ASSOCIATION OF ZOOS & AQUARIUMS &

The
Inspector's Handbook

2025 Edition

2025
INSPECTOR'S HANDBOOK

SIGNIFICANT ADDITIONS & CHANGES 2021-2025

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> **NOTE:** For the purposes of this Handbook, the terms "institution" and "facility" are interchangeably used to refer to both Accredited Institutions and Accredited Related Facilities. For further clarification please contact AZA accreditation staff.

I.
REQUIREMENTS AND RULES OF INSPECTION TEAM SERVICE

A. INTRODUCTION

Thank you for agreeing to serve as a member of an accreditation inspection team. Your role in AZA's accreditation process is extremely important, and we want to provide you with the tools you need to understand and fulfill your responsibilities to the best of your ability, regardless of whether you've served in this capacity before or are doing so for the first time.

Service as an AZA inspector is a huge responsibility and requires a tremendous amount of work. AZA, and every facility 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 (not on your personal opinion). In addition to having professional expertise and significant 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 a facility with a clear outline of items that must be successfully addressed before accreditation can be considered. Regardless of whether a facility is ultimately accredited or not, your service as an inspector sets an example and creates a guide for professional improvement.

AZA sincerely appreciates your service and dedication to this extremely important endeavor.

Key Contacts

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

Accreditation Commission
> **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. Sometimes the Primary Reviewer also serves as a member of the team or its Chair. The Primary Reviewer is available to help you if you have any questions about the process before, during, or after the inspection.

AZA Staff
The AZA accreditation staff is available to help you whenever you need assistance. The Handbook contains most of the information you will need, but accreditation staff members are happy to answer any questions or provide help as needed. Don't hesitate to reach out. Accreditation staff members include:
> **Vice President, Accreditation Programs**
> **Director, Accreditation Programs**
> **Coordinator, Accreditation Programs**
> **Program Assistant, Accreditation Programs**

B. ASSEMBLING A VISITING COMMITTEE (HOW YOU WERE SELECTED)

The assembly process begins several weeks before a facility submits an application for accreditation

1. Depending on the size and scope of the applicant institution, three to five inspectors are selected from the Commission's database of qualified individuals, *based on the criteria listed below*.
2. That list is then sent to the applicant for review and approval.
3. The institution reviews the list, is given an opportunity to eliminate individuals from the list if desired, and sends the list back to AZA. If any individuals are eliminated, AZA selects additional inspectors as replacements.
4. AZA assigns a team by considering established selection criteria and the needs of the particular team.

Other factors also considered during the selection process are:
- frequency of service (how long since an inspector was last assigned)
- experience as Chair (could a particular inspector now begin serving as Chair)
- participation on the prior inspection (the need to include a member of the facility's previous inspection team whenever possible)
- scope and depth of knowledge (special knowledge and/or experience)
- the need to continue to add new individuals to the process (to place a new inspector on a team whenever possible)

It is important to note that an institution may **not** select the members of its Visiting Committee.

C. VISITING COMMITTEE CRITERIA

[NOTE: While rare, exceptions to criteria listed below may be made under special circumstances by the Vice President, Accreditation Programs, unless otherwise indicated.]

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

Basic Criteria for Service as an Inspector
- Must have support of current employer and supervisor
- Must hold Individual membership in AZA at the Professional Fellow or Professional Affiliate level
- Must be employed at (or retired from) an AZA-accredited institution or related facility
- Must have a minimum of 7 years' experience *in a mid to high level position in the profession*
- Must be actively involved in the profession and in AZA
- Prior involvement in accreditation process of own institution
- Must thoroughly review Inspector's Handbook annually
- Must have served as a "Shadow" on an accreditation team
- Must stay current regarding AZA standards and policies, and stay current on all available inspector training
- Must complete free online course on "Animal Welfare" developed by the AZA Animal Welfare Committee and available via San Diego Zoo Wildlife Alliance Academy online training (https://sdzwaacademy.org)
- Must participate on teams at least once every three years
- Must be able to maintain impartiality
- Must be able to maintain confidentiality
- Must have good written and oral communication skills
- Must be responsive to email and phone messages
- Ability to meet required deadlines
- Must be physically capable of performing all aspects of the inspection, which include traversing significant distances and varying terrains within the institution during the inspection and withstanding harsh weather conditions if necessary
- Must be able to stick to the standards and put personal opinions to the side

- Must have expertise and experience to fulfill responsibilities in one of the three roles on the inspection team: Operations, Animal Management, or Veterinary Medicine
- Current position held must fall under one of the three primary roles noted above as follows:

Description of Primary Roles:
[NOTE: prior experience or expertise in areas other than those reflected in current job titles may also be considered.]
The three primary roles, and the areas they cover are as follows:
Operations: (Director, Deputy or Assistant Director, COO, or similar) Zoo or aquarium operations, governing authority, staff, facilities, finance, guest experience, safety/security, conservation, education, scientific advancement, and support organization.
Curatorial/Animal Management: (Curator, Director of Animal Operations, or similar) The animals, husbandry, facilities, safety/security, staff, conservation, education, scientific advancement.
Veterinary Medicine: (Veterinarian) Veterinary care, the animals, nutrition, staff, facilities, safety/security, scientific advancement.

Criteria For Retired Fellows' Service as an Inspector
[no exceptions may be made]:
- Basic criteria for service as an inspector *[except for employment status]* (see above)
- Be retired, or in transition, from an AZA-accredited institution or related facility
- Must be approved by the Accreditation Commission prior to service
- Must participate in AZA annual conferences at least every two years
- Must remain current with AZA policies and practices
- Must stay abreast of current practices within the profession

Criteria for Selection of Team Chair
- Basic criteria for service as an inspector (see above)
- Participation as member of an inspection team at a minimum of two different facilities
- Strong leadership, organizational, and interpersonal skills
- Willingness to read and follow written instructions
- Ability to write and organize reports
- 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

Criteria for Determination of Team Size
- Size of the institution and complexity of operations (larger, very complex institutions would likely be assigned a four- or five-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)
- Institutions holding elephants shall have an inspector assigned solely for the purpose of evaluating the elephant program
- Teams should include at least one member from an institution similar in size and budget to the institution to be inspected
- ***Three Person Teams*** should include one member with extensive experience in operations, one with extensive experience in husbandry and animal welfare science, 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 welfare science, one with extensive experience in veterinary medicine, and one with experience particularly relevant to the facility being inspected (such as aquatics, cetaceans, elephants, birds, etc.)

Team Tools
Available resources include:
- **The Inspector's Handbook** which fully explains the parameters for a facility to be considered accredited, and provides guidance on evaluating programs and writing the inspection report
- **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 AZA Accreditation Staff**, who can answer questions or concerns about standards and policies, consult with the Commission and team regarding issues that may surface during the inspection, answer questions about procedures, your assignment, scheduling, reimbursement of expenses, the team's report, and all other aspects of the inspection and/or application process
- **The Accreditation Resource Center** is available on the AZA website (https://www.aza.org/accred-resource-center) and includes examples of various documents and policies required for AZA accreditation. Documents posted in the Resource Center are considered by the Accreditation Commission as being good examples. Guidelines and other information that may be useful in reviewing institutional programs and policies are also available.
- **The Accreditation Training Session** covers the standards, best practices, practical inspection techniques, evaluations of past inspections, report preparation, and the opportunity to discuss experiences with other inspectors. The session is presented yearly at AZA's Annual Conference, and topics covered vary from year to year.
- **The Accreditation Inspector's Electronic Community** is a "closed" community available on the AZA Network consisting of individuals who either actively participate in accreditation inspections or have expressed an interest in doing so. This community is utilized for educational and information sharing purposes.

D. KEY RESPONSIBILITIES OF THE TEAM:

Preparation, Timing, Standards, Confidentiality

Important Note: It is important to adhere to the requirements and responsibilities of the team, as outlined below in this handbook. Most important among these are being adequately prepared through study, allowing sufficient time to conduct a thorough inspection containing all components, sticking to the standards when citing a concern (evaluating without bias), and maintaining strict confidentiality. Failure to follow these and other requirements noted below may disqualify you from serving as an inspector in the future.

[NOTE: all inspectors are required to sign an Oath of Impartiality and Confidentiality prior to participation on a team in order to ensure the integrity of the accreditation process.]

1. ***Preparation:*** **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. If any documentation appears to be missing from the application, or if you have additional questions that can be answered in advance of the inspection, have the Team Chair reach out to the institution to gather that information.

2. ***Preparation:*** **Review the Previous Inspection Report.** Make certain to thoroughly review the previous team's inspection report and list of concerns (included in your materials) to ensure that all items of concern that were listed at that time have been fully resolved. If you find any items that still exist, make sure to list them under the heading "Concerns Remaining From Previous Inspection" located at the top of the official List of Concerns, and at the beginning of the narrative report *(see Narrative Report, pages 59 – 61).*

3. ***Preparation:*** **Develop the Inspection Agenda.** The agenda may be modified as the visit progresses, but it's helpful to have a framework to reference prior to the inspection. Be sure to get feedback from the institution before finalizing, as they likely have an idea of what strategy may work best in order to see everything in a timely manner.

4. ***Timing:*** **Interview Staff at All Levels.** Be sure to meet with staff at all levels. It is important to interview senior staff as well as members of the front-line staff, such as junior curators, animal care specialists, etc. The team must schedule time to speak with the director of the institution as well. The inspection team is encouraged to conduct virtual interviews with appropriate staff prior to the onsite inspection to save time while on grounds. Appropriate staff includes any individuals the team does not deem necessary to interview in person (e.g., members of the Governing Authority, marketing staff, some finance staff, etc.). Encourage staff to talk freely, *in confidence*, with the team. Staff interviews should be conducted in private, without the presence of other staff and/or supervisors, when possible. However, at larger 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. For group interviews, members of the inspection team should provide contact information (phone and/or e-mail) and encourage anyone who wishes to discuss an issue privately to make contact at any time during or following the inspection. The team should also post this information in a general staff location.

5. ***Timing:*** **Planning and Travel.** Allow sufficient time to cover everything. 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.

   Schedule Enough Time! It is *extremely important* to the integrity of the accreditation process that the inspection and exit interview process <u>not be rushed</u>. When scheduling the inspection each team should <u>add a half day or more</u> to the time recommended by the prior team. Contact the institution's Director to hear their thoughts and speak with the prior team chair (or a member of that team) if able. Another good resource in determining the correct number of days to inspect is the Primary Reviewer assigned to the case. He or she receives the same materials you do and may have some insight. In addition to an increase in accreditation requirements, it is probable that a lot has changed at the institution in the five years since the previous team made their recommendation. If a team expects to be finished by 2pm on the third day, <u>do not book your flight for that afternoon</u>. Wait until the following morning. Rushing through an inspection, or an exit interview, is unacceptable and highly detrimental to the process. Should you not be able to fully commit to the length of time needed for the inspection, we ask that you withdraw from participation on the team (see #7, page 14). *Do not schedule arrival and/or departure times that could potentially conflict with your availability to participate fully in the process from beginning to end.* Doing so may affect your eligibility to participate as an inspector again in the future.

6. ***Standards***: **Cite the Standard.** When compiling the list of concerns, identify which standard(s) the concern is linked to, and cite that standard(s) at the end of the concern. If a concern cannot be linked directly to a standard or the Preamble, it should not be placed on the List of Concerns. Instead, it should be included in the Narrative Report as a recommended *suggestion* for the institution *to consider*. For example, say something like "The Visiting Committee recommends that the institution consider XXXXXXXXX". It should not be underscored.

7. ***Standards:*** **Evaluate Without Bias.** When conducting the inspection do not allow your personal opinion of a practice, methodology, institution, individual, etc., to affect your decisions positively or negatively. Base opinions on the standards and commonly accepted best practices you are measuring against.

8. ***Confidentiality***: As a member of the Visiting Committee you are required to maintain confidentiality and sign an *Oath of Impartiality and Confidentiality* (supplied by the accreditation department) regarding information contained in the application materials, the Visiting Committee

Report, and discovered during the course of the inspection. You must keep this information strictly confidential, including the recommendation your team makes to the Accreditation Commission. This procedural guarantee of confidentiality allows accrediting organizations access to restricted materials and creates a safe platform for communication between the Commission and the inspection team with: the facility, the staff, and the public.

E. KEY POINTERS ON INSPECTING

1. **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. Consideration of an institution's recent past/history, however, may play a critical role in the evaluation of the facility. If systemic issues or patterns exist over an extended period of time, those issues may play a role in the current evaluation of the facility. Likewise, if there is evidence that standards were not being maintained over the prior five-year accreditation cycle, those issues should be considered during the current evaluation.

