

NATIONAL EMERGENCY Number association

# EMERGENCY NUMBER PROFESSIONAL

CERTIFICATION EXAMINATION

APPLICATION HANDBOOK

## PURPOSE OF THIS CERTIFICATION APPLICATION **HANDBOOK**

The purpose of this handbook is to provide complete information about application requirements and procedures for the Emergency Number Professional (ENP) Certification Examination. Read this entire handbook carefully before filling out your application for the examination. You must adhere to all procedures and deadlines outlined in this handbook. If you have any questions about the Certification Examination or application process, contact NENA Headquarters at:

> **National Emergency Number Association NENA** Institute 1700 Diagonal Road, Suite 500 Alexandria, VA 22314 202-466-4911 • 202-618-6370 (fax)

This handbook should not be considered the sole source of information regarding the actual content of the ENP Certification Examination. Resources to help you study for the examination can be ordered through NENA, or you may want to review other outside sources depending on your own knowledge needs.

#### THE NATIONAL EMERGENCY NUMBER ASSOCIATION



NENA The National Emergency Number Association is a not-for-profit corporation whose goal is "One Nation - One Number." NENA's mission is to foster the technological advancement, availability and implementation of a universal emergency telephone number system. In carrying out its mission, NENA promotes research, planning, training and education. The protection of human life, the preservation of property, and the maintenance of general community security are among NENA's objectives.

#### THE NENA INSTITUTE

The NENA Institute is an affiliate of the National Emergency Number Association (NENA). This Institute was created by NENA with the purpose of developing and maintaining the professional standards of the ENP Program. To accomplish this purpose, the NENA Institute oversees the ENP Certification process, including:

- the establishment of minimal experience requirements for professional development
- the definition and updating of the ENP Body of Knowledge Content Outline
- the recognition and credentialing of individuals who have met the experience requirements and demonstrated mastery of the ENP body of knowledge
- the examination
- recertification

The NENA Institute is governed by a Board of Directors composed of individuals involved in the emergency number management field, who volunteer their time and effort to advance emergency number professionalism.

## PROFESSIONAL TESTING CORPORATION

The Emergency Number Professional Certification Program is sponsored by the National Emergency Number Association. NENA created the NENA Institute to administer the ENP Certification Program. The Certification Examination is administered for the NENA Institute by the Professional Testing Corporation (PTC), 1350 Broadway – 17th Floor, New York, NY 10018, (212) 356-0660.

#### **SECTION 1**

#### INTRODUCTION

#### PURPOSE OF CERTIFICATION

Certification is a tool of a professional association to establish the benchmarks of performance that will signify a broad-based competence in the professional field. By successfully completing this certification program, you will:

- demonstrate a mastery of the comprehensive knowledge base required for emergency number program management
- help raise industry standards and increase the respect and prestige of those involved in 9-1-1
- confirm your commitment to the 9-1-1 profession by showing you are a leader in public safety and pledging you will stay aware of current issues and developments in the field

#### **GOALS OF CERTIFICATION**

The NENA Executive Board first formed a Certification Committee in 1992 to explore the development of a certification program for individuals involved in 9-1-1 program management. After a thorough review of the certification process, the Executive Board approved the Committee's recommendation to go forward with the establishment of an Emergency Number Professional Certification Program. This recommendation included several goals:

- to establish the comprehensive body of knowledge for Emergency Number Professionals
- to promote a standard of competence for Emergency Number Professionals that will be recognized and accepted by the 9-1-1 profession, governmental agencies, the business community, and the general public
- to ensure an awareness of current issues and developments in the 9-1-1 profession
- to provide formal recognition of individuals for professional achievement
- to encourage professional growth and enhance the self-esteem of Emergency Number Professionals

Certification will be granted to those individuals who meet the eligibility requirements for admission to the examination outlined in this handbook and who successfully pass the examination.

#### USE OF EMERGENCY NUMBER PROFESSIONAL CERTIFICATION

Successfully completing the Emergency Number Professional Certification Program gives you the authority to use the official ENP designation on letterhead, business cards, and all forms of address. Furthermore, you will receive a handsome certificate attesting to your achievement as an Emergency Number Professional.

Participation in the ENP Certification Program is purely voluntary and certification is conferred by NENA solely for the purpose of achieving those goals stated in the above sections. The use of the ENP certification as a condition for employment or advancement is a choice to be made by individual organizations as deemed appropriate.

#### DENIAL AND REVOCATION OF CERTIFICATION

The Emergency Number Professional Certification will be denied or revoked for any of the following reasons:

- 1. Falsification of the Certification Application
- 2. Misrepresentation of certification status
- 3. Violation of examination procedures
- 4. Failure to pass the certification examination
- 5. Failure to meet recertification requirements

NENA has developed a procedure for reconsideration and appeal for candidates who have had certification denied or revoked on the basis of falsification of the certification application, misrepresentation of certification status, violation of examination procedures, or failure to meet recertification requirements. NO appeal will be heard on the basis of failure to pass the certification examination.

#### RECERTIFICATION

Emergency Number Professional Certification is recognized for a period of four years. To retain certification status, the candidate must accumulate 24 points over the four-year period or pass the ENP Examination prior to the recertification deadline.

# CONTENT OF THE EMERGENCY NUMBER PROFESSIONAL CERTIFICATION EXAMINATION

The questions on the Emergency Number Professional Examination will test for knowledge of the following content areas. The percentages given after each content area indicate the approximate percentage of questions for that content area on the examination.

