



the  
accreditation inspector's handbook

2012 edition

# 2012 ACCREDITATION INSPECTOR'S HANDBOOK

## ***SIGNIFICANT ADDITIONS & CHANGES 2008-2012***

<b>2009 -2011</b>	
No significant changes	
<b>2008</b>	
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Exit Interview .....	10 - 11
<b>2007</b>	
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## REQUIREMENTS AND RULES OF INSPECTION TEAM SERVICE

### Introduction

**Thank you** for agreeing to serve as a member of an accreditation inspection team. This handbook is designed to provide information that will help you to identify and fulfill your responsibilities as an inspector.

It is important to understand that the decision regarding the granting, tabling, or denial of accreditation rests solely with the Accreditation Commission—*not with the inspection team*. The inspection team makes a *recommendation* which is based on what is learned and observed *at the time of the inspection*. The inspection team is not responsible for the outcome of a case. That responsibility is borne solely by the Accreditation Commission and the institution itself. The inspection team *is* responsible for: (1) performing a systematic examination in advance of all application materials, (2) conducting a thorough on-site inspection of the facilities, records, and collection, (3) effectively interviewing staff and governing officials, (4) ensuring that sufficient time is available for a comprehensive exit interview, (5) writing a methodical report in accordance with instructions, and (6) making a recommendation that most accurately reflects the state of the institution *at the time of the inspection* in light of AZA standards.

Service as an accreditation inspector is a huge responsibility and requires a tremendous amount of work. AZA, and every institution it has accredited, are counting on you to do a thorough job and make an unbiased evaluation based upon accreditation standards and modern zoological practices and philosophies. In addition to having professional expertise and sufficient experience in your particular field, you must be willing to follow instructions, study hard in advance, allow sufficient time and patience to inspect, be capable of making tough decisions if necessary, remain impartial, and maintain complete confidentiality. The report and recommendation you and your team provide to the Accreditation Commission are an integral part of the process, and the list of concerns that your team generates provides an institution with a clear outline of items that must be successfully addressed before accreditation can be considered. Regardless of whether an institution is ultimately accredited or not, your service as an inspector sets an example and creates a guide for professional improvement.

The most common size of an accreditation inspection team is three persons. Each person is selected to fill one of three specific roles on the team, as follows: (1) administrative operations management, (2) husbandry/curatorial (animal management), or (3) veterinary medicine. In addition, one of those three persons will also serve as team Chair. [Two person teams will always include a veterinarian, plus someone from one of the other two categories who has extensive experience in both husbandry and operations. Four person teams will include a specialized role, for example, education, aquatics, elephants, etc.]. (See *Visiting Committee Criteria* page 5 - 7).

As a member of the team, your main AZA contacts regarding this assignment are:

**Primary Reviewer:** The Primary Reviewer is a member of the Accreditation Commission, or a Commission Advisor, assigned to serve as the chief examiner for the Commission; and who, like you, receives a complete set of the institution's application materials. The Primary Reviewer works in conjunction with the Visiting Committee and, as a Commissioner or Commission Advisor, is present at the institution's hearing before the Commission. It is important that the team Chair *communicates with the Primary Reviewer* to relay and discuss concerns of the team

both before and after the inspection. In the case of *new* applicants, the Primary Reviewer always serves as Chair of the Visiting Committee.

**Vice President, Accreditation Programs:** The Vice President of Accreditation Programs manages all administrative business of the Commission; provides guidance on policy; maintains accreditation records; advises and consults with the Commission, Visiting Committee, and applicant institutions; assists the Commission Chair in facilitating Commission meetings; and provides training as needed. For inspectors, the Vice President, Accreditation Programs is available throughout the inspection process to answer any questions and provide guidance regarding policy or action, and occasionally accompanies the Visiting Committee on inspections. At any time you may, in confidence, discuss with the Vice President, Accreditation Programs any issues or concerns you have regarding the inspection or your participation on the team.

**Program Assistant, Accreditation Programs:** The Program Assistant, Accreditation Programs provides management support to the Vice President, Accreditation Programs, and to the Accreditation Commission. The Program Assistant, Accreditation Programs works with inspection team members regarding assignments and scheduling, and provides all materials needed to fulfill your responsibilities on the team. The Program Assistant, Accreditation Programs assists institutions in preparing for hearings, and prepares all materials and reports for Commission meetings. At any time you may, in confidence, discuss with the Program Assistant, Accreditation Programs any issues or concerns you have regarding the inspection or your participation on the team. Additionally, the Program Assistant, Accreditation Programs is your contact regarding reimbursement of expenses.

### **Assembling a Visiting Committee (How You Were Chosen)**

The assembly process begins after an institution submits an application for accreditation. Initially, the names of twelve *potential* inspectors are selected from the Commission's database of qualified individuals, *based on the criteria listed below*. That list of twelve is then sent to the applicant institution for review and approval. The institution may, if it wishes, eliminate names from the list. Once the list is approved by the institution, AZA will assign a team by considering established selection criteria and the needs of the particular team. Other factors also considered are frequency of service (how long since an inspector was last assigned), experience as Chair (could a particular inspector now begin serving as Chair), and the need to continue to add new individuals to the process (to place a new inspector on a team whenever possible).

*An institution may not select the members of its Visiting Committee. For new applicants the Primary Reviewer automatically serves as Chair of the Visiting Committee. Once the team is selected and confirmed, the team Chair will consult with the applicant institution's CEO/Director and with team members to determine the dates of the inspection.*

*[NOTE: exceptions to criteria listed below may be made by the Accreditation Commission Chair, or by the Vice President, Accreditation Programs, unless otherwise indicated.]*

### **Visiting Committee Criteria**

Individuals selected to serve as inspectors **must** meet the following criteria:

#### **Basic Criteria For Service As An Accreditation Inspector**

- Individual membership in AZA (Professional Fellow or Professional Affiliate members preferred)

- Employment at an accredited institution
- Minimum of 5 years experience in the profession
- Support of current supervisor
- Relevant professional experience (previous and current position)
- Must attend AZA Accreditation Training Session once every three years
- Must have expertise *and* experience sufficient to fulfill primary responsibilities in one of the three primary roles on the inspection team (Operations, Animal Management, Veterinary)
- Ability to maintain complete impartiality
- Willingness to be available for as many days as needed to conduct a thorough inspection

**Description of Primary Roles:** For two-person teams individuals who are qualified to cover two of the primary roles will be selected (for example, Operations *and* Veterinary, or Curatorial/Animal Management *and* Operations, etc). The three primary roles, and the areas they cover are as follows:

**Operations:** Zoo or aquarium operations, governing authority, staff, facilities, finance, guest experience, safety/security, conservation, education, research, and support organization.

**Curatorial/Animal Management:** Animal collection, husbandry, facilities, safety/security, staff, conservation, education, research.

**Veterinary:** Veterinary care, animal collection, nutrition, staff, facilities, safety/security, research.

#### **Criteria For Retired Fellows' Service As An Accreditation Inspector**

- Basic criteria for service as an accreditation inspector [*except for employment status*] (see above)
- Be retired, or in transition, from an accredited institution
- Must be approved by the Accreditation Commission on an annual basis
- Must attend AZA annual conferences
- Must remain current with AZA policies and practices
- Must thoroughly review the inspector's handbook and the accreditation standards annually
- Must stay abreast of current practices within the profession

#### **Criteria for Selection of Team Chair**

- Basic criteria for service as an accreditation inspector (see above)
- Participation as member of an inspection team at a minimum of two different institutions
- Involvement in accreditation process of own institution (preferred, not required)
- Strong leadership, organizational, and interpersonal skills
- Willingness to organize visit and facilitate discussion with team members and with staff of the host institution
- Ability to meet required deadlines and follow instructions for compiling the final report to the Commission

*Note:* Retired Fellows may not serve as Chairs

#### **Criteria for Determination of Team Size (Normally Three Persons)**

- Size of the institution and complexity of operations (smaller, less complex institutions would likely be assigned a two person team; larger, very complex institutions would likely be assigned a four person team)

#### **Criteria for Determination of Team Composition**

- One team member should be from the institution's previous inspection team, if available
- Team members' experience and expertise should parallel the general scope of the institution to be inspected (i.e., an aquarium should have a team with strong aquatic experience)

- Teams should include at least one member from an institution similar in size and budget to the institution to be inspected
- **Two Person Teams** should include one member with extensive experience in both operations and animal management, and one with extensive experience in veterinary medicine
- **Three Person Teams** should include one member with extensive experience in operations, one with extensive experience in husbandry and animal management, and one with extensive experience in veterinary medicine
- **Four Person Teams** should include one member with extensive experience in operations, one with extensive experience in husbandry and animal management, one with extensive experience in veterinary medicine, and one with experience particularly relevant to the institution being inspected (such as aquatics, elephants, birds, etc.)