2. **Base Judgment on Current Edition of The Standards.** Regardless of which year's materials are used to submit the application, the current edition of the standards should always be used for evaluation during the inspection. All facilities are expected to begin implementing a new or revised standard *as soon as it is adopted*. Full compliance is not always expected immediately, depending on the standard and what is involved, but all facilities should begin to develop a plan for implementation as quickly as reasonably possible.

3. **Inspecting as a Team, And Solo.** 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(s) of the institution corresponding to their particular area of expertise or interest *if time allows and the team chair agrees*.

4. **See All Areas.** 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.

5. **Communicate Concerns as You Go.** The team is expected to inform the institution of concerns at the time the team notes them, rather than waiting until the entire List of Concerns is reviewed during the exit interview. In this way, it may be possible for the institution to address some of the lesser concerns during your visit. If these items are satisfactorily completed, they may be eliminated from the final List of Concerns during the exit interview. This also prevents any surprises during the exit interview.

6. **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 applicant *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. [NOTE: you may make a recommendation in the *narrative report* regarding a possible solution to an identified issue, however, you <u>must</u> phrase your recommendation as follows*: "the team recommends that the institution consider XXXXX as one possible way to address the issue."*]

7. **Complete The Report Questionnaire as You Go.** It is recommended that the team meet each evening to complete the report questionnaire to determine which items are "Questionable" or "Unacceptable", and to begin compiling the List of Concerns (NOTE: this should be done daily, as applicable).

8. **List of Concerns.** After completing the report questionnaire, the team should discuss overall impressions and determine which items should be placed on the *List of Concerns* and *Points of Particular Achievement*. "Points of Particular Achievement" should include examples of areas in

which the facility is excelling and acknowledgements of noteworthy things the applicant has accomplished. Items noted as "Q" (questionable) should be carefully considered for inclusion on the list of concerns, but there may be some cases where the team believes the issue is being resolved or may not rise to the level of inclusion on the list of concerns. In those cases, the item may be included in the narrative *only.* Items noted as "U" (unacceptable) ***must be included on the list of concerns.*** If multiple questions relating to the same area of concern are marked "U", that item should only be listed one time on the list of concerns. 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***. ***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 58 – 59 for more information and an example).*

9. **Exit Interview.** 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. If the CEO/Director believes an item on the list is incorrect, encourage them to make their case regarding this when preparing their "Response to the List of Concerns". Assure them that the Accreditation Commission will consider their position and documentation and will determine whether the item is to remain on the list or not. *Do not* indicate what your team's recommendation to the Commission will be. The final decision regarding accreditation 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, *or* the Commission may have access to information not available to you at the time of your inspection.

   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 process, and it is detrimental for the exit interview to be conducted in a hurried manner, or "on the way to the airport".

10. **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 with the institution and noted in the final report. Items or issues that may seem insignificant could be indicative of bigger problems. Even if the institution verbally states a plan to address an issue, the issue must still be reported and included on the list of concerns, if appropriate. Without written documentation and/or verification, there is no guarantee that the item will be addressed in a timely manner. 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 Accreditation department to make the determination.

11. **Documentation is Critical.** Documentation must be present or the standard cannot be counted as having been met. For example, if an institution has done a drill but does not have documentation of that drill, the drill cannot be counted.

12. **Consistency.** All facilities undergoing the accreditation process are entitled to a consistent visiting team approach to their evaluation. Training sessions, the *Visiting Committee Report Form*, the *Inspector's Handbook,* and 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 interpretation of a standard, an attempt should be made to contact the team's assigned Primary Reviewer or the accreditation department for assistance.

13. **Instructions for Photographs.** Assign someone on your team to take photographs, and **<u>make sure the individual assigned follows these instructions</u>**. 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 a large enough quantity of photographs to present an accurate impression of the physical institution as it exists, and as seen through the eyes of its daily guests, from start to finish. *Note: it is better to submit too many photos than not enough. 50-100 photos are recommended. If you find it necessary to include more than 100 photographs, contact AZA staff.*

   - "Walk the Commission" through the institution as it appeared during your visit. Be sure that the photographs show **both** the good and the challenged areas. Providing photos only of the challenged areas presents a biased view of the facility.

   - Create a Power Point or PDF of the labeled photographs. Label each photograph, explaining exactly what is depicted. This may be done by adding text directly to the photographs or creating labels to accompany the photos in Power Point or Adobe. If multiple photos are placed on one page, or slide, make certain those photos are large enough to view in detail.

   - <u>Eliminate all duplicate photos prior to sending</u>.

   - Limit the file size as much as possible for ease of access. If you are unable to reduce the size of your file, submit it as is (AZA staff will reduce). [*Note: cell phone photos are acceptable as long as they are converted to an appropriate file type and are of appropriate file size.*]

   - Submit photos by email or file sharing service such as Dropbox. [*Note: photographs should not be embedded into the narrative report.*]

14. **Disposal of Institution's Materials.** Once you no longer need them, the institution's materials should be destroyed **or** returned directly to the applicant at the time of the inspection, or by trackable delivery thereafter.

15. **Your Team's Recommendation:** The final decision your team will make is your recommendation to the Accreditation Commission to accredit, provisionally accredit, table (new applications only), or deny accreditation. Your decision *must be based on the facility as it exists at the time of the inspection, taking recent history into consideration as well.* Once your team determines which option to recommend, that decision will be included in the cover letter forwarding the finished inspection report (see *Cover Letter*, pages 57-58). As an AZA inspector, it is important to understand that the *final* decision to grant accreditation, grant provisional accreditation, table a new application, or deny 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 does not bear responsibility for the *final* decision regarding a case. That responsibility rests solely with the Accreditation Commission *and* the institution itself. It is important to recognize that much is likely to change between your inspection and the date of the applicant's hearing before the Accreditation Commission. When the Commission makes a decision that differs from a team's recommendation, it does *not* mean that the Commission considers the team to have been incorrect. It simply means that changes occurred between the inspector's conclusion and the applicant's hearing that affected the outcome of the case, positively or negatively.

F. GENERAL INFORMATION

   - **Important Travel Benefits:** As an AZA volunteer, if you need to rent a vehicle for use during the inspection, note that rental cars are covered by AZA's automobile insurance policy. You should decline coverage offered by the rental agency. When filling out paperwork for your rental car, include the name "Association of Zoos & Aquariums" so it is clear that the rental is related to AZA business. Prior to your trip make certain to download and print the AZA auto insurance card from the Accreditation Inspector's community on the AZA Network and carry it with you at

all times to guarantee proof of insurance. Coverage purchased from the rental agency will not be reimbursed by AZA.

AZA also offers its volunteers emergency travel and medical insurance for use while traveling on AZA-related business. Chubb Travel Assistance is available for timely help anywhere around the world, and provides inspectors with up to $100,000 of protection against accidents and illness. Attached, you will find the Travel and Medical Assistance card. This service can also help you locate medical care while you are on assignment. We hope you never need to utilize this service as an AZA inspector, but keep this card with you should the need arise.

- **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 may be given to the temperature and humidity at the time. Clothing should be, at minimum, "<u>business</u> casual" (no shorts, ripped, torn, or intentionally shredded clothing, inappropriate messaging, flip flops, etc.). Inappropriate attire may affect your eligibility to participate as an inspector again in the future.

- **Reimbursement of Team Member Expenses:** Each team member must individually submit electronically to AZA <u>*scanned **itemized** receipts*</u> for all expenses <u>*and*</u> the "Inspector Expense Report" form (sent to each inspector via e-mail by the Accreditation department). ***<u>This must occur within 30 days of the inspection.</u>*** Detailed instructions for submittal of reimbursement requests are provided on the "*Inspector Expense Report"* form. For those who use a personal automobile to travel to an inspection, AZA will reimburse using the current optional standard mileage rate for business-related travel as determined by the Internal Revenue Service (IRS), *or* for the cost of gas—*but not both*. Reimbursable expenses include transportation, parking, lodging, meals, 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 four weeks for receipt of reimbursement checks.

  In general, flights are covered at Economy rates. Flights over six hours in duration (single legs, not total trip duration) are covered at Premium Economy (or equivalent) rates. Business Class and First Class tickets are <u>not refundable</u> unless under special circumstances and with prior approval from AZA staff. If an inspector elects to purchase a Business Class or First Class ticket for non-approved flights, they are responsible for the difference in cost between the purchased ticket and the Economy or Premium Economy (depending on flight duration) rate ticket. For extremely long trips that do not allow inspectors sufficient time for rest prior to the start of the inspection (e.g., lengthy intercontinental trips), one additional night's hotel stay at the front-end of the inspection may also be reimbursed.

  The following items are <u>*not*</u> reimbursed as part of inspection expenses: alcoholic beverages, movies, non-approved airfare (airfare will be reimbursed at Economy or Premium Economy rates, depending on flight duration), and expenses for a traveling companion. Those expenses should be removed prior to submission of the receipts. The institution's materials should <u>*not*</u> be returned to the Accreditation department, and shipping costs associated with doing so will not be reimbursed.

- **Gifts.** Members of the Visiting Committee may not accept any gifts or privileges offered by the applicant.

- **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.

- **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. You may speak to the media, but you may not make any comments *specific to the case* or reveal anything about the recommendations your team may be considering. You may speak *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 Accreditation of Zoological Parks and Aquariums", available for download on AZA's website.

- **Withdrawing From a Team.** In the case of an emergency that requires you to withdraw from participation on a team, please notify the team chair and the AZA office *immediately*. 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 to meet the originally scheduled inspection dates. Inspectors should withdraw only in the case of an extreme emergency.

- **Assessment of Suitability/Inspectors in Training (Shadows).** As AZA constantly strives to improve the accreditation process, new inspectors are continuously being brought into the program. Completion of an inspector-in-training program is required for all new potential inspectors. This "boots on the ground" training opportunity provides insight into the inspection process prior to being assigned as an official team member by allowing individuals to "shadow" inspection teams. Shadows are invited to accompany the team throughout the entire inspection, including the exit interview, and are encouraged to participate in all discussions that take place among the team or with staff at the facility. They may also be included in discussions related to the final Visiting Committee Report, but they must <u>not</u> participate in the actual writing of the report (nor should they be listed on the report as a member of the team). Before an inspector-in-training is assigned to an inspection team, permission must be obtained from the applicant institution. All expenses incurred by the shadow are the sole responsibility of the shadow or their employer. Following a shadowing assignment, it may be determined that an individual is not suitable to serve as an accreditation inspector, and that individual will not be eligible to serve in this capacity.

G. 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 ensure 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 ensuring that the report is written and formatted according to Commission instructions (included in this handbook), and delivered to Accreditation staff and the Primary Reviewer by the established deadline. The team Chair is also responsible for ensuring 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 <u>mutually agreeable inspection dates</u> for as *soon* as can be arranged. A deadline for the completion of all inspections will be established by the Accreditation department. Although inspections can take place any time before the established deadline, the sooner the inspection takes place, the more time the facility will have to make corrections prior to its hearing, *and* the more time the Chair will have to compile the report. Once inspection dates are set, promptly inform the Accreditation department and the Primary Reviewer 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 and exit interview*. The amount of time required to inspect 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, the number of inspection days recommended by the

previous team is noted on the cover page of that team's report. In addition, 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 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 applicant's CEO/Director about the facility'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 applicant, and the team Chair should determine that preference and communicate it to team members.

5. **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 55 for a definition], the Primary Reviewer automatically serves as team Chair.)*

6. **Request Additional Materials if Necessary**. If the team Chair and Primary Reviewer believe materials are missing from the institution's submission, it is appropriate for one or the other to define the missing materials for the facility's CEO/Director and request that those materials be submitted via email prior to the inspection.

7. **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 on-site and/or virtually in advance of the onsite inspection. 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.

8. **Assign Primary Areas of Responsibility.** Review each team member's primary area(s) of responsibility via email or phone in advance of the trip. Establish roles and responsibilities for each Visiting Committee member prior to the inspection trip, using the "Description of Primary Roles" found on page 6. Remember to assign someone to take photographs.

9. **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. A conference call a few days prior to the inspection is another good option. Talk about the materials received from the institution and determine what concerns, if any, other team members have. It is also helpful to develop a tentative "agenda" for the inspection *(see pages 25 – 26 for an example)*.

10. **Consider Policies and Documents for Accreditation Resource Center.** During review of the application materials and while on site for the inspection, make note of any policies or documents the team believes to be particularly well done, and call these to the attention of AZA accreditation staff after the inspection has concluded. The Accreditation Commission will consider any documents identified by the team for inclusion in the online Accreditation Resource Center.