#### **E9-1-1 Operations (50%)**

Telecommunications Operations (35%) Information Systems (10%) Legislation (5%)

#### E9-1-1 Management (50%)

Management of Organization (20%) Management of Employees (25%) Legislation (5%)

#### FORMAT OF THE EMERGENCY NUMBER PROFESSIONAL CERTIFICATION EXAMINATION

- 1. The Emergency Number Professional Certification Examination includes 150 multiple-choice questions representing the major knowledge content areas outlined in the above section. Following each question, four choices will be listed including one correct or best answer and three plausible, but wrong answers. The answer to any one question will not depend on the answer to any other question on the examination.
- 2. The examination questions have been written and reviewed by current professionals working in the 9-1-1 field to ensure all questions on the examination represent the knowledge required by Emergency Number Professionals. Questions have also been reviewed by the Professional Testing Corporation to ensure uniform construction, accuracy, and appropriateness.
- 3. For each new examination date, the examination will be modified and updated to reflect any new developments or current issues facing Emergency Number Professionals.
- 4. Total examination time is three (3) hours.

#### DETERMINATION OF THE PASSING SCORE

The passing score for the Emergency Number Professional Certification Examination is set by the NENA Institute using a method called the modified-Angoff approach. This method asks each individual to make a judgment about the probability that a minimally competent candidate who meets the eligibility requirements would answer the questions correctly. The overall passing score is computed as the average of the estimated probabilities for each question.

The passing score that is set by the NENA Institute represents a level of competency that must be demonstrated to pass the examination.

#### DEVELOPMENT OF THE EXAMINATION

The Emergency Number Professional Certification Examination has been developed in compliance with generally accepted testing guidelines and standards. Examination questions are written by current 9-1-1 professionals active in the field. Professional Testing Corporation then reviews and edits all questions submitted for correct grammar, format, and consistency. The questions are then reviewed and edited by current 9-1-1 professionals to ensure relevance and accuracy. Approved questions are added to the examination bank, from which questions for future examinations will be selected.

## **SECTION II**

#### APPLYING FOR THE CERTIFICATION EXAMINATION

#### **ELIGIBILITY CRITERIA**

The following eligibility criteria have been established by the NENA Institute Board for determining if an individual is qualified to take the Emergency Number Professional (ENP) Certification Examination.

#### **EXPERIENCE CRITERIA**

In order to sit for the ENP Certification Exam, a candidate must meet the following experience criteria:

A. Three years experience in Emergency Communications.

OR

B. Three years experience with a commercial provider of Emergency Communications products and services.

#### POINT ACCUMULATION

Having satisfied the three-year minimum experience criterion, each candidate must accumulate a total of 10 points as follows:

#### **EXPERIENCE**

Each additional year of experience (full-time equivalent) in Emergency Communications will count for 2 points, with a maximum of 10 points being granted.

#### **EDUCATION**

College degrees will earn points as noted below:

Associate Degree 2 points
Bachelor Degree 4 points
Graduate Degree 6 points

#### PROFESSIONAL DEVELOPMENT AND SERVICE

- NENA in-person courses completed (refer to the NENA web site for a list of current NENA courses) will earn 1 point each. A maximum of 4 points will be granted.
- Holding an office in NENA at the chapter or national level will earn 1 point, with a maximum of 1 point being granted.
- Other professional certifications (e.g. CEM) will earn 1 point, with a maximum of 1 point being granted.

SECTION 2

#### **EXAMINATION ADMINISTRATION**

The ENP Examination is administered during an established two-week testing period on a daily basis, Monday through Saturday, excluding holidays, at computer-based testing facilities managed by PSI. PSI has several hundred testing sites in the United States, as well as Canada. Scheduling is done on a first-come, first-serve basis. To find a testing center near you visit: www.ptcny.com/cbt/sites.htm or call PSI at (800) 211-2754. Please note: Hours and days of availability vary at different centers. *You will not be able to schedule your examination appointment until you have received an Eligibility Notice from PTC*.

#### ONLINE TESTING SOFTWARE DEMO

A Testing Software Demo can be viewed online by visiting http://www.ptcny.com/cbt/demo.htm. This online Testing Software Demo can give you an idea about the features of the testing software.

#### SCHEDULING YOUR EXAMINATION APPOINTMENT

Once your application has been received and processed, and your eligibility verified, you will be mailed an Eligibility Notice. The Eligibility Notice plus current, government issued photo ID such as driver's license or passport must be presented in order to gain admission to the testing center. A candidate not receiving an Eligibility Notice or other correspondence at least three weeks before the beginning of the two-week testing period should contact the Professional Testing Corporation by telephone at (212) 356-0660.

The Eligibility Notice will indicate where to call to schedule your examination appointment as well as the dates testing is available. Appointment times are first-come, first serve, so schedule your appointment as soon as you receive your Eligibility Notice in order to maximize your chance of testing at your preferred location and on your preferred date.

It is your responsibility as the candidate to call PSI to schedule the examination appointment.

It is highly recommended that you become familiar with the test location.

Arrival at the testing site at the appointed time is the responsibility of the candidate. Please plan for weather, traffic, parking and any security requirements that are specific to the testing location. Late arrival may prevent you from testing.

#### SPECIAL NEEDS

Special testing arrangements may be made for special needs individuals submitting the Application, examination fee, and a letter describing the nature of the disability and the special accommodations needed for testing. Requests for special testing needs individuals must be received at least EIGHT weeks before the testing period begins.

If you are requesting special testing accommodations and have a disability covered by the Americans with Disabilities Act, please complete the Request For Special Needs Accommodations form. The information you provide and any documentation regarding your disability and special testing accommodations will be held in strict confidence.