### **Team Tools**

Available resources to the team include:

- **The Visiting Committee Inspector's Handbook** which fully explains the parameters for an institution to be considered accredited
- **The Accreditation Standards and Related Policies** containing standards and policies related to the accreditation process
- **The Primary Reviewer** (a member of the Commission or a Commission Advisor who serves as the Visiting Committee's direct line to the Commission)
- **The Vice President, Accreditation Programs**, who can answer policy questions and concerns, and consult with the team regarding issues that may surface during the inspection
- **The Program Assistant, Accreditation Programs**, who can answer questions about your assignment, scheduling, reimbursement of expenses, and the team's report
- **The Inspector Training Session** covers best management practices, legal safety requirements, related specialty concerns or specialty areas of knowledge, practical inspection techniques, evaluations of past inspections, report preparation, and the opportunity to discuss experiences with other inspectors.

### **General Requirements of the Team**

**Important Note:** *Failure to follow these necessary requirements may disqualify you from serving as an inspector in the future.*

1. **Attire:** Wear appropriate attire for meetings with governing authority members, and society officials (i.e., coats/ties, dress slacks, business attire). For the grounds inspection, consideration should be given to weather conditions at the time ("business casual" is acceptable).
2. **Confidentiality:** As a member of the Visiting Committee you are expected to sign an *Agreement of Confidentiality* (supplied by the accreditation department) regarding sensitive information contained in the application materials, the Visiting Committee Report, and discovered during the course of the inspection. Additionally, you must keep confidential your team's recommendation to the Accreditation Commission, and the contents of the Commission's letter sent to the institution after the hearing, reporting the outcome of the case.
3. **Review the Previous Inspection Report.** It is extremely important to closely review the report from the previous inspection to insure that items of concern indicated by the previous team are no longer an issue. The narrative report produced by the team should begin with a

statement noting that this was done (see "*Narrative Report*" pages 25-27).

- 4. Reimbursement of Team Member Expenses:** Each team member must individually submit to the accreditation department the *original receipts* for all expenses, *and* the reimbursement form included in the box of materials supplied to each inspector by the accreditation department. ***This must occur within 30 days of the inspection.*** For those who use a personal automobile to travel to an inspection, AZA will reimburse at 50 cents per mile, *or* for the cost of gas—*but not both*. Reimbursable expenses include transportation, parking, lodging, meals, cost of film and development of photographs taken by the team, postage, and any other reasonable cost associated with the inspection. If you are uncertain about an expense, check with the accreditation department. Upon submission of expenses, allow 4 weeks for receipt of reimbursement checks.

The following items are *not* reimbursed as part of inspection expenses: alcoholic beverages, movies, first or \*business class airfare (air fare will be reimbursed at coach rates), and expenses for a traveling companion. Those expenses should be removed prior to submission of the receipts. The institution's materials should *not* be returned to the Accreditation department, and shipping costs associated with doing so will not be reimbursed. (*\*Business class air fare may be acceptable on extremely long flights, but it must be approved in advance of purchase by the institution being inspected. Contact the accreditation department before purchasing tickets. Failure to obtain advance approval may result in reimbursement at coach rates only.*)

- 5. Scheduling and Travel Arrangements.** The team Chair will determine the dates of the inspection in consultation with team members and the institution's CEO/Director. Once dates have been agreed upon, the team Chair will consult with the institution's CEO/Director and then communicate with the team regarding the institution's preference for hotel and travel arrangements.

It is *extremely important* to the integrity of the accreditation process that the inspection and exit interview process *not be rushed*. The team chair will determine (in conjunction with the institution and previous inspectors) how many days are necessary to comfortably conduct the inspection. Please remember that rushing through an inspection, or an exit interview, is unacceptable and highly detrimental to the accreditation process. Should you not be able to fully commit to the length of time determined necessary by the team chair for the inspection, simply withdraw from participation on the team (see #10, page 9). *Do not schedule arrival and/or departure times that could potentially limit your availability to participate fully in the process from beginning to end.*

- 6. Institution's Materials:** Begin studying the institution's materials as soon as they arrive. There is a tremendous amount of material and you must be fully familiar with all of it well before the actual inspection. When the assignment is finished, the institution's materials should be destroyed. Alternatively, you may leave them with the institution before you depart from the inspection. *Do not* return them to the accreditation department. Shipping costs will not be reimbursed for those who do so.
- 7. Gifts.** Members of the Visiting Committee may not accept any gifts or privileges offered by the applicant institution.
- 8. Social Events.** While it is helpful for the applicant institution to arrange for a luncheon or dinner so that the Visiting Committee can meet staff members and members of the governing authority, the Visiting Committee should not participate in social functions beyond those required for the orderly discharge of its duties and responsibilities.

9. **Media Coverage.** It is inappropriate for the applicant institution to schedule media coverage during the inspection. However, this may be unavoidable in some cases. If media are present, select a team member to serve as spokesperson and schedule a convenient time to meet with media representatives. Because of the potential for distraction, and the confidentiality of the process, do *not* permit media to accompany you on the inspection. Do *not* answer questions or make any comments *specific to the case*, or reveal anything about the recommendations your team may be considering. Instead, talk *only* about AZA and the accreditation process, i.e., who we are, what we represent, how accreditation works, what it covers, why it is important, etc. Encourage media to obtain copies of AZA's accreditation standards and the "Guide To The Accreditation of Zoological Parks and Aquariums", available for download on AZA's website.
  
10. **Withdrawing From A Team.** Withdrawing from a team should be considered only in cases of extenuating circumstances, or because of scheduling conflicts. If you need to withdraw from participation on a team, please notify the team chair and the AZA office *immediately*. Once travel arrangements have been made, the decision to withdraw from a team should be made only in a genuine emergency. Should that occur, AZA will determine, based upon the circumstances, how reimbursement for travel expenses will be handled. Withdrawing from a team within three weeks (or less) of a pending inspection may result in postponement of the inspection unless a suitable and willing substitute can be located and sufficiently prepared in time to meet the originally scheduled inspection dates.

### **Responsibilities of the Team**

1. **Allow Sufficient Time.** It is extremely important when scheduling your trip to make sure that you are available to the team throughout the inspection process. Should you not be able to fully commit to the length of time determined necessary by the team Chair for the inspection, simply withdraw from participation on the team (see #10 above). *Do not schedule arrival and/or departure times that could potentially limit your availability to participate fully in the process from beginning to end.* The amount of time required to inspect a small institution may be as little as 1½-2 days. A larger institution may take 3-3½ days, and a very large institution 4-5 days. If the Chair has not previously visited the institution, it is recommended that a member of the previous Visiting Committee, or the Institution's CEO/Director, be contacted to aid in determining how many days will be sufficient. Once that decision is made, team members should make travel arrangements accordingly.
  
2. **Team and Individual Coverage.** The team should inspect the facility as a unit and remain together as much as possible during the initial inspection. However, after the initial tour of the facility takes place, team members may arrange to spend additional time in the area of the institution corresponding to a team member's particular area of expertise or interest.
  
3. **Communicate Lesser Concerns With Institution Director Daily.** Ask the institution's CEO/Director and other senior staff if he or she would like your team to communicate any *lesser* concerns identified as you note them, rather than waiting until the entire List of Concerns is reviewed during the exit interview. It may be possible for the institution to address some of the lesser concerns prior to the exit interview. If these items are satisfactorily completed, they can be eliminated from the final List of Concerns during the exit interview.
  
4. **Review the Previous Inspection Report.** Make certain to thoroughly review the previous

team's inspection report and list of concerns to ensure that all items of concern that were listed at that time are no longer an issue. If you find any items that still exist, regardless of their nature, you should consider them as major concerns due to the fact that they have not been addressed. Make certain to state your findings regarding previous concerns at the beginning of the narrative report (*see Narrative Report, pages 25-27*).

5. **The Report and Post-inspection Team Meeting.** It is recommended that, after the inspection and before the exit interview, the team meet to complete the report form and to determine which items are "Questionable" or "Unacceptable" so that they are included when compiling the List of Concerns (NOTE: this can also be done daily, as applicable, during the inspection). All questions must be answered with "Yes", "No", or "N/A" **and** "A", "Q", or "U". If "Q" or "U", you **must** provide a brief explanation in the "Comments" area at the end of that section, and again in greater detail in the narrative report. "Q"s and "U"s must also be included on the list of concerns given to the CEO/Director during the exit interview. (*Please see pages 23 - 25 for more details and an example of a completed page from the Report Form.*)
6. **Interview Staff At All Levels.** Be sure to meet, *in confidence*, with staff at all levels. It is important to interview senior staff. However, it is also important to interview members of the front line staff, such as junior curators, keepers, etc. This should be done in confidence, and preferably one-on-one. However, at large institutions with sizeable staffs it may be necessary to conduct group sessions instead of private interviews. Group sessions should be held without supervisory staff present. Attendees should be encouraged to voice opinions, either positive or negative, and should be constantly reminded that names will remain confidential. Members of the inspection team should post their contact information (phone and/or e-mail) visible for all to see and staff should be offered the option of contacting any member of the team privately if they are more comfortable doing so than speaking in a group.
7. **List of Concerns.** After completing the report form, the team should discuss overall impressions, and determine which items should be placed on the *List of Concerns and Points of Achievement*. A form for this purpose appears at the end of the Visiting Committee Report. The team should complete the form during the post-inspection meeting and photocopy it prior to the exit interview. **Be sure to provide a copy to the institution's Director.** NOTE: *Forms may be hand-written on-site for presentation during the exit interview, but should later be typed exactly as written into the electronic edition of the Visiting Committee Report Form (see pages 28-29 for more information and an example).*
8. **Exit Interview.** Allow sufficient time to conduct a thorough exit interview with the Director or a designated representative. The exit interview is a critical piece of the accreditation process, and it is detrimental for the exit interview to be conducted in a hurried manner, or "on the way to the airport". The inspection **must** be managed to allow enough time to prepare for and conduct this interview without the need to rush. Critical to success in this regard is to ensure that enough time has been scheduled to conduct the inspection from the very beginning (*see item 1, page 9*).