11. **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. Do not rush these meetings.

12. **Inspection Team Signatures.** It is important to obtain the signatures of the Visiting Committee members on the Report Form *prior* to departing from the inspection. If wet signatures are not obtained, electronic signatures will suffice.

13. **Provide Copy of List of Concerns.** The Chair should provide a copy of the list of concerns to the Accreditation department *and* Primary Reviewer as soon as possible after returning from the inspection.

14. **Cover Letter, Report Form, and Narrative Report.** It is the Chair's responsibility to ensure that these documents are prepared correctly, appropriately edited for spelling, grammar, format and accuracy, and submitted on time. See the individual sections in this handbook for specific instructions.

15. **Submitting the Finished Report on Time.** Email your completed report to Accreditation staff, and the Primary Reviewer *by the established deadline*. If additional time is needed, contact the Accreditation department to advise and arrange an extension.

    The finished report should consist of *four* separate components: (1) signed cover letter, (2) report form (including the list of concerns and points of achievement), (3) narrative report, and (4) inspection photos. All four components should be sent by email or through a file sharing service such as Dropbox. A copy of the final inspection agenda should also be emailed to AZA Accreditation staff. This file will be shared with the future inspection team in advance of the next inspection.

16. **Attending the Hearing.** Inspection team members and shadows are invited to attend the hearing for the institution they inspected. It is not a *requirement* that they attend, but they are encouraged to do so if able. Not only does this provide the team an opportunity to follow the case to its conclusion, but it also allows the team to clearly understand outcome of the case. It also provides the Commission an opportunity to ask questions should they need clarification or corroboration. The statement of impartiality and confidentiality signed at the beginning of the process will extend to the hearing as well.

II.
TUTORIAL GUIDELINES AND AIDS

A. PREAMBLE

When evaluating an institution, do so under the Preamble to the accreditation standards:

PREAMBLE

AZA Accreditation - PURPOSE

AZA accredited zoos and aquariums are complex operations with important goals. The highest goals of AZA accreditation include exemplary animal care and wellbeing, and inspiring guest engagement through effective education and conservation. AZA accreditation standards and requirements represent decades of modernization utilizing science, experience, and an unrelenting resolve to create environments where animals thrive, a positive and lasting impact on guests, and to conserve our world's wild animals and wild places.

The AZA Accreditation Program provides all zoos and aquariums the opportunity to examine, meet, or exceed the highest standards in the profession. The accreditation process combines internal (stakeholder) and external (peer-review) comprehensive assessment, resulting in the most scrutinized, specialized and dynamic organizations in the world dedicated to animal care, wellbeing, public engagement, education, and conservation and science.

Institutions successfully accredited by AZA must continuously demonstrate excellence in all areas of operations and regularly adapt to new and evolving standards.

AZA Accreditation - PROCESS

To achieve AZA accreditation, an institution requires extraordinary vision and leadership, and a comprehensive team effort to attain excellence in all areas of operations and management. The accreditation process begins when institutional stakeholders study and commit to the gold-level standards available under the accreditation tab at AZA.org. AZA accreditation requires full adherence to all standards on a daily basis. The core areas of self and peer evaluation include:

Animal Care, Wellbeing, & Management (Excellence in Animal Care and Wellbeing)
Veterinary Care (Excellence in Animal Health Care)
Education & Interpretation (Innovation in Science and Conservation Education)
Conservation & Scientific Advancement (Measurable Impact in Science)
Strategic & Master Plan (Values, Goals, Plans, and Outcomes)
Governance (Oversight, Ethics, and Community Leadership)
Finance (Business Management and Accountability)
Staff (Professional Team Development and Management)
Guest Services (Quality Guest Amenities and Attraction Services)

(continued next page)

Safety & Security (Public and Animal Safety, Staff Training, and Preparedness)
Physical Facilities (Quality Construction, Maintenance, and Design of all Facilities)
Support Organizations (Internal Support and Partnerships)

Understanding, engaging, and committing to the advancement of standards, practices, related policies and philosophies in all areas assessed by AZA through accreditation constitutes "modern zoological practices and philosophies". These accepted best practices and philosophies define excellence in our profession and are what distinguish AZA-accredited institutions from other institutions that have animals for guests to see and appreciate. The word "practices" represents the tangible while "philosophies" refers to an overall perspective.

Because of the many variations among institutions, the majority of AZA standards are carefully designed to be *performance* standards (i.e., assessing the level of achievement considered acceptable to fulfill a performance characteristic, and choice in method for meeting the goal). This differs from *engineering* standards, where exact and precisely prescribed steps are required to fulfill an engineering characteristic, with little or no variation in method for meeting the goal. AZA institutions may achieve performance standards in a variety of ways, but *all* standards ***must*** be met.

AZA Accreditation - PRODUCT

AZA accredited institutions are differentiated as exemplary facilities through the vigorous and voluntary commitment to shared high standards, achieving measurable goals, and continually pursuing outcomes that benefit animals, guests and communities. These standards include assuring excellence in animal care and wellbeing, conservation, education, and research. Accredited institutions house, display, present, and interpret all animals in their care in a manner that is respectful to the animal and that inspires appreciation for wildlife and nature, while prioritizing animal and human health and safety. Animals are housed and cared for in a manner that meets their social, physical, behavioral, and nutritional needs, with considerations for lifelong care. Meaningful conservation messages are integral components of exhibits and interpretation.

Distinguishing characteristics of an AZA-accredited institution include:

1.   Extraordinary focus on animal care, and wellbeing*
2.   Modern facilities and practices for comprehensive veterinary care
3.   Scientific advancement in animal care and conservation
4.   Focus and participation to support sustainable animal populations
5.   Exhibit aesthetics and habitat studies, planning, and design
6.   Innovative and inspirational educational programs and experiences
7.   Excellence in guest engagement and effective guest services
8.   Economic development and community partnerships
9.   Professional staff development and training
10.   Comprehensive preparedness in public and animal safety
11.   Sound business planning and financial management
12.   Dynamic and mission-driven strategic and master planning
13.   "Raising the bar" and regularly advancing operational standards

(continued next page)

*AZA zoo and aquarium standards support the premise of five opportunities to thrive. These tenets propose that animals: (1) Nutrition - receive nutritionally complete diets that bring out the natural feeding response and behavior; (2) Environment - are afforded comfortable living experiences with choice and control to promote mentally and physically healthy behaviors; (3) Physical Health - experience good physical health; (4) Behavior - are provided quality spaces to live in with appropriate social groupings that promote natural, species-appropriate and motivated behavior; and (5) Psychological Wellbeing - develop natural coping skills and avoid chronic stress; and comfort, interest, and tranquility are commonly experience.

IMPORTANT NOTE: All AZA accredited institutions and related facilities must follow all local, state, and federal laws and/or regulations. Some AZA standards may be more stringent than existing laws and/or regulations. In such cases, the AZA standard(s) must be met.

B. ANIMAL WELLBEING

1. *RANKING ANIMAL WELLBEING CONCERNS*

   For the Visiting Committee Report and List of Concerns, items related to animal wellbeing may be ranked in one of three ways:
   Major concern – of an especially serious or urgent nature where immediate action is required
   Lesser concern – of a nature where action is required
   Discussed with the applicant institution – of a nature where improvements would be beneficial and are encouraged, but doesn't rise to the level of an actual concern

2. *DEFINITION OF ANIMAL WELLBEING, POSITIVE/NEGATIVE INDICATORS OF WELLBEING, AND ADDITIONAL ANIMAL WELLBEING CONSIDERATIONS*

   a. **Definition of animal wellbeing:** A state of being comfortable, healthy, or happy; achieved by AZA facilities giving animals lifelong opportunities to thrive. This is supported through: leadership, culture, and operations; science and innovation; expertise and passion; collaboration and sharing; engagement and communication; and our approach to the conservation of species and natural spaces. Wellbeing is a concept used to communicate the desire to provide and overall positive balance of comfort, health, and happiness to the animals in our care. Wellbeing, for the purposes of this document, is conceptual. This contrasts with animal welfare which is a science and measurable. The science of animal welfare supports and informs our understanding of animal wellbeing.

   b. **Positive and negative indicators of wellbeing:** In assessing wellbeing, we typically look for both positive and negative indicators. Below is a list of potential positive and negative indicators of animal wellbeing.

   These indicators are generic in the sense that they could be used across a wide range of taxa. This list is meant to assist observers in developing an overall impression of wellbeing for a particular individual, exhibit/tank, or group of animals. The indicators below are based on the Mellor and Beausoleil 'Five Domains' model for animal welfare assessment and the five opportunities, as contained in the Preamble to AZA's accreditation standards.

   Indicators of wellbeing are typically a combination of inputs (what is provided for the animals) and outcomes (what can be observed/measured in the animal). A good assessment process should have a combination of inputs and outcomes with a predominance of outcomes

(observable/measurable effects). A good assessment process should have systems in place to evaluate both inputs and outcomes.

Below is a list of potential positive and negative indicators of wellbeing. This list is not exhaustive by any means and is meant to be representative of some of the more common indicators. A much more robust list of examples is available for reference as needed (https://www.aza.org/assets/2332/welfare_tool_items.xlsx).

<u>Indicators of Wellbeing – Examples</u>
Medical:
Positive
    Preventive health program; prompt management of pain, injury, or disease (input)
    Disease processes are managed appropriately (input)
    Pain-free normal movement, ambulation, righting reflex (outcome)
    Normal fecal consistency, urination, and voiding behavior (outcome)
    Well-groomed or preened body surfaces, vibrant coloration (outcome)
    Normal physiologic parameters (outcome)
    Reproductive success as desired (outcome)
Negative
    Unmanaged or uncontrolled pain, injury, or disease (outcome)
    Atypical patterns or trends of disease; high prevalence of morbidity or mortality (outcome)
    Lack of mobility, inability to ambulate, lack of righting reflex (outcome)
    Lack of fecal or urine control; abnormal stool consistency (outcome)
    Non-intact body surfaces; loss of skin, scales, feathers (outcome)
    Physiological or behavioral indicators of stress (outcome)
    Lack of reproductive success when reproduction is desired (outcome)
Nutritional:
Positive
    Well-balanced diet, variety, choice and access (input)
    Normal appetite (outcome)
    Good body condition (outcome)
    Species and individual appropriate weight (outcome)
    Normal fecal consistency (outcome)
Negative
    Diet does not meet physical and behavioral needs of the animal relevant to the natural history of the species (input)
    Lack of opportunity to consume species-appropriate diet (input)
    Reduced or absent appetite (outcome)
    Poor body condition; either under or over-conditioning (outcome)
    Abnormal fecal consistency (outcome)
Behavioral:
Positive
    Behavioral husbandry program (input)
    Opportunity for sufficient sleep/rest (input)
    Evidence of a diversity of species appropriate behaviors (outcome)
    Absence of or minimization of stereotypic behavior (outcome)
    Social interaction and breeding as appropriate (outcome)
    Appropriate reaction to environmental stimuli or change (outcome)
Negative
    Lack of Behavioral Husbandry Program (input)
    Abnormal sleep patterns (outcome)
    Limitations on sleep/rest (input)
    Evidence of abnormal behaviors (outcome)
    Low levels or absence of species appropriate behavioral diversity (outcome)
    Stereotypic behavior (outcome)

Evidence of inadequate self-maintenance behaviors such as lack of grooming, preening, hygiene (outcome)

Lack of social interaction as appropriate to the species (outcome)

Apathy or inability to react to environmental stimuli or change (outcome)

Environmental (all inputs):

Positive

Fresh air and sunlight/UVB exposure as appropriate

Access to safe space/habitat that promotes species specific behaviors

Ability to exhibit choice and control in a variety of environmental situations

Thermally appropriate environment as indicated by a lack of compensatory behavior (i.e., shivering, chilling, panting, or overheating)

Negative

Lack of space/habitat or lack of safe space/habitat to express species-specific behaviors

Lack of choice or control to avoid negative environmental conditions/stimuli (heat, cold, precipitation, noise, light, vibration, etc.)

Exposure to extremes of heat/cold as evidenced by common sense or observation of compensatory behaviors such as shivering, chilling, panting, or overheating

Lack of exposure to fresh air or sunlight/UVB as appropriate

Affective/Mental States (all outcomes)

Positive

Satiety, reward, playfulness, curiosity, contentment, calmness, affection

Engaged with caretakers, its environments, and enclosure mates (if applicable)

Negative

Evidence of fear, distress, boredom, frustration, anger, malaise, apathy, anxiety

Evidence of uncharacteristic disengagement with environment, caretakers, other animals.

c. **Animal wellbeing considerations:** When observing the animals during the inspection, please consider the following in assessing the overall wellbeing of the animals (both individual animals and groups of animals like fish or invertebrates that may not be individually identified). While these questions are primarily intended to guide your assessment, consider asking some of these questions of staff during your visit.