Please notify PTC at least two weeks prior to your test appointment if you need to bring a service dog, medicine, food or beverages necessary for a medical condition with you to the test center.

#### CHANGING YOUR EXAMINATION APPOINTMENT

If you need to cancel your examination appointment or reschedule to a different date within the two-week testing period you must contact PSI at (800) 211-2754 no later than noon, Eastern Standard Time, of the second business day PRIOR to your scheduled appointment.

If you fail to arrive for your appointment or cancel without giving the required notice, you will forfeit your testing fee

#### **EXAMINATION FEES**

Each of the following fees includes a \$ 40 nonrefundable Applie	cation Processing Fee:
NENA Members	\$ 420 (U.S.)
Non-members	\$ 500 (U.S.)
Re-certification	
Re-examination	

#### **APPLICATION PROCEDURE**

- 1. Download copy of the Application Handbook from the NENA website
- 2. Fill out both applications provided in the Certification Application Handbook and return these applications, along with any other special requests, to NENA Headquarters at:

#### National Emergency Number Association 1700 Diagonal Road, Suite 500 Alexandria, VA 22314

To ensure quick and accurate processing of your application, all materials must be properly filled out and received by NENA in one envelope. If your application packet is incomplete, illegible, or does not include the correct fee, the entire packet will be returned to you with a letter of explanation for the return. You may make any corrections and/or additions to your packet and resubmit the application as long as the packet is received by NENA Headquarters on or before the due date on the letter of explanation. If you do not choose to resubmit your packet, you will receive a refund minus the \$ 40 application processing fee.

3. All fees MUST be submitted with applications. Fees submitted with your application may be charged to your Visa, MasterCard, or American Express account, or may be paid by money order, cashier's check, organizational check, or personal check. **DO NOT SEND CASH.** 

Your name must appear on your money order, cashier's check, or organizational check. If fees for more than one individual are being paid by a single organizational check, you must also include a list of those candidates along with their application materials.

#### INSTRUCTIONS FOR COMPLETING THE CERTIFICATION EXAMINATION APPLICATION

The ENP Certification Application consists of two separate application forms. The first form is titled "NENA Eligibility Application for ENP Certification." The information on this application will be used by NENA Headquarters for cashiering and records management purposes. The second form is the computer-scannable application titled "Testing Center Application for Emergency Number Professional Certification Examination." This form will be sent to the Professional Testing Corporation to be used for the purposes of examination administration and analysis.

#### NENA Eligibility Application for ENP Certification

Completely fill in as appropriate ALL information requested on the form.

Payment: Please indicate the method of payment you will be using.

Background Information: Completely fill in the information requested, including your name, address, phone number, fax number, and status of your NENA membership.

#### **ELIGIBILITY REOUIREMENTS:**

Please carefully fill out the requested information in this section. This section is very important because the information provided will be used to determine your eligibility to sit for the examination.

**Experience**—Under the experience section, please indicate the number of years you have in one of the three experience categories and the total number of experience points accumulated beyond the minimum requirement of three years experience.

**Education**—Please indicate the highest level of education you have received and the appropriate point value for this level.

**Professional Development and Service**—Please identify in the appropriate spaces any NENA educational courses you have taken, state or national NENA offices you have held, and any other professional certifications you hold. In addition, please identify the appropriate point values for each professional development activity you have listed.

**Total Eligibility Points**—Please add up all the points from each section and fill in your total number of eligibility points. You must have ten points to be eligible for the examination.

#### TESTING CENTER APPLICATION FOR ENP EXAMINATION

Complete or fill in as appropriate ALL information requested on the form. See side 2 of the Application for marking sample and exact marking directions. Mark only one response unless otherwise indicated.

**Name**: Starting at the arrow in the upper left corner of side 1 of the Application for ENP Examination, print your name in the row of empty boxes and grid each letter as shown in the marking sample. Be certain to fill in ovals completely. Do NOT make x's, dots, circles, or checks, but fill in the ovals completely.

NOTE: The name you enter on your Application must match exactly the name shown on your current, government-issued photo ID such as driver's license or passport.

**Address**: Print your mailing address in the row of empty boxes and grid each letter as shown in the marking sample.

**Optional**: The information requested at the bottom of the form relating to race, gender, and age is optional. It is requested to assist in complying with equal opportunity guidelines and will be used only in statistical summaries. Such information will in no way affect your examination results.

**Signature**: When you have completed all required information, turn the form to side 1 and date and sign the form in the space provided in the lower center.

### **SECTION III**

#### AFTER APPLYING FOR YOUR EXAMINATION

#### **Eligibility Notice**

The Professional Testing Corporation will send candidates an Eligibility Notice. Candidates then will need to call PSI at the 800 number shown on their Eligibility Notice in order to schedule their examination date, time and location within the specified two-week period.

#### Cancellation and Refunds

If a candidate cancels, in writing, at least 8 weeks prior to the examination date, the examination fee less a \$ 40 processing fee will be refunded. Following the receipt of the Application packet and examination fee, a candidate who does not take the examination may receive a partial refund of \$100 if a request is received in writing within 30 days after the examination date. Requests for refunds will NOT be honored after 30 days. Written requests for cancellation or refunds must be sent to:

#### **National Emergency Number Association**

NENA Institute 1700 Diagonal Road, Suite 500 Alexandria, VA 22314

#### Reschedule

If a candidate chooses to reschedule to a later examination date, NENA must be notified of the change in writing at least 8 weeks prior to the examination date. If a request to reschedule is received in writing less than 8 weeks prior to the examination date, a \$150 fee will be charged for the new date.

If a candidate does not show up for the examination on the scheduled date, a rescheduling fee of \$150 will be charged should the candidate wish to reschedule.