The purpose of the exit interview is to provide the institution's staff with the List of Concerns *and* the Points of Particular Achievement your team noted during the inspection. If the CEO/Director can present evidence satisfactory to the inspection team that an item on the List of Concerns has been addressed, that item may be eliminated from the list during the exit interview. **Do not** indicate what your recommendation to the Commission will be. The final decision is made by the Commission, and it is possible that the Commission may not follow the recommendation your team makes. The Commission may believe that the institution has made sufficient progress between the time of your visit and the hearing before the Commission, *or* the Commission may have access to information not available to you at the

time of your inspection. Remember to include any items designated as “Questionable” or “Unacceptable” in your List of Concerns (see *The Report and Post-Inspection Team Meeting, page 10*).

9. **Instructions for Photographs.** *Take color photographs* (or assign a team member to do so). The photographs your team takes are an extremely important part of your inspection, and serve as a photo record of how the institution appeared at that time. It is essential that you take photographs that present an accurate overview of the physical institution as it exists, and as seen through the eyes of its daily visitors. It is important to take photographs that will “walk the Commission” through the institution as it appeared during your visit. Be sure that the photographs include all parts of the institution, including the problem areas you identify (if any). It is equally important that photographs be labeled in some manner, explaining what each photograph depicts. For digital photos, please either add text directly to the photograph or include a written key with photograph number and description (we will add the text to the photo for you). Please eliminate all duplicate photos prior to sending. Digital photographs should be in JPEG format only, and limited in size to 450 – 850 KB (or smaller). If you are unable to reduce the size of your photos, submit them as is (we will reduce). Photos may be submitted by email, flash drive, or compact disc. [*Note: digital photographs should not be imbedded into the narrative report.*]
10. **Disposal of Institution’s Materials.** Once you no longer need them, the institution’s materials should be destroyed, or they may be returned directly to the institution at the time of the inspection. Do *not* return them to the accreditation department. Shipping costs will not be reimbursed for those who do so.

### **Responsibilities of the Chair**

1. **The Role of Chair.** As Chair of the Visiting Committee you are expected to act as its leader, and to take charge of seeing that goals are set and accomplished *in accordance with the instructions of the Commission as outlined in this handbook*. You are responsible for scheduling the inspection, coordinating the team, communicating with the Primary Reviewer, and insuring that the report is written and formatted according to Commission instructions (included in this handbook), and delivered to the Vice President, Accreditation Programs and the Primary Reviewer by the established deadline. The team Chair is also responsible for insuring that proper procedures are followed throughout the inspection.
2. **Schedule the Trip.** Your first responsibility as team Chair is to *promptly contact* all members of the Visiting Committee *and* the institution’s CEO/Director to determine mutually agreeable inspection dates for as *soon* as can be arranged. Remember, the sooner the inspection takes place, the more time the institution will have to make corrections prior to its hearing before the Accreditation Commission, *and* the more time the Chair will have to compile the report. Once inspection dates are set, promptly inform the Primary Reviewer *and* the Vice President, Accreditation Programs of those dates.
3. **Allow Sufficient Time.** It is extremely important when scheduling the inspection to *allow sufficient time to conduct a thorough and professional inspection, meet as a team, and conduct an exit interview*. The amount of time required for a small institution may be as little as 1½-2 days. A larger institution may take 3 days, and a very large institution 4-5 days. If the Chair has not previously visited the institution to be inspected, it is recommended that a member of the previous Visiting Committee, or the Institution’s CEO/Director, be contacted to aid in determining how many days will be sufficient. Rushing through an inspection, or an

exit interview, is unacceptable and highly detrimental to the accreditation process. This cannot be emphasized strongly enough. Travel arrangements should be made with this in mind.

4. **Determine Hotel Arrangements.** Once inspection dates have been determined, ask the institution's CEO/Director about the institution's preference for accommodations at a nearby hotel. Individual team members may contact the recommended hotel to make reservations directly, or the institution may choose to make these arrangements for the team. That decision is left to the preference of the institution, and the team Chair should determine that preference and communicate it to team members.
5. **Provide Advance Notice to Staff and Others With Whom You Wish To Meet.** Review the materials you have received and determine with whom you wish to meet while there. Contact the institution's CEO/Director and provide him or her with a list of those people *well in advance* of the scheduled trip. You may add to that list once you are actually on site.
6. **Contact the Primary Reviewer Before You Go.** Prior to departing for the inspection, the team Chair should contact the Primary Reviewer to discuss any concerns or issues the Primary Reviewer or team Chair may have. *(Note: in the case of new applicants [see page 30], the Primary Reviewer automatically serves as team Chair.)*
7. **Pre-inspection Team Meeting.** Schedule sufficient time for the inspection team to meet privately with each other *before* the inspection. A dinner meeting the night before, or a breakfast meeting the morning of the inspection are two possible methods that work well. Talk about the materials received from the institution and determine what concerns, if any, other team members have. It is helpful to develop a tentative "agenda" for the inspection (*see page 29 for an example*).
8. **Plan Sufficient Time For Meetings.** Schedule sufficient time for your meetings with staff, members of the governing authority, members of the support organization, and/or volunteers. Let them know that the interview is *confidential* and that they may speak freely.
9. **Inspection Team Signatures.** It is helpful, if possible, to obtain the signatures of the Visiting Committee members on the Report Form *prior* to departing from the inspection.
10. **Provide Copy of List of Concerns.** The Chair should provide a copy of the list of concerns to the Vice President, Accreditation Programs upon returning from the inspection.
11. **Cover Letter, Report Form, and Narrative Report.** It is the Chair's responsibility to ensure that these documents are prepared correctly, and submitted on time. See the individual sections in this handbook on these documents for specific instructions.
12. **Submitting the Finished Report On Time.** While all of the chair's responsibilities are important, ensuring that the report is delivered to the Vice President, Accreditation Programs, by the established deadline is critical. *Email* your completed report to the Vice President, Accreditation Programs, and the Primary Reviewer, by the established deadline. Failure to submit the report when due may jeopardize the entire process, and ultimately result in the case being delayed for six months or more. If additional time is needed, contact the Vice President, Accreditation Programs. *[Note: In extenuating circumstances the Vice President, Accreditation Programs has the authority to make whatever adjustments are necessary to produce the report in a timely fashion.]*

The finished, emailed report should consist of *three* separate documents: (1) cover letter, (2) report form (including the list of concerns), and (3) narrative report. Immediately after emailing these three components by the established deadline, send the following items to the Vice President, Accreditation Programs, by traceable mail (Fed-Ex, UPS, Registered Mail, etc.): •Cover letter on AZA letterhead with original signature, •signature page from report with signatures of all inspectors, and •photographs.

## THE INSPECTION AND THE WRITTEN REPORT

### ***General Pointers For The Inspection***

**Allow Adequate Time:** Schedule adequate time to see everything, ask questions, and make notes as you go. Institutions have been preparing for months for the inspection, and the team must make every effort to see all areas of the operation while visiting the institution.

**Avoid Recommending Solutions:** Identify problems in accordance with accreditation standards and policies. Avoid recommending specific solutions to those problems. For example, recommend that the fence be painted, *not* that the fence be painted *white*. If the institution *asks* for your ideas on fixing an identified problem, you may offer your opinion. However, you should clearly state that it is *your* opinion based on your knowledge and experience, and should not be considered as a recommendation of the Accreditation Commission.

**Base Judgment On Existing Operation:** While future plans should be considered in a general sense, you must judge each institution on what exists at the time of your visit—*not* on what is planned for the future.

**Communicate Lesser Concerns As Noted.** The team Chair should ask the institution's CEO/Director if he or she would like to be informed of any *lesser* concerns at the time the team notes them, rather than waiting until the entire List of Concerns is reviewed during the exit interview. It may be possible for the institution to address some of the lesser concerns during your visit. If these items are satisfactorily completed, they should be eliminated from the final List of Concerns during the exit interview.