- Pay attention to how the animals appear. Look for signs that promote wellbeing (overall condition; normal activity; normal coat, skin, scale condition; food consumption; play behavior; exploratory behavior; investigatory behavior; use of enrichment items, etc.). **Note:** the presence or absence of positive indicators can be the most valuable determinants of overall wellbeing. See above for more discussion of positive and negative indicators.

- Look for signs that could possibly indicate wellbeing is in question. If you note anything unusual, inquire about it (talk to the animal's caretakers, the curator, the vet, etc.). **Note:** extreme indications of compromised wellbeing should be discussed and addressed immediately.

- Observe how the animals respond when in close proximity to their caretakers (calm, curious, interested, neutral, fearful, aggressive, etc.). Note the size of exhibits in relation to the species and the number of animals within. Are exhibits of sufficient size? Are they appropriately complex? Are the animals utilizing the space fully?

- Note the features within the exhibit in relation to the species (furniture, plantings, rocks, corals, haul-outs, substrates, water features, climbing structures, etc.). Are they appropriate? Is there a sufficient amount of them? Does it appear that the animals are utilizing the items in the exhibit?

- Ascertain whether the institution provides the animals with opportunity to thermo-regulate and protect themselves from the elements (both in exhibits and in holding areas), particularly for animals for which the institution's natural climate is not comfortable during some or all seasons.

- Look to see if exhibits contain a "safe spot" where the animals can retreat from public view, from a dominant conspecific, or from some other perceived threat should they wish to.

- Determine if animals are given a choice to be indoors or outdoors, and whether that choice is 24/7 or limited. If some are not given a choice, ask why and consider whether choice should be given.
- What does the animal's indoor exhibit space look like and does it meet the animal's needs? What percentage of the season (winter/summer) is the animal confined there?
- What percentage of the animal's day is spent in holding? Are they locked in/out or do they have a choice?
- Note the size, condition, and design of the animal's holding facilities. What does it look like? Does it meet the animal's needs? Is it of sufficient size given the amount of time typically spent there by the animal? Is it safe and secure? Does it provide for species appropriate behaviors, and for animal management/husbandry needs?
- Is the 24-hour environment (exhibit environment, holding environment, environmental factors such as light and sound, etc.) conducive to species appropriate restful and active periods over the course of the 24-hour day/night?
- Check to see that fresh, clean water is available in all of the exhibits. Determine how often it is checked and changed throughout the day.
- Is food presented in an appealing manner and as appropriate for the species? If diet is presented in a stainless-steel bowl, ask why. Could diet instead be presented in a manner so as to encourage typical species feeding?

Animal Ambassadors have additional considerations:
- Determine how animals are selected to participate as ambassadors. Are there animals in these programs that may not be suitable choices?
- Are Ambassador Animals given a choice to participate?
- Ascertain how the daily welfare of Ambassador Animals is assessed. Is it adequate? Do staff and volunteers have the authority to say "no" if they believe that the animal shouldn't be used that day? Are staff and volunteers provided with indicators of wellbeing and indicators of compromised wellbeing?
- Are staff members who handle Ambassador Animals properly trained to handle them appropriately, and to detect changes in stress, health, and demeanor?
- Find out what happens should a staff member observe a change in an Ambassador Animal's behavior. What methods/processes are in place to assure that an Ambassador Animal is optimally utilized for programs (i.e., not used too frequently and so may rarely or never get to leave its enclosure).
- Does the institution demonstrate a commitment to animal wellbeing? Do they communicate their commitment actively to their staff and to their visitors? If yes, what methods are used to do so and in which venues?

3. *GUIDANCE TO VISITING COMMITTEE INSPECTORS ON ASSESSING WHETHER APPLICANT HAS MET STANDARD 1.5.0*

Standard 1.5.0 (as written in the Accreditation Standards and Related Policies):

1.5.0. The institution must have a process for assessing animal wellbeing via welfare assessments.

Explanation: This process must be both proactive and reactive, transparent, and include staff or consultants knowledgeable in assessing quality of life for animals showing signs of physical or mental distress or decline. Welfare assessments for *all* animals must be conducted at least annually. The process must also include a mechanism to identify and evaluate the impacts on animal wellbeing of significant life events or changes in the animal's environment as identified by the individual institution. Examples of life events/changes could include construction events, unusual weather events, noise intrusion, change in housing, changes in animals exhibited/housed with or nearby, change in an animal's role within the collection, or involvement in informal or structured presentations/programming as an ambassador animal, involvement in research projects, etc. Further information on the establishment of an animal

welfare assessment process is available from AZA, and online in AZA's Accreditation Resource Center at https://www.aza.org/accred-resource-center (you will be requested to log in using your individual membership user name and password).

Required for the institution to meet Standard 1.5.0:
- ✓ The institution is following a written process for assessing animal wellbeing.
- ✓ The following aspects of the welfare assessment process must be documented:

    o Welfare assessment strategy/plan

    o Welfare assessment framework that is used for assessments (e.g., Five Domains, Five Opportunities to Thrive, your own framework)

    o Results of welfare assessments and a summary of resultant actions

- ✓ The wellbeing of all animals residing at the institution is considered and assessed at least once annually.
- ✓ The welfare assessment process is both proactive and reactive.
- ✓ Individuals performing welfare assessments must have at least a baseline knowledge of animal welfare science.
- ✓ The assessment process must include a mechanism to identify and evaluate the impacts on wellbeing of significant life events or changes to the animal's environment. Examples of life events/changes include construction events, unusual weather events, noise intrusion, change in housing, changes in animals exhibited with or nearby, etc.

Sample practices associated with an Animal Wellbeing Assessment Program
- There is a process to address wellbeing concerns identified as a result of assessments in a timely manner.
- A staff member is identified that can serve as a point of contact for welfare assessments - coordinating the assessments, identifying actions to address issues, prioritizing those actions, implementing action plans, and communicating those action plans to staff. That point of contact has both the responsibility and the authority to manage a wellbeing program.
- The accreditation application asks institution to submit copies of at least two examples of written welfare assessments that have been completed, describing any adjustments made as a result as part of their application. During your inspection, ask to see a few additional examples.
- The animal care staff should be the primary implementers of the welfare assessment process, but there may be circumstances where "non-animal" staff or volunteers can play a role in the assessment process with appropriate training.
- There are numerous avenues to acquire baseline knowledge of welfare science. Some possible examples include:

    o Transfer of knowledge from institutional staff knowledgeable in husbandry and welfare science (e.g., your veterinarian or other animal care professionals).

    o Complete a free online course on "Animal Welfare" developed by the AZA Animal Welfare Committee that is available via San Diego Zoo Wildlife Alliance online training (https://sdzwaacademy.org).

    o Complete an AZA professional development course entitled "Animal Welfare: Evidence Based Management" (http://www.aza.org/animal-welfare-evidence- based-management).

- It is the intent of the standard that a welfare assessment is performed for every animal, either individually or as a member of a group, at least annually. Wellbeing is assessed at the individual animal level, but it is recognized that many aquatic and invertebrate animals are not individually accessioned/identifiable. There are examples of methods to assess group-housed animals (e.g., percentage of group thriving/not thriving and/or identification of

outlier specimens). See AZA's Resource Center (https://www.aza.org/rc-animal-welfare-assessment-process).

4. GUIDE TO CREATING AN ANIMAL WELFARE ASSESSMENT PROCESS UNDER 1.5.0

This document is intended to help both inspectors and institutions understand what elements—at minimum—must be included in the animal welfare assessment process required under standard 1.5.0.

> **Standard 1.5.0**: The institution must follow a written process for assessing animal wellbeing via welfare assessments.
>
> **Explanation:** This process must be both proactive and reactive, transparent, and include staff or consultants knowledgeable in assessing quality of life for animals showing signs of physical or mental distress or decline. Welfare assessments for *all* animals must be conducted at least annually. The process must also include a mechanism to identify and evaluate the impacts on animal wellbeing of significant life events or changes in the animal's environment as identified by the individual institution. Examples of life events/changes could include construction events, unusual weather events, noise intrusion, change in housing, changes in animals exhibited/housed with or nearby, change in an animal's role within the collection, or involvement in informal or structured presentations/programming as an ambassador animal, involvement in research projects, etc. Further information on the establishment of an animal welfare assessment process is available from AZA, and online in AZA's Accreditation Resource Center at https://www.aza.org/accred-resource-center (you will be requested to log in using your individual membership username and password).

Accreditation Requirements Explained

1. Identify staff or consultants knowledgeable in animal wellbeing
   - Employment of a dedicated welfare scientist is not required for compliance with the standard.
   - Individuals developing or performing welfare assessment procedures must have at least a baseline knowledge of animal welfare science. There are numerous avenues to acquire this baseline knowledge of welfare science. Some possible examples include:
     - Transfer of knowledge from institutional staff knowledgeable in welfare science (i.e. your veterinarian or other animal care professionals)
     - There is a free online course on "Animal Welfare" developed by the AZA Animal Welfare Committee that is available via San Diego Zoo Wildlife Alliance Academy online training (https://sdzwaacademy.org).
     - There is an AZA professional development course entitled "Animal Welfare: Evidence Based Management" (http://www.aza.org/animal-welfare-evidence-based-management).
     - There are numerous other online and academic-based courses in welfare science.
   - The animal care staff should be the primary implementers of the welfare assessment process, but there may be circumstances where "non-animal" staff or volunteers can play a role in the assessment process with appropriate training.

> Plain language: You do not have to hire a welfare scientist or send people to an expensive course to be in compliance with the standard, but you do need to make sure the staff that develop and implement your wellbeing monitoring process have at least a basic level of training in welfare science.

2. Criteria for identification of animals and timelines for welfare assessment
   - It is not the intent of the standard to require a detailed welfare assessment of every individual animal in the zoo or aquarium collection.
   - Institutions should consider an "event-based" approach to welfare assessment based on life events that institutions deem could significantly impact animal wellbeing. Examples include, but are not limited to: construction events, unusual weather events, noise intrusion, change in housing, or changes in exhibits or animals exhibited with or nearby, advanced life stages, etc.
     - Assessment may be conducted in "triage" fashion, with triggers identified to indicate the need for a more in-depth assessment.
   - Welfare assessments may include group level assessments as appropriate to the type of collections in a particular institution (i.e., an aquarium with large schools of fish in a mixed species environment).
     - Wellbeing is ideally assessed at the individual animal level, but the AZA recognizes that group assessment is often the most practical methodology.
     - "Groups" may be defined as groups of individuals, species, exhibits, tanks, geographic areas of the zoo/aquarium, herds, schools, colonies, or other appropriate measures.
   - Each institution must clearly define and implement a strategy for how specific animals or groups are prioritized/selected for welfare assessment
     - Assessment at the holistic collection level should be used to determine the institutional priorities for more detailed or frequent individual or group welfare assessment.
     - Individuals or groups identified/prioritized for detailed welfare assessment should be assessed according to a reasonable time schedule
     - Prioritized welfare assessments may be performed on a more regular basis (biannually, quarterly, monthly, weekly, daily, etc.) based on the strategy/needs of the institution, individual animal, or group of animals.

Plain language: Annual welfare assessment of every individual in your collection is for most an impractical and unachievable goal. That being said, every animal should be represented as an individual or as part of a group during your holistic annual collection assessment. Your annual assessment process should result in identification of individual animals and groups that may need to be assessed more frequently and/or in greater detail than the collection-level assessment. It is also recommended that you develop criteria for more detailed assessments that are triggered by significant life events (such as introduction of a new exhibit mate or reaching a geriatric age milestone) or significant changes at your institution (such as construction or an unusual weather event).

3. Utilization of a welfare assessment tool or process
   - Animal wellbeing must be assessed according to a pre-defined framework identified by the institution. Two possible frameworks are listed below, but the use of other unique or custom frameworks is appropriate depending on the needs of the institution or unique nature of a collection.
     - The "5-opportunities" model referenced in the preamble to the AZA Accreditation Standards (see Preamble, pages 16 – 18)
     - The "5-domains" model utilized by WAZA in their welfare framework
   - A welfare assessment framework should consider elements such as: physical health, nutritional state, environmental utilization, behavior, and mental domains (i.e. choice and control, freedom from fear and distress, and positive or negative affective states).
     - Wellbeing is best assessed as a combination of inputs and outputs. "Inputs" are the resources, facilities, processes and practices that contribute to the animal's overall experience. "Outputs" are what the animal actually experiences and should be measured from the perspective of the animal itself (or the group's perspective).