### **SECTION IV**

#### AT THE TESTING CENTER

#### Admission for Examination

The Eligibility Notice plus **current government-issued photo identification** must be presented in order to gain admission to the testing center.

#### **Examination Day Schedule**

Each candidate should confirm the location, date, and time of examination. All candidates should report to their as signed testing centers one-half hour prior to the beginning of the examination. Latecomers may be admitted to the examination at the discretion of the examiner but will NOT be permitted to write beyond the time scheduled for completion of the examination.

#### **Examination Rules**

- 1. Electronic devices including but not limited to, cell phones, pagers, palm pilots, Blackberries, Bluetooth type devices, voice recording devices, cameras, and MP3 players (iPod, iTouch, etc.) cannot be used during the examination.
- 2. No papers, books or other reference materials may be taken into or removed from the examination room.
- 3. Simple, nonprogrammable calculators are permitted with the exception of calculators as part of cellular phones, blackberries, etc. A calculator is also available on screen if needed.
- 4. No questions concerning content of the examination may be asked during the testing period. The candidate should read carefully the directions that are provided on screen at the beginning of the examination session.

#### **SECTION V**

#### AFTER THE EXAMINATION

#### Failure to Sit for Your Examination

Candidates who fail to sit for the examination may receive a partial refund if a written request is received by the NENA Institute within 30 days of the examination date. See the above section on refunds for more details.

If a candidate is still interested in taking the ENP Certification Exam, a new application and rescheduling fee must be submitted to NENA Headquarters.

#### Report of Results

At the time of the examination, all candidates will be notified electronically whether they have passed or not. Within six weeks of the end of the examination period, total score and scores on the major content areas will be reported.

#### Notification of Certification

Successful candidates will receive a letter confirming certification and an official Emergency Number Professional certificate from the NENA Institute within 8 weeks of the examination date.

#### **Duplicate Score Reports**

Candidates who require a duplicate score report should send a signed request with name of examination, candidate name, and date of testing to:

#### **Professional Testing Corporation**

1350 Broadway – 17th Floor New York, NY 10018

There will be no additional fee for a duplicate score report.

#### Re-examination

The Emergency Number Professional Certification Examination may be taken as often as desired upon filing of a new Application and fee. A candidate, however, can only take the examination once in a given testing period. There is no limit to the number of times the examination may be taken. The re-examination fee is \$150.

#### Confidentiality

- 1. The NENA Institute will release the individual examination scores ONLY to the individual cand dates.
- \_ dates.
   Any questions concerning examination results should be referred to the NENA Institute or Professional Testing Corporation.

#### **Appeal Procedures**

Reconsideration and appeal is available for candidates who have had certification denied or revoked on the basis of falsification of the examination application, misrepresentation of certification status, violation of examination procedures, or failure to meet certification requirements. NO appeal will be heard on the basis of failure to pass the certification examination.

Requests for reconsideration or appeal should be made in writing to the NENA Institute within 30 days of receiving notice of denial or revocation of certification. Individuals with questions concerning reconsideration or appeal procedures should contact NENA Headquarters.

# SECTION 2

#### APPENDIX A

#### content outline of the enp body of knowledge

#### E9-1-1 OPERATIONS (50%)

#### I. **TELECOMMUNICATIONS OPERATIONS (35%)**

- A. PRINCIPLES OF TELECOMMUNICATIONS
  - Radio Communications
    - Trunked
    - VHF/UHF b.
    - Mobiles/Portables c.
    - Repeater Systems
    - Satellite e.
  - Network Design and Architecture
    - Transport Classification
      - 1. Local Exchange Carrier (LEC)
      - 2. Competitive Local Exchange Carrier (CLEC)
      - Interexchange Carrier
      - 4. Local Loop
      - Area Code Overlay/Split 5.
      - 6. N-1-1
    - Transport Media
      - 1. Copper
      - 2. Fiber optic
      - Microwave
      - 4. Coaxial Cable
  - 3. Network Configurations
    - Trunking Requirements
    - Switching
      - 1. Direct Trunked
      - 2. Tandem (Analog vs. Digital)
      - 3. End Office Routing
    - Alternate Routing Considerations
    - Grade of Service/Blocking Probabilities
    - Wireless/PCS Call Routing and Interconnects
    - PBX/PS ALI Routing and Interconnects
  - Signaling/Transport
    - Feature Group D
    - CAMA b.
    - **Tandem Connections**
    - Trunk Concentration
    - Dual Tone Multi-Frequency (DTMF)
      - f. Intelligent Networks
        - 1. ISDN/SS7
        - 2. Voice Over I/P
        - Frame Relay
        - Asynchronous Transfer Mode (ATM) 4.
    - Transmission Systems
      - SXS a.
      - h Crossbar
      - c. Analog
      - d. Digital
  - TYPES AND FEATURES OF 9-1-1 SYSTEMS B.
    - **Key Systems** 
      - a. Hybrid
      - Electronic
    - c. Mechanical
    - Digital

- Types of 9-1-1 Systems
  - Basic
  - ANI Only
  - ANI/ALI c.
  - Enhanced
- Features of 9-1-1 Systems
  - a. Selective Routing
  - Alternate Routing b.
  - **Default Routing**
  - Call Transferring
  - ANI Resend
  - f. Router to Router Transfer
- PUBLIC SAFETY ANSWERING POINT (PSAP)
  - Types of PSAPs
    - Primary/Secondary
    - Single Jurisdiction/Multiple Jurisdiction
    - Consolidated
  - 9-1-1 Equipment 2.
    - ANI Controller
    - b. ALI Controller
    - System Controllers
    - d. Power Supply
    - ANI Displays
    - f. **ALI Displays**
    - ACD g.
    - Intelligent Workstations/