**Consistency:** All institutions undergoing the accreditation process are entitled to a consistent visiting team approach to their evaluation. Training sessions, the *Visiting Committee Report Form*, and the *Inspector's Handbook* (including the Accreditation Standards) form a basis for such an approach. Inspectors must be knowledgeable of AZA Accreditation Standards and related policies, and base judgments on those standards. The *Inspector's Handbook* and a copy of the *Accreditation Standards & Policies* should be carried with you during the inspection for easy reference. If uncertainty exists regarding the application of a standard, an attempt should be made to contact the team's assigned Primary Reviewer or the Vice President of Accreditation Programs.

**Interviewing Staff.** Interviews with key staff are important. Staff interviews should be conducted in private, without the presence of other staff and/or supervisors. Encourage staff to talk freely, *in confidence*, with the team. Include keeper staff in this process as much as possible. If the number of keeper staff at an institution is too large to allow for individual interviews, speak with keeper staff *as a group* and encourage them to speak confidentially with

any member of the team at a later point during the inspection, or at a convenient time by phone or email thereafter. Seek out individual staff when touring the facility and ask questions.

**Photographs:** It is extremely important that you take photographs and that the photographs present an accurate overview of the physical institution as it exists, and as seen through the eyes of its daily visitors. Please be sure that the photographs include all parts of the institution, both the positive and problem areas (if any). (See *“Instructions For Photographs”*, page 11)

**Positive and Negative Observations:** The Commission relies on the Visiting Committee to provide a clear picture of the applicant institution's operation. Therefore, please report both positive *and* negative observations. The List of Concerns contains a section for “Points of Particular Achievement” which should include examples of areas in which the institution is excelling, and acknowledgements of noteworthy things the institution has accomplished.

**Report All Potential Problems:** Everything that you believe does not follow accreditation standards and/or related policies, best practices, or AZA philosophy should be discussed and noted in the final report. Items or issues that may seem insignificant could be indicative of bigger problems. If you are uncertain about whether a particular situation is acceptable or not, discuss it with the team and call the Primary Reviewer or the Vice President of Accreditation Programs to make the determination. When in doubt, include it on the List of Concerns.

### **Primary Focus Areas of the Visiting Committee**

**Definition of Zoological Park/Aquarium.** Only institutions meeting **all** aspects of the definition of a zoological park or aquarium should apply. For the purposes of AZA's accreditation program, a zoological park or aquarium is defined as: *a permanent institution which owns and maintains wildlife, under the direction of a professional staff, provides its collection with appropriate care and exhibits them in an aesthetic manner to the public on a regular basis. The institution, division, or section shall further be defined as having as their primary mission the exhibition, conservation, and preservation of the earth's fauna in an educational and scientific manner.*

For clarification, the key words used in the definition are further defined as follows:

1. PERMANENT (cultural institution): an institution founded by an authority which intends it to continue indefinitely.
2. WILDLIFE: non-domesticated animal life.
3. PROFESSIONAL STAFF: at least one paid full-time employee who commands an appropriate body of special knowledge and has the ability to reach zoological park or aquarium management decisions consonant with the experience of his peers and who has access to and knowledge of the literature of the field.
4. AESTHETIC: pertaining to the beautiful.
5. REGULAR BASIS: regular hours so that access is reasonably convenient to the public.

**Preamble And Primary Focus Areas.**

When evaluating an institution, consider the Preamble to the accreditation standards:

***PREAMBLE***

Zoos and aquariums accredited by the Association of Zoos & Aquariums (AZA) are continuously evolving. Standards are constantly being raised, ensuring that animals in AZA institutions are receiving the best possible care from highly qualified staff, in modern facilities that represent the state-of-the art in our industry. 21st century AZA accredited institutions and certified related facilities are expected to be leaders in the field and to embrace the highest quality facilities, programs, and staff available. Animals must be well cared for and displayed in naturalistic settings that provide an educational experience for visitors and an appropriate enriching environment for the animals, including proper social groupings. The species included in the collection must be managed on a regional basis to ensure long-term genetic viability of the species, which means careful planning of resource allocation, ex-situ breeding, and ex-situ/in-situ conservation and research.

The phrase “modern zoological practices and philosophies” refers to practices and philosophies that are commonly accepted as the norm by the industry. The word “practices” represents the tangible while “philosophies” refers to an overall perspective. AZA accredited institutions and certified related facilities must be incorporating modern zoological practices and philosophies as basic tenets.

Following are the areas of primary focus for evaluating an institution. These are intended as *examples*, and should not be considered as being definitive or complete. Issues are broken into the main section headings covered by the Accreditation Standards (see pages 4 – 20 of the 2010 “*Accreditation Standards and Related Policies*” booklet).

**Animal Collection:** Pay close attention to the size *and* nature of the living environments provided the collection. Be sure to note whether the physical *and* psychological well-being of the collection is being met. The institution’s animal record-keeping system is of primary concern to the Accreditation Commission and should be carefully reviewed.

1. View the entire animal collection.
2. Ascertain that the institution has a sufficient Institutional Collection Plan
3. Examine *all* animal facilities, including those not located on site
4. View the animals used in off-premises programs
5. Select records at random to verify up-to-date status
6. Review records for collections *not* on ISIS (i.e., fish, insects, etc.)
7. Examine animal diets, food coolers, freezers, etc.
8. Look for signs of pests and determine what kind of pest control solutions are being utilized
9. Check graphics for SSP and endangered species designations
10. Determine if staff is aware of the institution’s euthanasia policy
11. Make certain the collection is protected from excessive heat and cold
12. Make certain the collection is provided sufficient shade in outdoor exhibits
13. Make certain the collection has access to potable water both on and off exhibit.
14. Make sure that each animal is maintained in numbers sufficient to meet their social and behavioral needs (display of single animals should be avoided unless biologically correct for that species)

15. Make certain the entire collection is being provided with appropriate enrichment on a regular and frequent basis, and the institution has a sufficient written enrichment program
16. Make certain that exhibit enclosures are of sufficient size and nature to provide for the psychological and physical well-being of each animal
17. Make certain that exhibit enclosures, and holding areas are of sufficient design to prevent unintentional animal egress
18. If the institution has contact areas, review written policy for animal and public safety
19. View the animals used in public contact areas
20. View the animals used in education programs and the written policy for their use
21. Verify that the facility's acquisition/disposition policy incorporates, at minimum, all requirements contained in AZA's A&D policy
22. Verify the process utilized for acquisition and disposition of animals with *several* members of the staff at all levels
23. Randomly pull A&D records for review
24. Make certain that, if the institution surpluses animals to non-AZA accredited facilities, appropriate measures are taken to ensure that the non-AZA accredited facilities are willing and able to provide proper care for the animal(s) and that the disposition is done in accordance with AZA's Acquisition & Disposition Policy.
25. If the institution is using unknown collectors of aquatic animals, determine how the institution is verifying that collection procedures used by the collector do not cause environmental abuse
26. If the institution is dealing with commercial collectors, determine how the institution is verifying that the collectors are properly permitted to legally conduct collections of animals from the wild
27. If the institution holds elephants, make certain it is in compliance with the AZA Standards For Elephant Management And Care
28. Make certain that the institution has a clear process for identifying and addressing animal welfare concerns

### ***Institutions Maintaining Elephants:***

1. A written elephant management protocol must exist. Review that document. Make sure it includes: ·management policies, ·staff responsibilities, ·proper training techniques if in a protected contact style of management or proper use of an ankus if in a free contact system, ·behavioral profiles on each elephant, ·incident reports, ·acceptable discipline methods, ·chaining practices, ·staff training protocols for new elephant handlers, ·foot care schedules, etc. Is the document acceptable? Are its policies and practices within current AZA standards for elephant management and care (see pages 28-37 of the 2010 "*Accreditation Standards and Related Policies*" booklet).
2. Each institution maintaining elephants must have an individual who is designated as elephant manager. Verify that this person's responsibilities include training staff, and developing and maintaining the elephant management program. It is desirable for this person to have completed the AZA Principals of Elephant Management training course. Inquire as to whether this is the case.
3. Make certain that the institution has a minimum of two *qualified* elephant keepers present during any contact with elephants.
4. Determine if continuing education and training are supported by management staff.
5. Is there a written training protocol for training new elephant staff? If so, ask to see it.
6. Determine if elephant staff are aware of, or involved in, AZA, EMA, AAZK or the elephant TAG.
7. Have the elephant staff demonstrate various required behaviors. Have these performed by different qualified trainers.
8. Make sure the elephants have access to natural substrate for dusting.

9. Make sure the elephants have shade provided during the heat of the day in a sufficient amount to accommodate *every* animal.
10. Review the most recent incident report.

**Veterinary Care:** The institution's animal health care program must be under the direction of a licensed veterinarian; an appropriate number of persons must be employed in the animal health care program; and the extent of professional services provided the collection must be judged adequate for that particular institution. Institutions maintaining collections of venomous animals must have an appropriate supply of sera available and policies/procedures in place for the safe handling of those animals. The alarm system and emergency procedures should be closely reviewed. The institution's animal record-keeping system is of primary concern to the Accreditation Commission and should be carefully reviewed.