- Many wellbeing outputs have not yet been scientifically validated; thus, much of welfare assessments in zoos and aquariums will be more qualitative than quantitative. These are works in progress. As we, the AZA community, acquire and apply more scientific evidence for various welfare variables, we will continue to improve the quality of these assessments and ultimately the wellbeing of the animals in our care.

> Plain language: Find an existing framework or develop your own framework/template for welfare assessment that makes sense for your collection. Your framework should be based on and evaluate a wide range of welfare criteria (i.e. health, nutrition, environment, behavior, and mental states). There are many philosophies and methodologies for welfare assessment, but two excellent frameworks have been adopted by AZA and WAZA (referenced above). Your welfare assessment should consider a combination of inputs and outputs. Many measurements of animal wellbeing in zoos/aquariums will be based on the expertise of your staff and good common sense as over time we continue to advance the science of animal welfare in the diverse species we care for.

4. Documentation of assessment strategy, implementation, and resultant action
   - The following aspects of the welfare assessment process must be documented:
     - The strategy for animal/group selection and timeline of assessments
     - The welfare assessment framework and process for implementation
     - The results of welfare assessments
   - Documentation should include the assessment itself and a summary of any resultant action(s) taken (if necessary based on the results of the assessment).

> Plain language: Make sure you document how your overall wellbeing assessment strategy works. How do you assess your collection annually? How do you select animals for more individualized or detailed assessments and what are those timelines? What does your assessment framework look like? Keep records of the assessments themselves and [just as importantly] the actions you took as a result of the assessment, if any.

C. 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 ensure there is sufficient time to accomplish all goals. This agenda should be reviewed or created by the team during the pre-inspection meeting. If available, AZA Accreditation staff will share the agenda from the previous inspection as a guideline.

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

D. HOW TO WRITE THE NARRATIVE REPORT

The following are guidelines for compiling, organizing, and writing the narrative portion of the Visiting Committee report. Team chairs should point their inspectors to these guidelines to help them write the sections of the report to which they have been assigned. ***Note:*** *All reports written by inspection teams are the property of AZA and will be edited by AZA to assure proper and consistent formatting and appropriate phrasing. Content will <u>not</u> be changed. AZA will clarify unclear statements found (if any) with the team chair prior to rewording.*

In General

- Follow the formatting guidelines found on pages 59 – 61 of this Handbook.
- Remember: the institution, its governing authority, and in some cases, the public will receive a copy of the narrative. Write professionally.
- Include all items placed on the list of concerns <u>and underscore them</u>. Include additional detail to inform the Accreditation Commission exactly what you observed and why it was cited.
- The Visiting Committee Report Form (questionnaire) may include some items marked as "Q" (questionable) that are not placed on the list of concerns. In the narrative report be sure to include <u>all</u> of them with a brief description of the observation and an explanation of why your team determined it didn't need to be placed on the list of concerns. [Examples of reasons an issue might be listed as "Q" but not be placed on the list of concerns include: •the item was thereafter addressed by the institution during the inspection; •the item is scheduled to be demolished or renovated in the immediate future; •the item is not best practice but there is no standard to which it relates directly, etc. If unsure, discuss it with the team's Primary Reviewer.]
- Use spell check.
- Refer to institution personnel formally [say "Mr. Brooks", not "Bob"; or "Dr. Jones", not "Jane"].
- Use of scientific terms is perfectly appropriate, but be sure that the overall statement and/or paragraph is written in a way that lay-persons can understand what is being said.
- Stay clear of personal judgments and/or opinions such as "this is the best rhino exhibit in all of AZA". Instead say "this is a top-notch rhino exhibit".
- To construct the content of each section, review the standards in that section *and* the questions from the Visiting Committee questionnaire for that section. Answer those questions as you write your narrative. Include anything else you have learned that may be relevant.
- **Do not include your team's recommendation for granting accreditation, granting provisional accreditation, tabling, or denying accreditation in the narrative report.** That recommendation should only appear in the cover letter.
- Do not include photographs in the narrative report.
- Address both the facility's strong *and* weak points.
- If you wish to make a suggestion or recommendation, state it as follows*: "the inspection team recommends that the institution consider XXXX…as one possible solution to addressing the issue".* Statements of this nature should *not* be underscored.
- If the team has an issue that is not directly related to a standard but believes it would be helpful to note the item for the institution's benefit, at the appropriate spot in the narrative state your suggestion in the following manner: *"The inspection team recommends that the institution consider XXXX which is current best practice",* or similar language.

WRITING THE INDIVIDUAL SECTIONS IN THE REPORT:

General Information
This section need not be detailed. Don't include things you expect to repeat later in the document. Comment on:

- Information relevant to the institution based on its location
- Institutional history tidbits (if any)
- Mission statement
- Other pertinent info about the institution, its idiosyncrasies, community relationships, etc.

Animal Care, Wellbeing, & Management
This section should be detailed and should begin by commenting on the priority of animal wellbeing at the institution and the institution's animal welfare assessment process (standard 1.5.0). This section should also detail the institution's engagement in AZA Animal Programs, and its adherence to all related policies. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Animal wellbeing
  - Overall, how do the animals look? Evidence of animal wellbeing concerns?
  - Overview, compliance with 1.5.0
  - Method developed for evaluating inputs/outputs
  - Regularity of assessments, and are changes made if needed?
  - Staff training in animal welfare science
  - Animal wellbeing concern reporting process
  - How concerns are managed if identified
- Enrichment program
  - Adequacy
  - Documentation
- Support
- Training program
  - Adequacy
  - Documentation
  - Support
- Ambassador policy
  - Types of animals, indications for use
  - Quality of housing, enrichment, training, etc.
  - Staff/volunteer training to manage
  - Use off site
  - Public contact
- Overview of animal inventory, species of particular note
  - How the facility is arranged, i.e., zoo-geographically
- Aquatic systems
  - Adequacy
  - Water quality monitoring
- Animal acquisition and transfer
  - Shipping mortalities
  - Permits, licenses
  - Criteria for selecting animal transfers from non-AZA facilities
  - Criteria for transferring animals to other facilities, including non-AZA facilities
- ICP/ ACMs/PRPM
- Engagement in AZA Animal Programs (TAGs, SSPs, and Studbooks)
- PMCTrack report
- Recordkeeping
  - Recordkeeping system (ZIMS, Tracks, etc.)
  - Registrar
  - Up to date?

Veterinary Care

This section should be detailed and should include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Full-time/part-time
  - Staffing vets, vet techs, other
  - Contract if part-time
  - Veterinary care adequate?
- Veterinary facility
  - Adequate for nature of collection and other activities?
  - Protection for collection if animals removed to off-site veterinary facilities
  - Equipment adequate, access to diagnostic imaging?
- Preventive medicine program
  - Adequate?
  - Up to date with program?
- Quarantine facility/program
  - Adequate?
  - Appropriate infection control, lateral disease movement?
- Animal capture & restraint
  - Adequate for collection?
  - Staff training
- Controlled drugs
  - Compliance with DEA regulations
  - Safety with dangerous drugs
- Compliance with AMDUCA
- Necropsies
  - Handling and storage of deceased bodies and tissues
  - Performed regularly?
- Euthanasia policy
  - Adequate and followed?
- Medical records
  - What system used?
  - Records current?
  - Remote access to records by veterinarian if off site?
  - Nutrition program adequate?
  - Browse oversight

Conservation

This section should be detailed and should include anything you believe to be important, and cite a few examples. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Conservation program, strategy
  - How evaluated
  - Cite ARCS submissions
- Participation in AZA SAFE programs
  - ○ Cite examples of participation
- Field conservation
  - Appropriate collaborations & partners?
  - Cite a few examples
- Local conservation efforts
  - Appropriate collaborations & partners
  - Cite a few examples
- Natural resource conservation program
  - How monitor efficacy

Education & Interpretation

This section should be detailed and should include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Adequate program oversight by professional educator
- Education program
  - Nature/description of program
  - How evaluated?
  - Does it/how does it meet the needs of the community
- Types of programs (cite a few examples), how many (if appropriate to include)
- Use of volunteers?
- Collaborative relationships with outside education-related institutions
- Public education programs, graphics, animal care specialist talks, etc.

Scientific Advancement

This section should be detailed and should include anything you believe to be important, and cite a few examples. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- The protocol for evaluating potential scientific studies
- How scientific studies are coordinated
- How scientific studies are viewed by staff
- Whether results are shared and/or published in appropriate journals
- The level of involvement with local and regional academia

Governing Authority

This section need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Type of GA
- Relationship with facility
  - Any problems?
  - Bear in mind narrative will be seen by institution and the governing authority; also, public access for municipally owned/operated institutions
- Does director/CEO run zoo/aquarium? Animal related decision making?

Staff

This section need not be heavily detailed unless there are issues that require it. Be sure to comment on the strength of the institution's staff diversity, equity, access, and inclusion program. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Adequate numbers, expertise, turnover rates?
- Pay compared to the profession and the local area (reach out to AZA staff for questions related to AZA's Member Compensation Survey)
- Any problems with communication between management and/or peers? Peers and peers?
- Staff educational opportunities
  - Internal development
  - Outside the institution/corporation
  - Professional development within zoo/aquarium profession
- Adequacy, effectiveness and evaluation of DEAI program
- Staff participation in AZA-related programs (committees, Scientific Advisory Groups, etc.)
- Staff leading AZA Animal Programs (i.e., TAG Chairs, SSP Coordinators, and Studbook Keepers) and AZA SAFE programs

Support Organization

This section need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Does the SO share the institution's goals and objectives?
- Is there a good working relationship between the SO staff and the institution staff?
- Does the SO recognize the zoo director as the final authority?
- Is the written agreement between the SO and the institution clear regarding responsibilities and expectations?
- Is fundraising part of the SO's responsibilities?
- What else is the SO responsible for?

Finance

This section need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Evidence of financial sustainability
- Problems with debt, reliance on governmental funds
- Any upcoming (within 5-10 years) voter-based tax/bond initiatives of importance?
- Financial contingency plan
- Capital improvements budget
- Maintenance/repair budget
- Continuing education/conference budget for staff

Physical Facilities

This section should be detailed and should include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Brief description of institution, size, type, etc.
- Is there an off-site facility
  - If so, describe
- Facilities in good repair?
  - Which areas need work, renovation, or demolition?
  - Evidence of deferred maintenance?
- Maintenance / repair plan
  - Work order system?
  - Written schedule for routine preventive maintenance
- Guest experience: heat, light, walkways, cleanliness
- Life support alarm systems
- Back up emergency generator
  - How long can the institution run on emergency power
  - Plans if duration exceeds stored fuel capacity?
- Fire, security, other safety alarms

Safety/Security

This section should be detailed and should include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Appropriate training: first aid, CPR, AED, fire extinguishers, zoonotic disease
- Safety program
  - Occupational health & safety
  - Safety audit/risk management
  - Ozone/chlorine/other oxidizing agents
  - Other hazardous material

- Lock out / tag out
- Confined space
- Safety with animals
  - Venomous: types, alarms, drills, antivenin
  - Dangerous: risk assessments (are they being done, free/protected contact, security, animal shifting, escape protocols)
  - Significant animal-related injury or escapes
- Emergency response plans
- Drills
  - Are they being done annually?
  - Are they being properly documented?
  - Are all four types being done annually?
- Dive safety
  - Types of diving
  - DSO – experience, formal training level
  - Identified safety-related non-compliances
  - Dive manual, dive control board
  - Emergency plans for each tank entered
  - Dive emergency drills
- Public access to dangerous animals
  - Risk assessments
  - Who has access, under what circumstances, and with which animals?
- Building security
- Barriers and fencing

Guest Services
This section need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Amenities: rides, playground, restaurant, water fountains, restrooms
- Map or other wayfinding
- GS staff: appearance, attitude, training
- General impression of the facility if you were a guest

Strategic Planning
This section need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Check the standards and the VC questionnaire and write to answer those questions. At minimum, comment on:

- Strategic plan (status, how often reviewed)
- Master/Campus plan

Other
This section need not be included if there are no comments that fit here. If included, it need not be heavily detailed unless there are issues that require it. Include anything you believe to be important. Comment on:

- Any other noteworthy observations, comments. Again, remember who will be reading this.

E. PRIMARY FOCUS AREAS WHILE INSPECTING

Following are the areas of primary focus for evaluating an institution during the inspection. 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 the 2025 "*Accreditation Standards and Related Policies*" booklet).