Computer Telephony Integration (CTI)

- PS ALI/PBX
- Other PSAP Equipment
  - Dispatch a.
  - Recording b.
  - c. Electrical
  - CAD System
  - Records Management System
  - f. Mobile Data Terminal
  - Automatic Vehicle Location
  - Telecommunications Device for the Deaf (TDD)/TTY
  - i. Master Clock
- D. PBX/PSP
  - Caller Location Identification
    - ANI from PS
    - h **Information Transport**
    - PSEUDO ALI
    - d. Routing Issues
- E. WIRELESS
  - Cellular/PCS 1.
    - Network Routing
    - Methods for 9-1-1 Call Routing
    - Location Information c.
    - Interconnection Standards
- II. **INFORMATION SYSTEMS (10%)** 
  - A. DATA BASES IN SUPPORT OF 9-1-1
    - Types of Data Bases
      - a. CRIS
      - b. SAG
      - MSAG and ESN c.
      - **ALI Records**
      - Selective Routing System (SRS) Records e.
      - f. TN Records
      - Geographic Information Systems (GIS)

**Public Safety Entities** 

Radio Communications Act (Canada)

#### C. SPECIAL LEGISLATIVE AREAS

1. PBX/ANI

**TDD-TTY Protocols** 2.

Cellular, PCS 3.

Accessibility

**Emergency Medical Dispatching** 

6. Nuisance/False Alarms

Automatic Alarm Systems

8. Industry Canada (Canada)

Emergency Preparedness Canada (Canada)

10. Access to Information Act (Canada)

11. Emergency Notification Systems (ENS) (Reverse 9-1-1)

12. Open Records Legislation

13. Telecommunicator Standards/Legislation

#### 1. Latitude/Longitude Based

- 2. Relationship to Location Determination Technologies 3. Geographic Positioning Systems (GPS)
- Data Base Relationships
- a. Interfacing
- b. Data Stream
- B. DATA BASE DEVELOPMENT, IMPLEMENTATION,

#### MAINTENANCE

- 1. Location of Data Base
  - Telco a.
  - Self-Maintained at PSAP
  - Stand Alone at PSAP via Telco C.
  - d. Individual Provided/Maintained
- ESZ/MSAG DEVELOPMENT
  - a. Initial Creation
  - b. Finalization
  - Error Correction
  - d. Maintenance
  - e. 3<sup>rd</sup> Party
- C. NENA RECOMMENDED TECHNICAL STANDARDS
  - Technical Standards Administration
  - Technical Data
  - Technical Network
  - 4. Technical PSAP
  - 5. (Reserved)
  - Technical ALEC & Private Switch 6.
- NON-TRADITIONAL ISSUES
  - Phase II Wireless 1.
  - Number Portability
  - Automatic Crash Notification (ACN)
- INFORMATION NETWORKS
  - Internet
  - 2. Intranet
  - Local Area Networks
  - Wide Area Networks

#### LEGISLATION (5%) III.

- FUNDING AND ENABLING LEGISLATION
  - Mechanisms and Sources
    - Telephone Service Surcharge and Levies
    - Wireless Surcharges b.
    - Taxes c.
    - Government Funding d.
    - Grants e.
  - Factors to Consider
    - a. Limitation on Use of Funds
    - Collection and Distribution Methods
    - Governing Board Requirements
    - Standards for Call Takers/Dispatchers/EMD
    - Standards for Equipment
    - Standards for Addressing and Mapping
- TELECOMMUNICATIONS REGULATORY ENVIRONMENT
  - 1. Federal, State, Provincial, Municipal
    - a. Telecommunications Act of 1996
    - Wireless Communication and Public Safety Act of 1995
  - FCC/CRTC (Canada)
    - a. N11
    - b. Wireless
    - c. PS ALI/PBX
    - d. CLEC
  - Bidding and Purchasing Laws
  - Sovereign Immunity
  - TSP (Telecommunications Services Priority)
  - Confidentiality/Public Information Laws/Privacy Laws
  - Liability

#### E9-1-1 Management (50%)

#### MANAGEMENT OF ORGANIZATION (20%)

#### A. MANAGEMENT FUNCTIONS

- Budgeting
- Purchasing
  - Writing Bid Specs for RFP a.
  - Vendor ID Process
  - Vendor Analysis
  - Vendor Selection
  - Vendor Contracting
- Decision Making
  - a. Political Issues
  - Technological Issues
  - Human Resource Issues
  - Operational Issues
  - Financial Issues
  - Legislative Issues f.

#### B. CONTINGENCY AND DISASTER PLANNING

- Types of Disasters
  - a. Localized
  - b. Regional
  - **PSAP** Only
  - Network Facilities d.