1. Determine if the institution follows the guidelines of the American Association of Zoo Veterinarians [[http://www.aazv.org/associations/6442/files/veterinary\\_standards\\_2009\\_final.docx](http://www.aazv.org/associations/6442/files/veterinary_standards_2009_final.docx)]
2. Check the animal record-keeping system: is it adequate?; is it kept current?; randomly pull medical records for review
3. Determine if the animal health care program is sufficiently staffed
4. Determine if the extent of veterinary services provided the collection is sufficient
5. Examine the emergency medical equipment bag
6. Carefully review USDA reports (check areas of concern, and determine what is being done to correct them)
7. Evaluate quarantine procedures and their implementation
8. Evaluate quarantine, isolation, and hospital facilities
9. Check alarm systems and emergency procedures; ask random staff the procedure for retrieving an escaped animal
10. Review drug emergency protocol (locked areas, authorized staff, etc.)
11. Determine the veterinarian's response time from home in an emergency
12. Confirm that policies and procedures for handling venomous animals are adequate, and that adequate sera is available
13. Determine if drugs used in aquariums or aquatic exhibits comply with FDA guidelines
14. Evaluate animal food prep facilities, procedures, and location
15. Determine if animal food, especially seafood products, are purchased from sustainable or well-managed sources

**Conservation:** Conservation must be an element in the mission statement of the institution, and all institutions must have a written conservation plan. The scope of the institution's conservation programs should be closely reviewed. Each institution is required to participate in every SSP that pertains to an animal in its collection, although it may decide at what level. Regarding participation in TAGs, CAPs, and other programs, consideration should be given to the size, budget, and other areas affecting these programs.

1. Determine if conservation is a key element in the institution's mission
2. Determine if the facility is contributing their "fair share" to AZA conservation programs based upon budget and/or staff size
3. Review the number of staff dedicated to conservation programming
4. Determine if the institution has an adequate conservation plan/strategy
5. Review studbooks published by the institution
6. Determine if all SSP animals are registered with the appropriate SSP
7. Determine level of support of, or methods of participation in, wildlife conservation programs
6. Determine the level of involvement in resource conservation
7. Determine staff attendance at AZA conferences, SSP, and TAG meetings, etc.

8. Ask what efforts are undertaken for energy and natural resource conservation (i.e., recycling, water conservation initiatives, etc.)
9. Review local and national program literature
10. Review participation in conservation programs with colleges and universities
11. The institution's Annual Report on Conservation and Science (ARCS reports) for the previous five years.

**Education and Interpretation:** Education must be an element in the mission statement of the institution, and all institutions must have a written education plan that matches current industry standards. Among the things we will closely examine are:

1. Determine if education is a key element in the institution's mission
2. Review the number of staff dedicated to education programming
3. Determine that one paid staff member is dedicated to education on (at least) a part-time basis
4. Find out how the education message is conveyed to the casual visitor
5. Examine several publications, brochures, or other printed material
6. View the classrooms, teaching areas, etc.
7. Explore the availability of funds allocated for education programs
8. Check to see that exhibit signage and graphics contain appropriate information and are in good condition.
9. Determine what the level of education department contact is with appropriate local schools, colleges, and other academia
10. Review the docent, and outreach programs
11. Determine what level of outreach programming exists and if appropriate animals are being used
12. If animals are being used in off-site situations, review the program to determine if it is appropriate
13. Determine who develops and designs the institution's graphics

**Research:** The scope of the institution's research programs should be closely reviewed. Consideration should be given to the size, budget, and other areas affecting these programs.

1. Review the protocol for evaluating potential research projects
2. Determine how research projects are coordinated
3. Explore how research is viewed by staff
4. Verify if research information is published in appropriate journals
5. Determine the level of involvement with local and regional academia

**Governing Authority:** The governing authority must be supportive of the institution abiding by the AZA Code of Ethics and Charter & Bylaws, and must recognize and support the institution's goals and objectives.

1. Ask the governing authority what the Director's role is in the decision making process
2. Explore the process of hiring and firing personnel
3. Determine the lines of authority for acquisition and disposition of animals
4. Evaluate the relationship between the governing authority and the Director
5. Determine the levels of control on the part of the governing authority (appropriate or inappropriate)
6. Determine the governing authority's role in the day-to-day management of the institution, including staff and programs

**Staff:** A key element of an institution's successful operation is maintaining a staff sufficient in qualification and number. Effective communication, working relationship, and training are also important.

1. Become familiar with the qualifications of staff and review resumes and job descriptions
2. Randomly talk to staff about their responsibilities
3. Discuss with management its relationship with staff, including problems and proposed solutions
4. Discuss with individual staff their relationship with senior management, including problems (make certain to assure confidentiality of statements made)
5. Meet with keeper staff individually, if possible, but in cases of very large institutions, meet in one large group without management present, and discuss relationship with management, including problems (make certain to assure confidentiality of statements made)
6. Determine if lines of authority are clearly defined for staff
7. Evaluate staff training for detail, frequency, appropriateness, etc.
8. Investigate staff involvement with AZA, SSPs, TAGs, etc.
9. Determine if appropriate funds are available for staff travel and participation in meetings, and which staff members are eligible to participate
10. Review staff salaries to determine if levels are appropriate
11. Review the volunteer programs and training

**Support Organization:** A support organization which has goals inconsistent with those of the institution may jeopardize the institution's work.

1. Ask society representatives their role at the zoo or aquarium
2. Evaluate the society's support and fund-raising efforts
3. Review how funds are allocated and distributed
4. Review financial reports and how funds benefit the zoo or aquarium
5. Ask the society Director about the relationship between the society board and staff
6. If no support organization exists, consider whether having one might be helpful

**Finance:** An institution must provide sufficient evidence of its financial stability, including contingency plans, and funding for capital improvements and maintenance.

1. Determine if the facility will be solvent for the five-year accreditation cycle, including reviewing the availability of long-term funding, contingency plans, emergency funds, etc.
2. Ask the Director if budget cuts or other financial problems are anticipated in the future
3. Review all financial records
4. Review the budgeting process, including who has control, how requests originate, the input of entrance and mid-level managers, the role of the governing authority in the process, in-house controls on spending, the auditing process, etc.

**Physical Facilities:** While the Commission is interested in an institution's future plans, accreditation will be based upon its operations and facilities at the time of the inspection.

1. Make your recommendation to accredit, table, or deny *based on what you see at the time you visit the institution*, not on plans for the future
2. Are animal buildings in good condition?; do the animal facilities meet or exceed all relevant federal and state requirements?
3. Review the maintenance program, storage, and equipment. How do the overall grounds look? How much deferred maintenance does the institution have?
4. Consider the overall condition, suitability, and appearance of exhibits: are they in good condition?; are they attractive, and appropriate for the species contained?; do they represent modern zoological practices and philosophies?
5. Look at exhibit furniture: is it appropriate?; is there sufficient quantity?
6. Are the exhibit groupings appropriate?

7. Is there adequate ventilation and light in buildings and holding areas?
8. Check exhibits from the service areas (is space sufficient for safety?)
9. Check for regular program of water quality monitoring for *all* animals, including written records
10. Determine if "AZA Accredited" stickers are displayed

**Safety/Security:** The security program employed by that particular institution should be judged sufficient to provide appropriate protection for the animal collection, its employees, and the visiting public. With respect to security, judgment should be based on the operation, location, size, and physical facilities. Procedures must be in place to reduce the risk of injury by potentially dangerous animals. The alarm system and emergency procedures should be closely reviewed.

1. Determine that drills are being conducted regularly
2. Determine when the most recent drills were conducted and what type of drills they were
3. Determine if escape procedures are posted in animal backup areas
4. Review the files on the most recent safety incidents (i.e., escapes, accidents, injuries, attacks, public problems)
5. Ask staff at random if they know the process of treating an injury to a visitor, or where the nearest first-aid station is
6. Determine if the exhibits are safe for the animals, the staff, and the public
7. Observe public walkways, steps, and other public areas to determine if they are free of debris and in good repair
8. Check work areas to make sure they are free of clutter and safe areas in which to work
9. Make sure that Material Safety Data Sheets (MSDS) are located in areas of easy access to employees
10. Make sure that flammables are stored properly
11. Make sure that electrical service in all wet environments, aquatic exhibits, and associated service areas is equipped with ground fault circuit interrupters (GFI)
12. Determine if appropriate safety procedures are in place for potentially dangerous animals
13. Check alarms systems and emergency procedures
14. If the institution is using underwater diving with compressed air, determine if they are meeting minimal operational safety standards for diving
15. Verify that adequate security is provided for the animal collection both day and night
16. Verify that security personnel are familiar with and trained to act in accordance with institution procedure and policy
17. Check instructions to security personnel regarding nightly rounds, emergencies, etc.
18. Determine if incidents of vandalism have occurred and, if so, how prevalent the problem is and how is it being addressed
19. View stored firearms, if applicable; who has access?
20. Determine that the perimeter fence is separate from all exhibit fencing, and is intact and in good condition

**Guest Services:** While the Commission is interested in an institution's future plans, *accreditation will be based upon its operations and facilities at the time of inspection and review.* Among the things we will closely examine are:

1. Attempt to view the facilities from the public's perspective, for example: enter from the public entrance; inspect public restrooms, are they conveniently located?; inspect the drinking fountains, are there enough of them?; are refreshment stations conveniently located?; are there enough rest stops and benches throughout the facility?; taste the food being sold to the public; is the institution ADA compliant?; etc.
2. Way-finding: are maps and signs available, clear, and easy to locate?