Animal Care, Wellbeing, & Management: An institution must comply with all wildlife laws. AZA is especially focused on the need for assuring the highest standards of animal care, wellbeing, and management. Pay close attention to the size *and* nature of the living environments provided for the animals. Be sure to note whether the physical *and* psychological wellbeing of the animals is being met. The facility's animal record-keeping system is of primary concern to the Accreditation Commission and should be carefully reviewed, and the institution should be performing regular welfare assessments in accordance with AZA standards. Animal transaction records should be checked, and particular close attention paid to transactions with non-AZA entities. Each institution is required to fully engage (as described in the Facility Handbook on Animal Program Engagement) in AZA Animal Programs (TAGs, SSPs, and Studbooks), including every SSP that pertains to an animal belonging to the institution, regardless of whether the animal is off- or on-site. Be sure to:

- Observe all of the institution's animals and their overall wellbeing
- Ascertain that the institution has a sufficient Institutional Collection Plan
- Examine *all* animal facilities, including those not located on site
- View the animals used in off-premises programs
- Select records at random to verify up-to-date status
- Review records for animals *not* in a zoological records management system (i.e., fish, insects, etc.)
- Examine animal diets, food coolers, freezers, etc.
- Look for signs of pests and determine what kind of pest control solutions are being utilized
- Check graphics for accuracy, clarity, consistency, and wear
- Determine if staff is aware of the institution's euthanasia policy
- Make certain the animals are protected from excessive heat and cold
- Make certain the animals are provided sufficient shade in outdoor exhibits
- Make certain the animals have access to potable water both on and off exhibit.
- 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)
- Make certain all the animals are being provided with appropriate enrichment on a regular and frequent basis, and the facility has a sufficient written enrichment program
- Make certain that habitats are of sufficient size and nature to provide for the psychological and physical wellbeing of each animal
- Make certain that habitats and holding areas are of sufficient design to prevent animal escape
- If the institution has contact areas, review written policy for animal and public safety
- View the animals used in public contact areas
- View the animals used in education programs and the written policy for their use
- Verify that the facility's policy on responsible population management incorporates, at minimum, all requirements contained in AZA's RPM policy
- Verify the process utilized for acquisition, transfer, euthanasia, and reintroduction of animals with *several* members of the staff at all levels
- Randomly pull RPM records for review, including those for ambassador animals
- Make certain that appropriate measures are taken to ensure that any animals loaned or transferred to non-AZA facilities are going to facilities that are willing and able to provide proper care for the animal(s) and that the transfer is done in accordance with AZA's Policy on Responsible Population Management, following communication/discussion with the relevant SSP.
- Make certain all animal transport protocols are adequate.
- If the applicant 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
- If the applicant 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

- If the institution holds elephants, make certain it is in compliance with the AZA Standards For Elephant Management And Care
- If the institution holds cetaceans, make certain it is in compliance with the AZA Standards For Cetacean Management and Care
- Make certain that the applicant has a clear process for identifying, assessing, and addressing animal wellbeing concerns
- Make sure that the institution embraces modern exhibit design and is working to update any older, outdated exhibits to reflect modern design practices
- Ensure that the institution is submitting relevant data to Studbook Keepers as requested
- Ensure the institution is fully engaged in all SSP programs in which they have animals as described in the Facility Handbook on Animal Program Engagement
- Review the institution's PMCTrack Report to assess and discuss level of engagement in each SSP Program (e.g., completion of surveys, follow through of recommendations, etc.)

Institutions Maintaining Elephants: [See "H. Responsibilities of the Elephant Program Inspector" below.]

Institutions Maintaining Cetaceans:

- In general, make sure that the institution has the funding and resources necessary (including personnel) to provide for the health and wellbeing of the animals, and that management of husbandry programs is guided by modern professional principles, plans, and procedures.
- Review the behavior management program to make certain it enhances the care and promotes wellbeing of the animals.
- Programs for cetaceans should be under the supervision of a qualified managing curator with appropriate training and experience.
- If interactive programs between guests and cetaceans are offered, make certain that the animals are given the choice to participate or not.
- Observe an interactive program, and observe the training for cetaceans that participate in interactive programs.
- Make sure the institution has an education program about cetaceans that is based on current scientific knowledge.
- A written breeding plan must exist. Review that document.
- Review the birth protocol and contingency plan that provides for the care of mother and calf.
- Evaluate the habitats to make sure there is sufficient space for natural behaviors and social groups.
- Make sure that water quality and monitoring in the animal habitats meets or exceeds accepted standards.

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 animals must be judged adequate for that particular institution. Institutions maintaining dangerous venomous animals should have envenomation response protocols in place and, if required, antivenin must be readily available and obtainable. The alarm system and emergency procedures should be closely reviewed. The applicant's animal record-keeping system is of primary concern to the Accreditation Commission and should be carefully reviewed. Be sure to:

- Determine if the institution follows the guidelines of the American Association of Zoo Veterinarians
  [https://cdn.ymaws.com/www.aazv.org/resource/resmgr/files/aazvveterinaryguidelines2016.pdf]
- Check the animal record-keeping system: is it adequate?; is it kept current?; randomly pull medical records for review
- Determine if the animal health care program is sufficiently staffed

- Determine whether animal care staff is adequately trained to assess wellbeing and recognize abnormal behavior and clinical signs of illness for animals within the collection
- Determine if the extent of veterinary services provided the animals is sufficient
- Determine whether the veterinarian participates in continuing medical education
- Determine whether there is access to medical, surgical, and diagnostic equipment
- Carefully review USDA reports, if applicable (check areas of concern, and determine what is being done to correct them)
- Evaluate quarantine procedures and their implementation
- Evaluate quarantine, isolation, and hospital facilities
- Check alarm systems and emergency procedures; ask random staff the procedure for retrieving an escaped animal
- Review drug emergency protocol (locked areas, authorized staff, etc.)
- Determine the veterinarian's response time from home in an emergency
- Confirm that policies and procedures for handling dangerous venomous animals are adequate, required sera is available, and enclosures are properly labelled
- Determine if drugs used in aquariums or aquatic exhibits comply with FDA guidelines
- Evaluate animal food prep facilities, procedures, and location
- Determine if animal food, especially seafood products, are purchased from sustainable or well-managed sources
- Determine how the institution ensures that the animals are not exposed to toxic plants from browse material and/or plants growing naturally on grounds
- Review the euthanasia policy
- Make certain storage and handling of animal carcasses and tissues is appropriate

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 should participate in SAFE species programs, 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. Be sure to:

- Determine if conservation is a key element in the institution's mission
- Determine if the facility is contributing their "fair share" to conservation programs based upon budget and/or staff size
- Review the number of staff dedicated to conservation programming
- Determine if the institution has an adequate conservation plan/strategy
- Determine level of support of, or methods of participation in, wildlife conservation programs
- Determine the level of involvement in SAFE programs
- Determine the level of involvement in resource conservation
- Ask what efforts are undertaken for energy and natural resource conservation (i.e., recycling, water conservation initiatives, etc.)
- Review local and national program literature
- Review participation in conservation programs with colleges and universities
- Determine whether conservation initiatives are regularly evaluated for effectiveness
- Determine whether ARCS surveys are submitted to AZA on an annual basis

Education and Interpretation: *[Not required for related facility applicants unless education is part of the applicant's mission. Evaluate if a program exists.]* Education must be an element in the mission statement of the institution, and all institutions must have a written education plan that matches current zoological and aquarium professional standards. Among the things to be closely examined are:

- Determine if education is a key element in the institution's mission
- Review the number of staff dedicated to education programming

- Determine that one paid staff member is dedicated to education on (at least) a part-time basis
- Find out how the education message is conveyed to the casual guest
- Examine several publications, brochures, or other printed material
- View the classrooms, teaching areas, etc.
- Explore the availability of funds allocated for education programs
- Check to see that exhibit signage and graphics contain appropriate information and are in good condition.
- Determine what the level of education department contact is with appropriate local schools, colleges, and other academia
- Review the volunteer and outreach programs
- Determine what level of outreach programming exists and if appropriate animals are being used
- If animals are being used in off-site situations, review the program to determine if it is appropriate
- Determine who develops and designs the institution's graphics
- Determine whether educational programs are regularly evaluated for effectiveness

Scientific Advancement: The scope of the institution's scientific advancement programs should be closely reviewed. Consideration should be given to the size, budget, and other areas affecting these programs. Be sure to:

- Review the protocol for evaluating potential scientific studies
- Determine how scientific studies are coordinated
- Explore how scientific studies are viewed by staff
- Verify if results are shared and/or published in appropriate journals
- 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. Be sure to:

- Ask the governing authority what the Director's role is in the decision-making process
- Explore the process of hiring and firing personnel
- Determine the lines of authority for acquisition, transfer, euthanasia & reintroduction of animals (are these decisions made by the institution's governing authority or its staff?)
- Evaluate the relationship between the governing authority and the Director
- Determine the levels of control on the part of the governing authority (appropriate or inappropriate)
- Determine the governing authority's role in the day-to-day management of the institution, including staff, animals, and programs

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

- Become familiar with the qualifications of staff and review resumes and job descriptions
- Randomly talk to staff about their responsibilities
- Discuss with management its relationship with staff, including problems and proposed solutions
- Discuss with individual staff their relationship with senior management, including problems (make certain to assure confidentiality of statements made)
- Determine whether adequate policies and procedures are in place to address concerns regarding inappropriate workplace behavior (i.e., harassment, discrimination, retaliation, etc.)
- Meet with animal care 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)

- Determine if lines of authority are clearly defined for staff
- Evaluate staff training for detail, frequency, appropriateness, etc.
- Investigate staff involvement with AZA, SSPs, TAGs, etc. Discuss with Animal Program Leaders (i.e., TAG Chairs, SSP Coordinators, and Studbook Keepers) the ways in which they are supported in their roles (i.e., adherence to the Statement of Institutional Support)
- Determine if appropriate funds are available for staff travel and participation in meetings, and which staff members are eligible to participate
- Review staff salaries to determine if levels are appropriate
- 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. Be sure to:

- Ask society representatives their role at the facility
- Evaluate the society's support and fund-raising efforts
- Review how funds are allocated and distributed
- Review financial reports and how funds benefit the facility
- Ask the society Director about the relationship between the society board and staff
- 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. Be sure to:

- 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.
- Ask the Director if budget cuts or other financial problems are anticipated in the future
- Review all financial records
- 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 applicant's future plans, accreditation will be based upon its operations and physical facilities at the time of the inspection. Things to consider include:

- Make your recommendation to accredit, provisionally accredit, table, or deny _based on what you see at the time you visit the_ facility, not on plans for the future
- Are animal buildings in good condition?; do the animal facilities meet or exceed all relevant federal and state requirements?
- Review the maintenance program, storage, and equipment. How do the overall grounds look? How much deferred maintenance does the institution have?
- 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 in exhibit design?; are plans in place to update older exhibits?
- Look at exhibit furniture: is it appropriate?; is there sufficient quantity?
- Are the exhibit groupings appropriate?
- Is there adequate ventilation and light in buildings and holding areas?
- Check exhibits from the service areas (is space sufficient for safety?)
- Check for regular program of water quality monitoring for _all_ animals, including written records
- Museums and science centers located on the same campus as or within the same building as the living animal collection are not to be evaluated or considered as part of the applicant institutions accreditation.

Safety/Security: The security program employed by that particular institution should be judged sufficient to provide appropriate protection for the animals, 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. Be sure to:

- Determine that drills are being conducted regularly and in accordance with standards
- Determine when the most recent drills were conducted and what type of drills they were
- Determine if escape procedures are posted in animal backup areas
- Review the files on the most recent safety incidents (i.e., escapes, accidents, injuries, attacks, public problems)
- Ask staff at random if they know the process of treating an injury to a guest, or where the nearest first-aid station is
- Determine if the exhibits are safe for the animals, the staff, and the public
- Review the written risk management plan to ensure that it includes an assessment requirement of those species and individual animals with which staff, volunteers, and guests may, **or must not**, have direct or indirect contact
- Observe public walkways, steps, and other public areas to determine if they are free of debris and in good repair
- Check work areas to make sure they are free of clutter and safe areas in which to work
- Make sure that Safety Data Sheets (SDS) are located in areas of easy access to employees
- Make sure that flammables are stored properly
- Make certain institutions using ozone, chlorine or other oxidizing agents as a means of water treatment have facilities and protocols in place for the safe usage of these chemicals, and staff are properly trained to handle emergency releases or spills
- Make sure that electrical service in all wet environments, aquatic exhibits, and associated service areas is equipped with ground fault circuit interrupters (GFI)
- Determine if appropriate safety procedures are in place for potentially dangerous animals
- Check alarms systems and emergency procedures
- If the institution is using diving, determine if they are meeting minimal operational safety standards for diving
- Verify that adequate security is provided for the animals both day and night
- Verify that security personnel are familiar with and trained to act in accordance with institution procedure and policy
- Check instructions to security personnel regarding nightly rounds, emergencies, etc.
- Determine if incidents of vandalism have occurred and, if so, how prevalent the problem is and how is it being addressed
- View stored firearms, if applicable; who has access? Is staff training adequate?
- Review active shooter training protocols
- Determine that the perimeter fence is separate from all exhibit fencing, and is intact and in good condition

Guest Services: *[Not required for related facility applicants, but evaluate if guests occasionally visit.]* While the Commission is interested in an applicant's future plans, *accreditation will be based upon its operations and facilities at the time of inspection and review*. Among the things to be closely examined are:

- Attempt to view the physical 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.
- Way-finding: are maps and signs available, clear, and easy to locate?

