and activities suitable for self-assessed CPDs) in the field of sports cardiology within the last year		yes/no, if no motivation needed		
Please confirm that all professionals directly involved in patient care possess a valid (less than 4 years old) certificate of cardio-pulmonary resuscitation training (CPR)		yes/no, if no motivation needed		
Care requirements (according to most recent guidelines and protocols are updated when guidelines are updated)		Please confirm if:		
		Your centre provides cardiopulmonary exercise testing	yes/no, if no motivation needed	
		Your centre provides analysis of rhythm recording	yes/no, if no motivation needed	
	Your centre provides physical fitness assessments and evaluation	yes/no, if no motivation needed		

Your centre provides/supervises cardiac screening sessions yes/no, if no motivation needed

This includes: personal and family history taking; perform physical examination; interpret 12-lead ECG; interpret overall findings and formulate management plan; communicate results to the athlete; arrange appropriate further investigations/follow-up in case of cardiac abnormalities; return-to-play programme

Protocols of care delivered are available and up to date (i.e. adjusted to the most recently published literature on Sports Cardiology and cardiovascular disease prevention in clinical practice) yes/no, if no motivation needed

Please state the number of athletes treated in the previous year on site or in affiliated centres

Your centre assesses patient satisfaction on a regular basis yes/no, if no motivation needed. If yes, please describe how

Please state the number of screened athletes in the previous year

Confirm that the answers above are reflecting the truth yes/no

Final statement

Documents to support answer will be required