#### Phases of Emergency Management

- Mitigation
  - Resource Management
  - Interagency Cooperation
  - 3. Security
- Preparedness
  - 1. Redundancy
  - 2. Relocation/Back-up Site
  - Mutual Aid Agreement 3.
  - 4. Testing
  - 5. Training
  - Notification Plans (Employees and Families)
  - 7. Supplies
- Response
  - Transportation of Employees/Equipment 1.
  - Food/Water/Toilets
  - Procedures and Policies
- Recovery
  - 1. Transportation of Employees/Equipment
  - Restoration of Services

APPENDIX

#### C. HEALTH AND SAFETY

- 1. Environment Factors
  - a. Human Factors
    Engineering/Ergonomics
  - b. Job-related Illnesses and Injuries
- 2. Critical Incident Stress Management
- 3. Employee Assistance Programs (EAP)

#### D. PUBLIC RELATIONS AND EDUCATION

- 1. Research
- 2. Action Plan (Preventive vs. Remedial)
- 3. Information Delivery
- 4. Evaluation
- 5. Media Relations

#### II. MANAGEMENT OF EMPLOYEES (25%)

- A. DEVELOPMENT OF POLICIES AND PROCEDURES
- B. SCHEDULING OF EMPLOYEE TIME
- C. QUALITY AND PERFORMANCE MANAGEMENT
  - Performance Planning: Identification of Goals and Desirable Behaviors
  - 2. Setting and Communicating Performance Standards
  - 3. Employee Attitudes, Opinions, and Satisfaction
  - 4. Measuring Results and Feedback
  - 5. Implementation of Performance Improvement Strategies
  - 6. Evaluation of Results

#### D. SELECTION AND PLACEMENT

- 1. Recruiting
  - a. Determining Needs
  - b. Identifying Selection Criteria
  - c. Internal Sourcing
  - d. External Sourcing
  - e. Evaluation of Recruitment Effectiveness
- 2. Selection Strategies
- 3. Retention of Employees

#### E. TRAINING AND DEVELOPMENT

- 1. Training Needs Analysis
- 2. Development of Training Curriculum
- 3. Training Methods
- 4. Ongoing/Long Term Training
- 5. Evaluation of Training
- 6. Career Planning and Development

#### F. COMPENSATION AND BENEFITS

- 1. Philosophies and Strategies
- 2. Job Analysis and Job Descriptions
- 3. Setting Pay Rates
- 4. Types
- 5. Philosophies and Strategies
- 6. Economic Factors
- 7. Pay Adjustments and Increases

#### G. EMPLOYEE RELATIONS AND LABOR RELATIONS

- 1. Policies and Practices
- 2. Employment Rights and Privacy
  - a. Harassment Legislation
  - b. Affirmative Action Plans
  - c. Workers Compensation Laws/Regulations
  - d. Unemployment Compensation Laws/Regulations
  - e. Social Security
  - f. Canada Labour Relations Board (Canada)

#### 3. Labor/Management Relations

- a. Union Representation of Employees
- b. Collective Bargaining
- c. Employer Unfair Labor Practices
- d. Union Unfair Labor Practices
- e. Strikes
- f. Boycotts

#### III. LEGISLATION (5%)

#### A. EMPLOYMENT LAWS AND REGULATIONS

- 1. Title VII of the Civil Rights Act (1964) as amended (1972, 1991)
- 2. Age Discrimination in Employment Act (1967) as amended
- 3. Pregnancy Discrimination in Employment Act (1978)
- 4. Uniform Guidelines on Employee Selection Procedures
- 5. Occupational Safety and Health Act (1971)
- 6. Americans with Disabilities Act
- 7. Family Medical Leave Act
- 8. Canadian Charter of Rights and Freedoms (Canada)
- 9. Canadian Human Rights Act (Canada)
- Canadian Centre for Occupational Health and Safety Act (Canada)
- 11. Constitution Act (Canada)

#### B. COMPENSATION LAWS AND REGULATIONS

- Fair Labor Standards Act (1938) as amended (Wage and Hour)
- 2. Equal Pay Act (1963)
- 3. COBRA (Consolidated Omnibus Reconciliation Act) (1990)
- 4. Social Security Act (as amended)

#### APPENDIX B

#### Sample Test Questions

- 1. A consolidated Public Safety Answering Point (PSAP) provides communications services for
  - 1. more than one area code.
  - 2. a local government entity.
  - 3. more than one agency or department.
  - 4. one Emergency Service (EMS) provider.
- 2. Automatic Number Identification (ANI) is designed to provide
  - 1. an address.
  - 2. a telephone number.
  - 3. a caller's home number.
  - 4.thenumberofcallsthathavebeenreceivedby a phone number.
- 3. The primary advantage of a TRUNKED radio system is
  - 1. all equipment is compatible with all other systems.
  - 2. many users can independently share the same radio systems.
  - 3. channel allocation is independent of computer control.
  - 4. only one radio channel is used for the entire system.
- 4. Under the Americans with Disabilities Act (ADA), a Public Safety Answering Point (PSAP) is required to have equipment capable of handling
  - 1. ISDN
  - 2. ASCII
  - 3. Baudot
  - 4. Single Side Band
- 5. When an Employee Safety Complaint is filed under Occupational Safety and Health Administrative (OSHA) regulations against an employer, the following is most likely to occur
  - 1. employer site must be inspected.
  - 2. name of the complaintant is revealed.
  - 3. complaint is posted for employee review.
  - 4. employer must contact OSHA within 48 hours.

- 6. Which of the following best describes airtime for Public Service Announcements?
  - 1. is regulated by the FCC.
  - 2. is promoted only on state level.
  - 3. is paid for by initiating agency.
  - 4. can be specified by the PSAP manager.
- 7. The federal regulation which governs the number of hours a full-time non-exempt employees may work is the
  - 1. ADA
  - 2. Overtime Act (Labor Dept.)
  - 3. FLSA
  - 4. OSHA
- 8. Rewards designed to encourage and reimburse employ ees for efforts beyond normal performance expectations are called
  - 1. status.
  - 2. benefits.
  - 3. incentives.
  - 4. positive reinforcements.
- 9. A common pay practice of giving employees percentage increases for economic inflation is best described as
  - 1. seniority or time increase.
  - 2. time and merit adjustment.
  - 3. merit or performance increase.
  - 4. standard or cost of living adjustment.
- 10. A systematic investigation of the tasks, duties, and responsibilities of a job is a job
  - 1. analysis
  - 2. evaluation
  - 3. description
  - 4. specification