3. Are the overall aesthetics and design of the exhibits appropriate and in step with modern zoological practices?
4. Are the buildings and grounds well kept?
5. Are trash receptacles and trash collection sufficient?
6. Is ventilation adequate in public buildings?
7. Are "AZA Accredited" stickers and/or signs displayed throughout the institution? [Note: applies to *currently accredited* institutions only]

**Other Programs/Activities:** An institution should have a strategic and/or master plan to guide the institution in its development.

1. Ask what other programs are being developed or are already in place
2. Ask to see the formal master plan and determine if it is on schedule, being followed, etc.
3. Ask to see the formal strategic plan, if applicable

### **Commonly Found Concerns & Primary Considerations**

Following are concerns commonly found during inspections:

Commonly found *major* concerns include:

- Unresolved governance issues
- Unsigned/unconsummated agreements
- Low staffing levels
- Incomplete or lack of written safety procedures/manuals/protocols
- No duplication of records or failure to store duplicate set in separate location
- GFI circuits in wet areas

Commonly found *lesser* concerns include:

- Peeling Paint
- Rusty doors and fencing
- "Permanent" extension cords
- Cluttered yards and storage areas
- Rotted (wet and dry) wood and fencing
- Potholes in asphalt
- Cracks in concrete visitor walkways
- Dark work areas
- Insufficient safety barriers/ladders/fencing
- Missing or improperly mounted fire extinguishers
- Inaccessible MSDS sheets

### ***AUTOMATIC MAJOR CONCERN:***

**Concerns regarding comfort or welfare:** any concern identified that affects the comfort or welfare of a member of the institution's collection is considered a "Major Concern".

***Primary considerations include:***

- Acquisition and Disposition.** The Visiting Committee shall ascertain the institution's acquisition and disposition policy adheres, at minimum, to AZA's Acquisition and Disposition policy, and that the policy is being followed, including dispositions to non-accredited institutions (if any).
- Collection.** The Visiting Committee shall consider the size *and* nature of the living environments provided the collection, and whether the physical *and* psychological well-being of the collection is being met. The scope of the institution's enrichment program will be closely reviewed. The Visiting Committee will also check to be sure that the institution's collection plan adheres, at minimum, to accreditation requirements.
- Collection Health Care.** An institution's animal health care program must be under the direction of a licensed veterinarian, an appropriate number of persons must be employed in the animal health care program, and the extent of professional services provided the collection must be adequate.
- Collection Security.** The security program employed by the applicant institution shall be sufficient to provide appropriate protection to the animal collection. The Commission shall base its judgment with respect to security on the operation, location, size, and physical facilities.
- Conservation and Education.** The scope of the institution's conservation and education programs will be closely reviewed. The institution's Annual Report on Conservation and Science (ARCS reports) will be reviewed for each of the five years since the institution's previous inspection. Consideration is given by the inspectors and the Commission on the size, budget, and other areas affecting these programs. However, conservation and education must be key elements in the institution's mission, and the institution must participate in every SSP program that pertains to an animal held in its collection. Institutions may indicate at what level they desire to participate in each SSP.
- Dangerous or Venomous Wildlife.** Institutions maintaining collections of venomous animals must have an appropriate supply of sera available and policies/procedures in place for the safe handling of those animals. Likewise, procedures must be in place to reduce the risk of injury by potentially dangerous animals. The alarm system and emergency procedures will be closely reviewed by the Visiting Committee.
- Finance.** The institution's financial health will be reviewed and considered in terms of meeting the needs of the institution for the five-year period of accreditation. Contingency plans will also be reviewed.
- Master Plans, Policies, & Procedures.** Master plans, written policies, and procedures should be reviewed on a regular basis and updated as necessary, and should be of a quality on par with other accredited institutions of similar size and nature.
- Physical Facilities:** The physical condition of the institution will be closely observed, and maintenance programs reviewed. Aesthetics are important, too. Antiquated facilities will be evaluated and may be considered below standard.
- Record Keeping.** The institution's animal record-keeping system is of primary concern to the Accreditation Commission and will be carefully reviewed by the Visiting Committee.

•**Safety.** The Visiting Committee shall review the institution's safety programs employed for the protection of its employees, the visiting public, and the animal collection. Written policies and training will be reviewed, and inspectors will look for potential safety hazards in both public and restricted areas.

### **Examples of the Written Report**

Following are examples of the four components comprising the Visiting Committee Report: the cover letter, report form, narrative report, and list of concerns/points of achievement. These examples demonstrate how the complete report is to be prepared.

#### **Cover Letter (Letter of Recommendation)**

The cover letter forwarding your final report should state your Committee's recommendation for granting, tabling, or denying accreditation, and anything else you believe the Commission should know, both positive and/or negative. This letter is *not* shared with the institution. It is the document in which you have an opportunity to inform the Commission of your team's personal opinions, observations, and insights. Please be sure to use Accreditation Commission letterhead (supplied with your original package of materials) for the cover letter.

*Possible Recommendations:* In addition to a straight recommendation of accreditation, tabling, or denial, other appropriate recommendations include: \*\*tabling unless a significant portion of the listed concerns are completed; \*\*denial unless a significant portion of the listed concerns are completed.

#### **Example 1:**

The Visiting Committee inspected this facility on xxxx. The Director has been given the list of concerns noted by the Committee during the exit interview. A copy of that list is included with this report. Please see the narrative portion of this report for details regarding these concerns. The Visiting Committee recommends continuation of accreditation.

#### **Example 2:**

The Visiting Committee inspected this facility on xxxx. The Director has been given a list of concerns noted by the Committee during the exit interview. A copy of that list is included with this report. Many of the concerns were of a sufficient nature that this Committee recommends tabling of this institution's accreditation until or unless the majority of these concerns have been sufficiently addressed. Please see the narrative portion of the attached report for details regarding these concerns.

#### **Example 3:**

The Visiting Committee inspected this facility on xxxx. The Director has been given a list of concerns noted by the Committee during the exit interview. A copy of that list is included with this report. There were numerous concerns, including some of a fairly significant nature. It is the opinion of this Committee that the institution cannot address the majority of these concerns within a year's time, and therefore recommends denial of accreditation. Please see the narrative portion of the attached report for details regarding these concerns.

### **Visiting Committee Report Form Questionnaire**

It is important that all team members participate in completing the report form, and in the recommendation the team will make to the Accreditation Commission. It is suggested that the

team complete the report form before compiling the List of Concerns (required prior to the exit interview). The List of Concerns must contain the items marked "Q" and "U" from the report form. It may be helpful for the team to meet nightly during the inspection to discuss and complete the questions on the form.

**Current Version.** Before proceeding, first *make sure* you have the correct edition of the report form. You must have the edition matching the year in which you *received the assignment*, which may not necessarily be the year in which you are writing the report (assignment to a team in October, for example, may not see an inspection and report generated until January or February).

**"A", "Q", "U" Designations.** All questions must be answered with "Yes", "No", or "N/A" **and** "A", "Q", or "U" (Acceptable, Questionable, or Unacceptable). If "Q" or "U", you **must** provide a brief explanation in the "Comments" area at the end of that section, and again *in greater detail* in the narrative report. "U"s must also be included on the list of concerns given to the CEO/Director during the exit interview.

**Question Aids (<A> and <A+>).** Answers to some questions in the Visiting Committee Report form can be found in the supporting materials alone. These questions are identified by the symbol <A> appearing at the end of the question. Other questions require *two* sources to determine an answer: the supporting materials *and* additional investigation (i.e., questioning and/or observing during the inspection). Those questions are identified by the symbol <A+> appearing at the end of the question. Questions with *no symbol* can be answered *only* by questioning appropriate staff, or from information obtained or observed during the actual inspection.

**Electronic Format.** A hardcopy of the Report Form is supplied for use on site in case access to a laptop is not available. However, the final report must be submitted using the electronic version, which is emailed to you by the accreditation department. When you have finished compiling the full report, *email* it to the Vice President Accreditation Programs, and the Primary Reviewer. The finished emailed report should consist of three separate documents: (1) cover letter, (2) report form (including the list of concerns), and (3) narrative report. Immediately after emailing these three components by the established deadline, send the following items to the Vice President Accreditation Programs, by traceable mail (Fed-Ex, UPS, Registered Mail, etc.): •Cover letter on AZA letterhead with original signature, •signature page from report with signatures of all inspectors, and •photographs.