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

Strategic Planning: An institution should have a strategic and/or campus plan to guide the institution in its development. Be sure to:

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

F. PRIMARY CONSIDERATIONS OF THE INSPECTION TEAM

- **Animal Wellbeing (The Animals).** Wellbeing of the animals is of primary concern. The Visiting Committee shall consider the size *and* nature of the living environments provided the animals, and whether the physical *and* psychological wellbeing of the animals 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 facility's collection plan adheres, at minimum, to accreditation requirements. Animal transaction records will be evaluated, and particular close attention will be paid to transactions with non-AZA entities. In addition, the institution must have an in-house animal welfare assessment process that meets—at minimum—the requirements expected under standard 1.5.0. [See "Guide To 1.5.0" pages 21 – 23]. The institution must participate in every SSP program that pertains to an animal belonging to the applicant, although it may indicate at what level they desire to participate in each SSP.

- **Animal Health Care.** A facility'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 animals must be adequate.

- **Animal Security.** The security program employed by the applicant shall be sufficient to provide appropriate protection to the animals. The Commission shall base its judgment with respect to security on the operation, location, size, and physical facilities.

- **Conservation and Education.** The scope of conservation and education programs will be closely reviewed. Both of these programs require a written plan. 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. Each institution should participate in SAFE species programs, although it may decide at what level. The facility's Annual Report on Conservation and Science (ARCS reports) will be reviewed for each of the five years since the applicant's previous inspection.

- **Dangerous or Venomous Wildlife.** Facilities maintaining dangerous venomous animals should have envenomation response protocols in place and, if required, antivenin must be available and obtainable. 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.

- **Campus Plans, Policies, & Procedures.** Campus 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 facilities of similar size and nature.

- **Physical Facilities.** The physical condition of the institution will be closely observed in both public and restricted areas, and maintenance programs reviewed. Exhibits and holding areas will be considered in terms of modern zoological design, philosophy, and practices (see "Preamble" appearing on pages 16 – 18). Aesthetics are important, too. Antiquated facilities will be evaluated and may be considered below standard. Find out if there is a plan in place to update or replace those facilities.

- **Policy on Responsible Population Management (RPM).** The Visiting Committee shall ascertain the institution's policy covering acquisitions, transfers, reintroductions, etc. adheres, at minimum, to AZA's Policy on Responsible Population Management (RPM), and that the policy is being followed, including transfers to non-AZA facilities.

- **Record Keeping.** The facility'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 in place for the protection of its employees, the visiting public, and the animals. Written policies and training will be reviewed, and inspectors will look for potential safety hazards in both public and restricted areas.

G. COMMONLY FOUND CONCERNS

Following are concerns commonly found during inspections:

Examples of commonly found *major* concerns:

- Unresolved governance issues
- Unsigned/unconsummated agreements
- Low staffing levels
- Incomplete or lack of written safety procedures/manuals/protocols
- Inadequate policies, or failure to follow them
- Insufficient safety barriers
- Insufficient animal housing
- No duplication of records or failure to store duplicate set in separate location

Examples of commonly found *lesser* concerns:

- Failure to conduct drills in accordance with standards
- Insufficient evaluation of education programs
- 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 walkways
- Dark work areas
- Perimeter fence issues
- Missing or improperly mounted fire extinguishers
- Inaccessible SDS sheets
- GFI circuits in wet areas

Of significant concern, if present:

- Issues affecting animal wellbeing
- Recurring issues from previous inspections
- Evidence of poor preparation
- Lack of modern zoological practices and philosophies
- Director does not have final authority over animals, staff, or programs
- Unstable or unclear governing structure
- Unstable or unclear financial support
- Lack of forward momentum or progress

H. RESPONSIBILITIES OF THE ELEPHANT PROGRAM INSPECTOR

General Expectations for Elephant Program Inspectors:

- Elephant program inspectors are members of the inspection team and should not function separately from the team.
- Elephant program inspectors are expected to be at the institution for the entire inspection and participate fully in the exit interview (e.g., should not arrive late to the inspection or leave early).
- Elephant program inspectors should dress appropriately (business casual) when not "working in the barn."
- Elephant program inspectors should plan to spend no less than a full day and ideally a day and a half performing the elephant program inspection.
- When not "in the barn" or meeting with elephant staff, elephant program inspectors should be inspecting/interviewing with the rest of the team.
- Every effort should be made to schedule the elephant inspection around the governing authority interview(s) so that the entire team is able to meet with those individual. The same effort should be made regarding any meetings with line staff.
- At some point during the inspection, the entire inspection team should be scheduled to tour the barn, talk with the elephant team, and ideally observe some of the husbandry routines.

Before the Inspection:

1. Review the AZA Accreditation Standards, the AZA Standards for Elephant Management and Care, the AZA Accreditation Inspector's Handbook, and the AZA Elephant Animal Care Manual.
2. Review submitted elephant policies and procedures in advance of the inspection, including the AZA Elephant Program Annual Report forms for the last five years and the staff training program, noting any required documentation that may be missing.
3. Request any missing documents in advance or arrange to have them available for review while on site.

During the Inspection:

4. Meet the staff and the elephants. Do the elephants appear to be in good health and body condition?
5. Tour the facilities. Take multiple photos. Evaluate the condition and operation of necessary components for managing elephants, such as containment, gates, hydraulics, ERDs, training walls, and enclosure features.
6. Observe the morning and afternoon routines (shifting, feeding, etc.).
7. Observe multiple trainers accomplishing behavioral components with multiple elephants. If possible, let staff know in advance what you will ask to observe so that they can be prepared.
8. Ensure that elephant care staff is working safely around the elephants and that the two-person rule is being followed when within trunk's reach of an elephant.
9. Determine whether staff is or is not sharing either restricted or unrestricted space with elephants and, if so, how and for what purpose.
10. Review and observe enrichment procedures and practices.

11. Review and observe elephant diets and feeding practices.
12. Review elephant wellbeing assessments.
13. Review or ensure the veterinary inspector reviews elephant medical records.
14. Evaluate the status of institutional compliance with the AZA Standard Elephant Program Behavioral Components checklist.
15. Confirm that all elephant professionals have completed PEM I within three (3) calendar years from the date they begin working in that capacity and that all elephant managers have completed PEM II within three (3) calendar years from the date they begin working in that capacity. If not, confirm that there is a plan in place to accomplish these requirements.
16. Spend time reviewing any documents provided while on site.
17. Interview elephant keeper, management, curatorial, and veterinary staff. These would ideally be individual interviews but could be group interviews with the offer to meet with anyone individually and privately. Spend time alone with the elephant manager(s) for review and discussion.
18. Ensure that all observed practices, policies, and procedures are in alignment with the AZA Standards for Elephant Management and Care and the AZA Accreditation Standards.

After the Inspection:

19. Participate in filling out the Visiting Committee Report Form (questionnaire).
20. Contribute any elephant facility or program concerns or points of achievement for inclusion in the inspection exit interview.
21. Participate in the exit interview.
22. Contribute photos from time spent in the elephant facilities as part of the overall photo documentation effort.
23. Write a narrative describing in detail observations and assessments of the elephant facilities and management programs for inclusion in the overall narrative report. The elephant narrative should state whether the facility is or is not in compliance with the AZA Standards for Elephant Management and Care and the AZA Accreditation Standards.
24. The narrative for the elephant program evaluation falls under the Animal Care, Wellbeing, and Management section of the report. A template for writing the elephant portion of the narrative is included below.

Elephant Inspector Narrative Report:

Following are two examples of elephant program narrative reports. These examples are provided as models of the sort of narrative an elephant program inspector is expected to produce. The elephant evaluation should be placed at the end of the *Animal Care, Wellbeing, & Management* section of the narrative report. *[Note: some the details within the examples below are fictional and do not reflect an existing elephant program.]*

EXAMPLE 1

A review of the Paradise Valley Zoo elephant program was conducted over a two-day period and consisted of direct observations, an examination of elephant management policies and procedures, and personal interviews with elephant staff members. The collection consists of 2.5 African elephants ranging in age from 4.5 to 53 years of age, managed as a breeding group. The zoo is in compliance with the AZA Standards for Elephant Management and Care and the AZA Policy for Maximizing the Occupational Safety of Elephant Care Professionals. The elephant program, facilities, and staff serve as a model for excellence in elephant management.

Elephant care staff members are dedicated, enthusiastic, and knowledgeable about their animals. The team reported that present staffing levels are adequate for the needs of the program. A structured, multi-tiered staff development program is in place that safely integrates the experience level and skills of individual trainers into progressively more responsible roles within the program. All animal care specialists were aware of their standing within the program, what they are allowed and not allowed to

do with the elephants, and what they need to demonstrate to advance to the next level. Most of the animal care specialists have completed PEM-I; those that have not are scheduled to do so within the mandated timeframe. The animal care specialists' commitment to conservation education messaging is exemplary and is evident in the daily demonstrations and behind-the-scenes guest experiences.

Indoor and outdoor facilities are spacious, well maintained, and reflective of current best housing practices. The facilities offer space and complexity that provides the elephants with ample opportunities for exercising, swimming, foraging, and socializing as desired. The layout of the barn and yards allows for flexibility in managing, grouping, and separating elephants as needed. The barn features two elephant restraint devices (ERDs) that allow for both staff and elephant safety during husbandry procedures. There were no facility issues noted during the inspection.

Elephants are worked with barriers or restraints in place, although the sharing of either restricted or unrestricted space remains a program option in very well-defined circumstances and with the permission of senior leadership. It was clear during the inspection that a culture of safety is well-established with the staff. Animal care specialists were observed working safely around the elephants, following a two-person rule, and communicating effectively with one another when training or shifting elephants. All appropriate staff and elephant safety protocols are in place and being followed. The safety proficiency of staff members is regularly assessed on at least a monthly basis. <u>Program and facility assessments are occurring informally but semi-annual safety audits are not being recorded twice a year as required</u>.

Elephants are visually inspected each day and records of the physical condition and behavior of the elephants are maintained. Staff has the experience level necessary to evaluate the health and wellbeing of the animals. All elephants appear to be in good physical condition, with no or only minor issues with the one older animal. There are proactive geriatric plans in place for 53-year-old Cheyenne. The elephants are receiving quality veterinary care, with all exams, vaccinations, and trunk washes up to date. The veterinarians have the skills and knowledge to provide routine, clinical, and emergency care. Quarantine, preventive medicine, and immobilization protocols are all in place. In order to facilitate husbandry and medical care, all elephants are trained for all AZA standard elephant behavioral components. In sessions observed, the elephants were responsive to training cues and commands. Camaraderie within the team is such that animal care specialists are comfortable both giving and receiving feedback about training sessions. Footwork, exercise sessions, enrichment, and other animal care activities are occurring regularly.

EXAMPLE 2

The program is in compliance with the AZA Policy for Maximizing the Occupational Safety of Elephant Care Professionals but is deficient in meeting some of the AZA Standards for Elephant Management and Care (see below). This review was conducted over a two-day period and consisted of direct observations, an examination of the elephant management policies and procedures, and personal interviews with elephant staff members.

Elephants are worked with barriers or restraints in place, although the sharing of either restricted or unrestricted space remains a program option in very well-defined circumstances. Staff was observed working safely around the elephants. It is standard practice that two staff members must be present when working the elephants. Two-way radios are used for staff communication while shifting elephants and as part of the zoo-wide emergency communication system. The safety proficiency of staff members is assessed with periodic performance evaluations. Regular program and facility assessments are occurring twice a year, including both elephant staff and non-animal care personnel, in order to incorporate wide perspectives on the safety audits. Written inspection reports are produced according to AZA guidelines.