# **Eligibility Application for ENP Certification**



Please fill in the following information as indicated.  □ NENA Member \$420 □ Non-Member \$500 □ Re-Certification \$300 □ Re-Examination \$150						
	l Emergency Number Association (U.S. funds only)) ganizational Check Personal Check					
☐ Credit Card Payment:VisaMast	terCardAmerican ExpressDiscover					
Acct #	Exp. Date					
Signature						
BACKGROUND INFORMATION						
Name	Agency/Company					
Address						
Phone	Fax					
Email						
Type of NENA Membership: ☐ Public Sector	r □ Private Sector/Commercial □ Non-Member □ Telecommu	unicator				
ELIGIBILITY REQUIREMENTS	SECTION 3.					
In order to sit for the ENP Certification Exam, a candidate must meet the following experience criteria:	<b>Professional Development/Service</b> Please indicate the number and title of NENA in-person courses course will earn 1 point. A maximum of 4 points will be granted.	completed. Each full-day				
<b>A.</b> Three years experience in Emergency Communications.	Course	Pts				
OR	Course	Pts				
<b>B.</b> Three years experience with a	Course	Pts				
commercial provider of Emergency Communications	Course	Pts				
products and services.	Course	Pts				
SECTION 1. Experience Having satisfied the three-year minimum	Please indicate if you have completed the NENA Center Manager Worth 5 points.	· Certification Program (CMCP).				
experience criterion, each additional year of experience (full-time equivalent)	Date/Location	Pts				
in Emergency Communications will count for two points, with a maximum of 10 points being granted.	Indicate the state or national NENA office(s) you have held. One holding a chapter or national NENA office, with a maximum of 1					
Total Experience Pts	Title of Office	State Pts				
SECTION 2. Education Attainment	The names of other professional certifications (e.g. CEM) that yo 1 point with a maximum of 1 point.	u hold. A certification will earn				
Please indicate your level of education:	Name of Professional Certification	Pts				
High School Degree 0 Pts Associate Degree 2 Pts	Total Professional De	velopment/Service Pts				
Bachelor Degree 4 Pts TOTAL ELIGIBILITY POINTS (10 Points Required) Graduate Degree 6 Pts Section 1. (Maximum of 10)						
Total Education Attainment Pts Section 2. (Maximum of 6) Section 3. (Maximum of 6)						

#### **Select Desired Test Period**

☐ Spring 2016 (April 2-16, 2016) ☐ Summer 2016 (July 16-30, 2016)

☐ Fall 2016 (October 1-15, 2016)

☐ Winter 2017 (January 14-28, 2017)

#### **Application Deadline**

March 7, 2016 June 20, 2016 September 6, 2016 December 12, 2016 Complete this application and the Testing Center Application for Emergency Number Professional Certification Examination and

send all paperwork & payments, accompanied by application to: NENA,1700 Diagonal Road, Suite 500, Alexandria, VA 22314

Credit card payments may also be faxed to NENA (202) 618-6370.

Questions? Visit www.nena.org/enp or call (202) 466.4911.



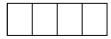
# **Testing Center Application for**

# **Emergency Number Professional Certification Examination**

MARKING INSTRUCTIONS: This form will be scanned by computer, so please make your marks heavy and dark, filling the circles completely. Please print uppercase letters and avoid contact with the edge of the box. See example provided.

A	В	С	D	ш	F	1	2	3	4	5	6	
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Ca	ndidate Information				
00	Лг. Ars First Name		Middel Initial		
O 1	As.				
C Last	rr.		Suffix (Jr., Sr. , etc.)		
Nun	hber and Street		Apartment Number		
l l	India una otroca		Tiporamoni Namboi		
City			State/Province Zip/Postal Code		
City			State/110vince Zip/10stat code		
Dav		Evenin	g Phone		
Day					
<u> </u>   F-m	ail Address				
	all Address				
L	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	ich edition of the exam do you wish to take?				
	U.S. O Canadian				
	gibility and Background Information				
l	ken only one choice for each question unless otherwise dire				
Α.	CURRENT POSITION/ROLE IN EMERGENCY COMMUNICATIONS MANAGEMENT:	E.	CURRENT EMPLOYER CATEGORY: (Darken only one response.)		
	O Manager		○ 9-1-1 Board ○ Consultant Services		
	O Supervisor		○ 9-1-1 Agency ○ Equipment Vendor/Distributor		
	O Commercial provider of products and services		O Police Department O Equipment Manufacturer/Developer		
	O Sworn Personnel O Other		○ Fire Department ○ Telecommunications Company		
_					
В.	YEARS IN <u>CURRENT</u> POSITION/ROLE IN EMERGENCY COMMUNICATIONS MANAGEMENT:		○ EMS ○ Other		
	O Less than 3 years O 6 - 8 years		O Independent System Provider		
	O 3 - 5 years O 9 or more years	F.	JOB CLASSIFICATION: (Darken only one response.)		
C.	PREVIOUS POSITIONS/ROLES IN EMERGENCY		O Director, Agency Head, Supervisor		
	COMMUNICATIONS MANAGEMENT:		O Police/Fire/EMS Manager		
	O Manager		O Project Engineer/System Designer		
	<ul><li>Supervisor</li><li>Commercial provider of products and services</li></ul>		O Database Manager/DB Developer/Addressing		
	O Sworn Personnel		Emergency Responder, Service Provider		
	O Other		9-1-1 Coordinator		
D.	YEARS IN PREVIOUS POSITIONS/ROLES IN		O 9-1-1 Product Manager		
	EMERGENCY COMMUNICATIONS MANAGEMENT:		City/County Elected Official		
	O Less than 3 years O 6 - 8 years		O Vendor Sales/Marketing		
	O 3 - 5 years O 9 or more years		Other (Continue on page 2)		