**Example of Report Form:**

FINANCE (F)	YES	NO	N/A	A/Q/U
F-1. Does the institution have continuing financial support? <A >	<u>X</u>	_____	_____	<u>A</u>
F-2. Is the total financial support adequate to meet the needs of the institution?	_____	<u>X</u>	_____	<u>U</u>
F-3. Is financial support the recognized responsibility of the governing authority? <A>	<u>X</u>	_____	_____	<u>A</u>
F-4. In the event of financial difficulties, has a plan of action been prepared? <A >	<u>X</u>	_____	_____	<u>Q</u>
F-5. Does the insurance protection appear to be adequate for visitors, governing authority, staff, society, docents/ volunteers, collection, and physical facilities? <A+ >	<u>X</u>	_____	_____	<u>A</u>

F-6. Are sufficient amounts allocated for capital improvements? < A >	_____	<u>  X  </u>	_____	<u>  U  </u>
F-7. Is there a separate budget for capital improvements? < A >	<u>  X  </u>	_____	_____	<u>  A  </u>
F-8. <i>Appearing in institution Questionnaire only.</i>				
F-9. Are sufficient amounts allocated for conferences, continuing education, maintenance, supplies, training/ seminars, etc.? < A >	<u>  X  </u>	_____	_____	<u>  A  </u>

COMMENTS: F-2. Total financial support has decreased. F-4. The contingency plan is weak and needs improvement. F-6. The amount allocated for capital improvements is insufficient to meet the needs of the institution.

## **Narrative Report**

Team chairs: Please follow the formatting instructions described in this section when compiling the narrative.

Inspection team reports are the property of AZA. Upon receipt, each report will be checked by AZA for clarity, content (as related to standards), and for proper formatting in accordance with these instructions. Narrative reports that do not follow these instructions must be restructured by AZA, and the team chair will be notified.

If you elect to write the entire narrative report yourself, you must incorporate the comments and input of all team members. Alternatively, you may assign portions of the narrative to other team members, and have them send their completed sections to you for integration into a single final document which you will submit. Important rules to remember are:

- a. In the case of currently accredited institutions, begin the report by affirming that your team reviewed the report of the previous team, noting whether any items of concern indicated by the previous team remain at issue.
- b. Follow this with a list of everyone you interviewed while on site (include full names and titles).
- c. Organize the report in the same order as the sections appearing in the Report Form (i.e., Animal Collection, Veterinary Care, Conservation, Education and Interpretation, Research, etc.)
- d. **Do not include your team's recommendation for granting, tabling, or denying accreditation in the narrative report.** That recommendation should only appear in the cover letter.
- e. **Do not place digital photographs in the narrative report.**
- f. The narrative report should include detailed descriptions of all points made in the questionnaire report form
- g. The narrative report should cover, in specific detail, each of the problem areas noted on the Report Form as "Q" or "U", in addition to all items noted on the list of concerns, and impressions you have.
- h. Address both the institution's strong *and* weak points.
- i. Underscore those portions of the narrative that identify an area of concern.

- j. Keep in mind that the final report may become public record once it is sent to the institution, and should be written appropriately.

**Example of Narrative Report:**

**NARRATIVE REPORT  
PLEASANT ZOO & AQUARIUM  
JUNE 2006**

State whether previous concerns are still present

List those interviewed here

An inspection team consisting of inspection team Chair John Smith (General Curator, XYZ Zoo), Bill Jones (Director, Conservation Wildlife Park), Jane Doe (General Curator, Reef Aquarium), and Jill Joyce, DVM (Adventure Zoo) inspected the Pleasant Zoo & Aquarium on June 21, 22, and 23, 2006.

The team thoroughly reviewed the previous inspection report of the Pleasant Zoo & Aquarium and find that none of the items that were noted of concern at that time are of issue at present.

As part of this inspection, the inspection team met with the following individuals, and all were encouraged to speak freely and in complete confidence:

Hon. Elizabeth Bowie, Mayor  
Eric Franklin, Director of Parks & Rec  
Bonnie Anderson, Lead Keeper  
Tom Miller, Accountant  
Gale Patrick, Vet Tech & Registrar  
Adam Constant, Keeper  
Evan Crow, Assistant Zoo Director  
Charles Easter, President, Zoo Society

Joe Higgins, Keeper  
Gordon Hinkle, Maintenance Manager  
Debra Ivy, Zoo Director  
Beth Bender, Education Director  
Dale Conner, Keeper  
Mark Wilson, DVM, Veterinarian  
Bill Wise, General Curator  
Hayley Wist, Marketing Director

**General Overview**

A "General Overview" section is not a requirement of this report, but if you want to provide your team's general impressions of the institution, do that here. If there are issues you feel important to mention that do not fit into any of the categories that follow, include them here.

**Animal Collection**

The animal collection appears to be well cared for by a dedicated staff. Exhibits and holding areas were clean and not in need of major repair. Behavioral enrichment and animal training programs have been embraced by keepers and animals both.

Animal records are very well-kept by the newly-hired registrar. The inspection team's requests for further records were promptly and apparently easily addressed. Daily keeper reports are entered onto computers in keeper areas with no paper involved, and are immediately accessible for review by staff including the curator, registrar and veterinarian. With computer-based efficiency comes a problem however; if electricity is not functional, a computer is not working, or it is an emergency animal escape situation, there could be gaps of several months of information that would not be easily retrievable, because those data might not yet have been printed out for inclusion in hard copy records.

Animal care staff and maintenance staff must work together on water quality maintenance.

***[NOTE: Next would follow "Veterinary Care", "Conservation", etc., in the order in which they appear in the standards and Inspection Team Report Form. The example above is written based on a fictional institution. The section on "Finance" below is an example of what might appear in the report of an institution that is privately operated.]***

Be sure to underscore key sentences related to concerns.

**Finance:** The financial base of the institution appears stable. However, there has been decreasing support in recent years. Although the current operations do not seem to be affected, it will soon begin to take a toll. The governing authority needs to review ways to increase funding so the current trend does not begin to affect maintenance, programs, or other functions within the institution. Also, the contingency plan in the event of financial downturn is weak. The plan is to borrow necessary funds from a local lending institution; however, this is only an immediate fix.

The plan should include potential long-term solutions. The capital improvements budget is insufficient as it currently stands. Because of the downturn in overall funding, monies previously slated for capital improvements have been reallocated to other areas to cover the day-to-day needs of the facility.

### **List of Concerns/Points of Achievement**

A crucial part of the inspection process is compiling and presenting the List of Concerns/Points of Achievement. A copy of the list of concerns must be provided and discussed with the institution's CEO/Director during the exit interview. If the CEO/Director can present evidence satisfactory to the inspection team that an item on the List of Concerns has been addressed, that item may be eliminated from the list during the exit interview.

When compiling the list, be sure to:

- Discuss and **agree as a team** which items should be placed on the list before the exit interview takes place (all items marked as "Q" and "U" must be included on the list)
- Transfer all "Q"s and "U"s** from the report form to the list of concerns
- Use the form provided at the end of the Visiting Committee Report to create the list of concerns
- Group items as "Concerns Remaining From Previous Inspection", "Major Concerns From Current Inspection", "Lesser Concerns From Current Inspection", or "Points of Particular Achievement"
- List **any item that affects the general welfare of an animal** in the collection as a "Major Concern"
- Leave a copy with the institution's Director** (*failure to provide the institution with this list in a timely manner may compromise the accreditation process*)
- Retain an exact copy of the list for inclusion with your report to the Commission
- Send a copy of the list to the Vice President, Accreditation Programs immediately upon returning from the inspection
- Type the list for the Commission exactly as it was written if it was hand-written for the exit interview

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***Example of List of Concerns:*****PART I:  
Items of Concern Noted by Visiting Committee**

**INSTITUTION DIRECTOR:** •IMPORTANT• The items listed below were of noted concern during the inspection. Please address as many of these concerns as possible prior to the Commission's meeting. For items that are still in progress at the time of the hearing, please provide documentation and a timeline for completion. [NOTE: any concerns that remain unaddressed from a previous inspection are considered extremely serious, and may affect the outcome of this process.] Also, please note that it is possible that, after reviewing all supporting materials (including the Visiting Committee's written report), the Commission may have issues or concerns *that are not listed below*. If so, these will be discussed at the hearing.

A written report to the Commission on how you are responding to the concerns listed below must be submitted by the established deadline (check with the Vice President of Accreditation Programs if uncertain of date). The written report is for informational purposes only. At the hearing, the Commission will ask for a verbal update on additional progress made *after* the written report was submitted. The Commission cannot accept written reports during the hearing because there is not sufficient time to read them.

**CONCERNS REMAINING FROM PREVIOUS INSPECTION**

- 1 – Inadequate quarantine space.
- 2 – No regular testing of diets.
- 3 – Enrichment program is not being documented.