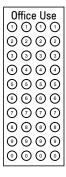




### **Testing Center Application for**

# **Emergency Number Professional Certification Examination**

Eligibility and Backgrou	na Informai	tion	
G. TOTAL YEARS OF EXPERIENCE COMMUNICATIONS:	IN ALL EMERGE	NCY J	. HAVE YOU TAKEN THIS EXAMINATION BEFORE?
O Less than 3 years O 6 - 8	years		If yes, when and under what name?
○ 3 - 5 years ○ 9 or i	more years		Date: Name:
H. ARE YOU CURRENTLY CERTIFIINUMBER PROFESSIONAL?  O No O Yes  If yes, indicate month/year of ex  I. ARE YOU CURRENTLY A MEME O No O Yes If yes, indicate type of members of the company o	piration:/ BER OF NENA? hip:		K. HIGHEST ACADEMIC LEVEL:  Some High School  High School Graduate or Equivalent  Some College  Associate Degree  Bachelor's Degree  Master's Degree  Doctoral Degree  Other
Optional Information  Note: Information related to race, age, and gopportunity. Such data will be used only in a			only to assist in complying with general guidelines pertaining to equal y will affect your certification.
Race:	Age Range:		Gender:
O African American O Native American O White O Hispanic No Response	_ ~ ~	<ul><li>○ 40 to 49</li><li>○ 50 to 59</li><li>○ 60+</li></ul>	<ul><li>○ Male</li><li>○ Female</li></ul>
Candidate Signature	and understand I a	am responsi	ble for knowing its contents. I certify that the information
			s and is accurate, correct, and complete.  DATE:







#### REQUEST FOR SPECIAL NEEDS ACCOMMODATIONS

If you are requesting special testing accommodations and have a disability covered by the Americans with Disabilities Act, please complete this form. The information you provide and any documentation regarding your disability and special testing accommodations will be held in strict confidence.

Candidate Information		Special Accommodations I request special accommodations as follows: (Check all that apply)				
Name of Examination						
ramo or Examination			_ Special seating or other physical accommodation			
Test Date			_ Reader			
Name (Last, First, Middle Initial)			_ Scribe			
rtamo (2001, r not, imagio milial)			Extended testing time Specify Total hours requested			
Address			Distraction-free room / Tested separately			
City State	Zip Code		Other special accommodations (Please specify.)			
Daytime Telephone Number						
Fax Number						
		Signed:	Date:			
_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5.95	Candidate Signature Date:			
Please have this section completed by an a	DOCUMENTATIO appropriate health care p					
Please have this section completed by an a	appropriate health care p	orofessional (e.g.				
Please have this section completed by an a section complete by a section comp	appropriate health care p	orofessional (e.g.	, physician, psychologist, psychiatrist)			
Please have this section completed by an appropriate professional Documentation  I have evaluated	appropriate health care particles amination Candidate  all Title ature of the examination	orofessional (e.g.	on// in my capacity as a  ted. It is my opinion that, because of this candidate's			
Professional Documentation I have evaluated  Professional  Professional  Professional  Professional  Professional  And the candidate discussed with me the nadisability described below, he/she should be professional  Description of disability:	appropriate health care particles amination Candidate  all Title ature of the examination ld receive the special tes	to be administra	on// in my capacity as a  ted. It is my opinion that, because of this candidate's			
Professional Documentation I have evaluated  Professional  Professional  Professional  Professional  Professional  And the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below, he/she shound be continued by the candidate discussed with me the nadisability described below.  Description of disability:  Signed:	appropriate health care particles amination Candidate  all Title ature of the examination ld receive the special tes	to be administrating accommoda	on// in my capacity as a  on/			
Professional Documentation  I have evaluated	appropriate health care particles amination Candidate  all Title ature of the examination ld receive the special tes	to be administrating accommoda	on// in my capacity as a   ted. It is my opinion that, because of this candidate's ations listed above.			
Professional Documentation I have evaluated	amination Candidate  all Title ature of the examination Id receive the special tes	to be administrating accommoda	on// in my capacity as a   ted. It is my opinion that, because of this candidate's ations listed above.			

Return this completed & signed form with your application and fees, at least 8 weeks prior to the test date, to:



#### REQUEST FOR SPECIAL TEST CENTER

To request a special test center in another country, including parts of Canada where there are no computer test centers for your exam, please complete the form below and submit this completed form with your application at least eight (8) weeks before the testing period begins. Requests and applications received later than 8 weeks prior to the start of the testing period will be reviewed on an individual basis and cannot be guaranteed acceptance. There may be an additional special test center fee -please refer to the Handbook for Candidates (www.ptcny.com) for your exam for the amount of the special test center fee.

Candidate Information		
Name of Examination		I request a special test center in:
Choice of Test Date within the testing period		City
Name (Last, First, Middle Initial)		
Address		Signed:
City State	Zip Code	Date:
Daytime Telephone Number		
Fax Number		
E-mail Address		

Return this completed & signed form with your application and fees, at least 8 weeks prior to the beginning of the testing period. If applying on-line, please scan and email this form to sfrier@ptcny.com.





National Emergency Number Association NENA Institute 1700 Diagonal Road, Suite 500 Alexandria, VA 22314

202-466-4911 • 202-618-6370 (fax) www.nena.org