**MAJOR CONCERNS FROM CURRENT INSPECTION**

- 1 – Restrooms in north loop are antiquated and should be upgraded. This was a concern during the previous inspection and has not been addressed. Therefore it now becomes a major concern.
- 2 – Water bowls in several small mammal exhibits contained algae.
- 3 – Animal waste holding/disposal should be done in a more sanitary manner.
- 4 – The main-doors to the bear holding area need more substantial locking system.
- 5 – The Committee felt that the primary barriers in the bison/elk and zebra exhibits are inadequate and may expose visitors to danger.
- 6 – Animal escape and injury plans are insufficient in specificity and responsibility.
- 7 – The issue of inadequate financial support needs to be addressed immediately, including the capital improvements budget.
- 8 – The financial contingency plan needs to be strengthened.

**LESSER CONCERNS FROM PREVIOUS INSPECTION**

- 1- Human water bottle found in animal food storage freezer.

- 2 – Guard rail in walk-through aviary needs painting.
- 3 – Food prices should be clearly posted in buffet area of eatery.
- 4 – A broken concrete sill over door in wall to otter area should be repaired.

**PART II:**  
**Points of Particular Achievement Noted by Visiting Committee**

INSTITUTION DIRECTOR: During the inspection the Visiting Committee was particularly impressed with the items listed below.

- 1 – The grounds are very well kept. Routine maintenance in public areas is also good.
- 2 – Newer graphics are attractive and effective.
- 3 – City and Zoological Society support for the Zoo and staff is very strong.
- 4 – The Director has assembled an enthusiastic, knowledgeable, competent, and committed staff.
- 5 – New African exhibit expansion is aggressive and will enhance the visitor's experience and increase the Zoo's opportunity to contribute to conservation.
- 6 – The new giraffe facility is especially well designed.

### **Inspection Agenda**

It is helpful for the Chair and/or the team to draft an informal inspection agenda, or plan, to help keep the inspection on schedule and insure there is sufficient time to accomplish all goals. This agenda should be reviewed or created by the team during the pre-inspection meeting.

#### ***Example of Inspection Agenda (for a 3-day inspection):***

##### **Day 1:**

1. Arrival meeting with team to discuss the agenda/plan for the inspection
2. Brief orientation meeting with director
3. Initial tour of facility
4. Private team meeting to discuss impressions and begin completion of report form

##### **Day 2:**

5. Meetings with governing authority representatives
6. Meetings with society representatives
7. Meetings with staff members (*all levels should be interviewed*)
8. Conduct second interviews with staff *if clarification is needed or questions remain*
9. Review of facility's materials/records/departments

##### **Day 3:**

10. Individual team members revisit specific sections of the facility, records, staff
11. Private team meeting to prepare final list of concerns for exit interview
12. Exit interview, presentation and discussion of list of concerns/points of achievement

## GENERAL SUMMARY OF ACCREDITATION

### **Definition of Applicants**

**Currently Accredited Applicants Defined.** Currently accredited applicants are those institutions that are accredited *at the time the application is submitted and processed*.

**New Applicants Defined.** “New” applicants are those institutions applying for accreditation for the first time, *or* any institution that is *not currently accredited*, regardless of whether it has been accredited in the past.

**International Institutions.** Institutions located outside the United States may apply for accreditation under the same rules as those located within the United States. In some cases, processing of applications for international institutions may not be possible within the standard six-month time frame, and may require a year or more before the Commission hearing can be scheduled. In addition, the amount of the Visiting Committee deposit may be higher due to increased travel costs associated with inspecting institutions located outside of the United States. All materials submitted must be in English. Brochures and other pre-printed materials must be accompanied by a complete translation.

### **The Application Process**

**Summary.** To apply for accreditation, an institution must meet the definition of a zoological park and aquarium, as provided in this booklet (*see page 14*). In addition, it must be operating under modern zoological practices and philosophies, and meet or exceed current professional standards as outlined in this booklet.

It takes approximately six months from the time an application is submitted until the Commission holds a hearing and makes its decision. If an application is tabled, it could take up to twelve additional months before the Commission takes final action, and an additional inspection is required.

The application process begins with the submission, at an established deadline, of a completed questionnaire/application. The questionnaire/application is accompanied by a variety of supporting materials and is submitted in quintuplicate. An on-site inspection will occur approximately three to five months after submission of materials. At the conclusion of the inspection, the institution will be presented with a list of items the institution must address to be considered in compliance with standards. The inspection is followed by a hearing before the Accreditation Commission, scheduled at its next meeting. At that time, the institution's case will be discussed. In making its determination whether to grant, table, or deny accreditation, the Commission will consider information contained in the application materials, the inspection and complete report and recommendation of the Visiting Committee, the response by the institution to the List of Concerns, the interview with the institution's senior management at the hearing, and any additional *verified* information it has received from sources. *The Commission's decision will be based on what exists at the time of the inspection and final review—not on future plans.*

The Commission will then take one of the following actions:

- A. *Grant Accreditation:*** The Commission will grant accreditation when it is reasonably satisfied that the applicant institution meets the requirements of an accredited institution. The Commission may, however, request progress reports on any items it wishes the institution to address, require an interim or special inspection, and revisit the decision as often as necessary to assure itself that the institution continues to meet all conditions and requirements of accreditation during the five-year accreditation period.
- B. *Table Accreditation:*** The Commission may table an institution's materials if it determines that certain conditions must be met or additional information submitted before the institution can be considered as meeting accreditation standards. In addition, the Commission must believe that the institution is capable of meeting those standards within one year. The Chair shall write the institution's CEO/Director, providing a copy to the principal officer of the institution's governing board, advising of the Commission's action and concerns. The institution is then given up to one year to meet the standards and return for a second hearing to demonstrate how the concerns of the Visiting Committee and Commission have been addressed. At the conclusion of one year, the Commission must act to accredit or deny. A follow-up inspection is required prior to a final decision by the Commission. Processing shall terminate for applicants not responding in the time allotted, and it shall become necessary to submit a new application and materials should accreditation be desired again in the future. If an institution is tabled, the year of tabling shall be deducted from the institution's subsequent five-year accreditation cycle if the institution receives accreditation at the end of the tabled year.
- C. *Deny Accreditation:*** The Commission will deny accreditation when an institution does not meet the minimum requirements to be recognized as an accredited institution at the present time and, in its opinion, would require in excess of one year to successfully do so. The Chair shall write the institution's CEO/Director, providing a copy to the principal officer of the institution's governing board and noting the reason(s) for denial. Institutions denied accreditation may reapply one year *after the date of denial*. Submission of a new application and materials shall be necessary.

A detailed explanation of this process is available in the booklet entitled "*Guide To Accreditation of Zoological Parks and Aquariums*".

### **Long Term Expectations**

Accreditation is mandatory for Institution membership in AZA. Similarly, membership and participation in AZA must be maintained as a condition of accreditation. All institutions must process at least once every five years and are subject to any new or higher standards, policies, guidelines, or resolutions adopted by the Association of Zoos & Aquariums. Even though an institution may have been accredited previously, there is no guarantee that accreditation will be granted during subsequent inspections. Standards are subject to continuous review and enhancement. Once accredited, an institution is expected to continuously advance its professional operation and constantly maintain, or surpass, all professional standards. [See also "Preamble" page 15.]

## **Benefits Of Accreditation**

AZA accreditation is a •publicly recognized badge signifying excellence in, and commitment to, collection management, veterinary care, ethics, physical facilities, staffing, conservation, education, safety and security, finance, and supportive bodies. Conversely, denial of accreditation should lead to improvements in identified areas and increased cooperation from supportive bodies.

Accreditation helps •develop public confidence by attesting in an independent, measured, and documented manner that an institution meets or exceeds current professional standards as established by AZA, based upon a periodic thorough review and site inspection conducted by zoological experts in operations, animal management, and veterinary medicine. Accreditation is also important in •guiding private and governmental agencies that frequently need expert opinion as a basis for qualitative judgment in connection with contributions, grants, and contracts, and other areas.

Other benefits include: •eligibility for grants (makes institutions eligible for consideration for funding and grants from certain foundations, corporations and other sources); •cuts red tape (exempts institutions from certain government requirements [primarily at the state level]); •promotes professional recognition from the top zoological parks and aquariums in the U.S. that current industry standards are being met; •provides impartial evaluation on a periodic basis by professional colleagues; •promotes excellence within the institution by causing an institution to continuously evaluate itself in light of ever-rising zoological industry standards; •helps distinguish institutions from “roadside zoos”; •provides staff an invaluable opportunity to learn from other institutions *and* to better understand the importance of accreditation through training and subsequent participation as accreditation inspectors; •fosters staff and community pride; •significantly improves the ability to attract and retain a high quality, professional staff.

Another important benefit of accreditation is membership in AZA. Membership in AZA includes: •animal exchange (access to animals from other AZA accredited facilities for loan and/or breeding); •information/knowledge exchange (access to top experts and colleagues within the zoological and aquarium professions, for aid as needed and sharing of information); •access to AZA’s resource center; •reciprocity with membership of other AZA accredited institutions, and much more.

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