The configuration of the facilities is in accordance with the AZA Policy for Maximizing the Occupational Safety of Elephant Care Professionals in that it allows for the management of elephants with barriers and/or restraints in place. The exhibit space is not consistent with current best practices but plans are

in place to expand the yard. The layout of the barn, ancillary yards and exhibit allow for flexibility in managing, grouping and separating elephants as needed. The elephants would benefit from more frequent tilling or turning of the substrate in the exhibit in order to enhance foot and joint health, as they spend the majority of their time on hard surfaces. The barn features a fully operational elephant restraint device (ERD) that allows for both staff and elephant safety during husbandry procedures. Lighting in the ERD area needs to be improved. Peeling paint and rust on some of the metal caging was also noted. There is not adequate shade in the elephant exhibit. There are two small thatched shade structures present but much of the thatch is missing.

The elephant care staff are dedicated, enthusiastic, and knowledgeable about their animals. Present staffing levels appear to be only minimally adequate for the needs of the program. Elephant section animal care specialists are also responsible for the care of a number of other species and the time available for training and exercising of the elephants is limited. There is a structured, multi-tiered staff training system that safely integrates the experience level and skills of individual trainers into progressively more responsible roles within the program. The Curator has completed Principles of Elephant Management I & II. Animal care specialists that have not completed PEM-I are scheduled to do so in the required timeframe.

Elephants are visually inspected each day and staff has the experience level necessary to evaluate the health and wellbeing (feet, skin, behavior, abnormal physical changes, etc.) of the animals. However, the cows are significantly overweight. Consideration should be given to consulting with an exotic animal nutritionist in order to develop a safe, effective weight loss plan for these animals. In addition, staff should challenge themselves to overcome staffing obstacles in order to come up with more robust exercise options for the elephants.

In order to facilitate husbandry and medical care, the cows are trained for most, but not all, of the AZA Standard Elephant Behavioral Components. Those not yet trained should be prioritized and plans developed for their completion, particularly ear and eye exams and the acceptance of oral medications. The elephants' feet appear to be in good condition and there is a plan in place for regular foot care maintenance.

Quarantine, preventive medicine, and immobilization protocols are in place. Medical records with regards to the elephants are not complete and up-to-date.

The elephants were generally responsive to behavioral commands during the training sessions that were observed. However, if there is a consistent, zoo-wide philosophy and framework for animal training, it was not evident and should be encouraged. As noted above, the cows are reliably trained for most, but not all, of the required behavioral components. Staff indicated that time to train the elephants is very limited due to other responsibilities. Enrichment is occurring regularly. A list of approved enrichment items is kept in the barn and there is a well-defined process for approving new enrichment.

Daily logs of the behavior and physical condition of the elephants are maintained. AZA annual program reports are being submitted as required.

A number of pieces of documentation required in the AZA Standards for Elephant Management and Care were not in place. These include:

- The safety of elephant care professionals addressed in the institutional risk management plan.
- Guidelines for transport of elephants addressed in the elephant management policies.
- Plans to separate elephants from each other, to safely move elephants from one location to another, and to safely manage aggressive elephants addressed in the elephant management policies.

I. DETERMINING FINANCIAL STABILITY

The purpose of reviewing financial information is to make certain that the institution is sufficiently financially stable to maintain the institution and care for the animals in accordance with AZA standards for, at minimum, *the length of the accreditation cycle being considered* (typically, five years). A healthy, stable financial condition is critical to assuring the institution's ability to continuously promote animal wellbeing. An inadequate financial position and/or contingency plan can have a direct and negative affect on animal wellbeing and continued modernization of the institution. Reviewing and determining the adequacy of financial reports is one method of assessing financial stability. AZA standards also require competitive wages for staff. Having the ability to fund competitive wages is another indicator of financial stability. It must be noted, however, that some operations may not choose to spend their money that way, or may not have the option to do so due to regulations/factors beyond the simple control of money distribution.

Inspectors should look for indicators of reasonable work product in operations. Low salaries can be evidenced by poor operations. High salaried but inadequate employees can also be evidenced by poor operations.

Additional indicators to consider include:

- success of operation
- data to show how the institution supports the wages paid
- turnover rates
- accident rates for both staff and animals
- proof of plan/progressive improvement in working conditions (financial compensation being one)
- the process the operation must go through to improve or change pay scales
- proof that maintenance is occurring in a timely manner
- proof of continuous improvement and forward momentum of the institution as a whole

J. EVALUATING A DIVE PROGRAM

This information is intended to help inspectors properly evaluate dive programs at institutions located within the United States. For institutions outside of the U.S., the document can be used for general guidance.

Begin by reviewing the following items on the application questionnaire (2025 edition):

1. *SS-39. Does your institution utilize diving as part of regular operations and/or maintenance?*

   If the facility states that it does not utilize diving (including breath-hold diving) as part of its regular operations or maintenance, then simply confirm this while doing the on-site inspection. The next two questions (SS-40 & SS-41) can be considered together for a facility with a diving program. For institutions located in the United States, diving types are generally governed by the following OSHA rules:

Diving type	OSHA governance
Exhibit diving for routine cleaning/feeding/husbandry	Commercial diving
Exhibit/physical facility/life support maintenance	Commercial diving
In situ specimen collections	Scientific diving
Bona fide underwater studies	Scientific diving
Guest diving programs	Recreational diving
Entertainment (e.g., events, mermaids, media)	Commercial diving

Definitions:

> **Commercial Diving:** All diving operations in which construction, demolition, repair, maintenance, shipbuilding, shipbreaking, or ship repair work is performed.

> **Scientific Diving:** All diving performed solely as a necessary part of a scientific research or educational activity by employees whose sole purpose for diving is to perform scientific research tasks. Scientific diving does not include performing any tasks usually associated with commercial diving such as: placing or removing heavy objects underwater, inspection of pipelines and similar objects, construction, demolition, cutting or welding, or the use of explosives.

> **Technical Diving:** Diving other than scientific or commercial diving, which requires technical expertise and is not an integral part of an ongoing construction, demolition, repair, maintenance, shipbuilding, shipbreaking, of ship repair job. Such activities include, but are not limited to, making or performing observations, measurements, and adjustments, film and TV diving, and zoo and aquarium exhibit diving.

A dive program doesn't have to choose just one OSHA governance category. For example, a facility that uses all the diving types described in the table above could claim the corresponding governance for each diving type. However, a dive cannot be both a commercial dive and a scientific dive. Mixed purpose dives must be conducted under the governance of commercial dive standards.

Note: should breath-hold diving be added to the SS-38 list, federal OSHA regulations do not specifically address this type of diving (although California OSHA does). The OSHA general duty clause that states an employer is required to provide a safe work environment would apply in this case. Breath-hold diving occurs when a diver does not breathe from any air source while underwater. A snorkel may be used to assist breathing while the diver is at the surface.

2. *SS-42. Provide the name, title, and CV of your institution's Dive Safety Officer (DSO).* Review the CV. Having a DSO who is at least certified at the instructor level is considered a best practice, but is not an AZA standard. However, more scrutiny during the on-site inspection may be warranted if the DSO is not at least certified at the instructor level. It is important to evaluate whether or not the DSO has sufficient knowledge of diving safety standards and the ability to apply them to their dive program. NOTE: membership in AAUS (American Academy of Underwater Sciences) and subsequent use of the scientific exemption mandates an instructor-certified DSO.

3. *SS-43. Submit a copy of your institution's dive manual.*

   The safe practices manual must provide a written operational procedure for each diving mode used by the institution. It should include a copy of the regulatory standards (e.g., commercial diving, scientific diving, etc.) under which it operates. It should also include criteria for diver training and certification, and emergency action plans. Many manuals are cut-and-paste from the OSHA regulations and AAUS Dive Manual. Look for information that is specific to the facility's operation.

4. *SS-44. Submit copies of records and evaluation reports for live-action safety drills conducted at the institution for the last five years.*

   When reviewing the institution's records, note if everyone in the dive program is receiving the training and if the location of the training varies.

5. *SS-45. Provide a copy of your institution's dive emergency plan for each tank into which divers enter.*

   This is often included in the dive manual. Does this plan cover every tank?

6. *SS-47. Does your institution have a mechanism in place to periodically evaluation medical fitness to engage in diving activities?* Note that the standard does not mandate an actual

medical exam. If a medical history questionnaire is the basis for the evaluation, there must be processes and procedures for next steps when unfavorable responses occur. Note that scientific and technical diving standards have very specific medical examination requirements. Commercial diving does not, but it is considered a best practice.

7. *SS-48. Does your institution have a control board?*

   Although not an AZA standard, this is considered a best practice. If a facility claims the scientific exemption, then a DCB is required. Not having a DCB might merit a recommendation to create one in the *Narrative* section of the Visiting Committee Report.

8. *SS-49. Does your institution provide appropriate training and testing opportunities (including regular CPR, first-aid, and oxygen administration) to those persons involved in diving?*

   This is an OSHA requirement. During the on-site inspection, ask the divers what type of training they receive.

9. *SS-50. Does your institution maintain up-to-date diving logs for each diver?*

   During the on-site inspection, ask to see the diving logs for the previous week (or any time period). A proper diving log should list (at minimum) the date, location, divers involved (including Designated Person in Charge, DPIC), length of time of the dive and gas consumption for each diver, diving mode, and maximum depth. Dive logs should be maintained for all types of diving.

10. *SS-50. Does your institution provide appropriate workman's compensation for divers, including volunteers and/or local, federal, or Jones Act required coverage for diving from vessels?*

    Ask the dollar limits of the policy and why that amount was chosen. If there is any doubt that volunteers are covered, ask to see a copy of the policy.

During the on-site inspection:

11. *Is the dive equipment in good working order?*

    - On each scuba cylinder, hydrostatic test dates are stamped in the metal around the neck of the cylinder. The date is represented by the number of the month, a code representing who did the test, and the year of the test. The latest date must be within five years of the present time. In addition, an annual visual inspection must be done; inspectors should ask to see the institution's records of annual visual inspections.

    - Regulators (the mechanism which attached to the tank and provides a mouthpiece from which to breathe) should be inspected annually. This inspection is not always marked on the regulator, but should be documented in the equipment maintenance records.

    - The air quality delivered by the diving air compressor must be tested every six months. Ask to see the air quality certificate. OHSA requires an air quality test every six months.

    - If you don't feel comfortable hunting for these items, ask the DSO to show you the inspection dates or other documentation of equipment you select at random.

12. *Is the DSO clear on occupational diving standards associated with their dive program?*

    The occupational diving regulatory structure is complex, often times outdated, and based on the activities of each dive and often times the location. The DSO is responsible for implementing these regulatory mandates.

13. *Observe a dive operation if possible.*

    - A scuba dive is required to have a DPIC (Designated Person in Charge) and a stand-by diver, in addition to the scuba diver. The stand-by diver does not have to be dressed, but their gear must be assembled and ready to use in an emergency.

- A surface-supplied dive must have a DPIC and line tender. The tender and diver must be able to talk and hear each other through a communications system. NOTE: Hookah diving (air from the surface is supplied to the diver who uses a simple regulator mouthpiece and scuba mask) is not permitted under OSHA commercial diving regulations (except in California). Hookah diving is permitted under the Scientific Diving exemption. Hookah does not use a voice/audio communications system.

K. EVALUATING AN AMBASSADOR ANIMAL PROGRAM: HOUSING & HANDLING

Ambassador animal departments are unique in the zoo and aquarium community in that many or most of the animals are handled on a daily basis.

HOUSING. AZA standard 1.5.4 states that animals in education programs must be maintained and cared for by paid and/or unpaid trained staff, **and housing conditions must meet standards required for the remainder of the animals in the institution**. Although the housing conditions for ambassador animals may look different at times to those provided to exhibit animals, institutions **must** provide similar social, physical, behavioral and nutritional opportunities to ambassador animals. Regular holding enclosures (this does not include short-term holding for programs or transport) for any given species **must** provide sufficient space for comfort, exercise, shelter, and have sufficient complexity. Ambassador animals should be housed socially when appropriate for the species.

When evaluating holding areas, be sure to pay attention to the size and complexity of the enclosure in which the animal lives. Although ambassador animals receive enrichment by participating in programs outside of their holding habitats, other forms of enrichment should be provided within their holding spaces. The enclosures in which they live should be large and complex enough to encourage natural behavior, to provide comfort and shelter, and contain appropriate elements that the species would likely seek in nature (substrates, soaking pools, climbing structures, rock formations, etc.). Do the animals have access to outdoor areas? Is there sufficient exposure to UV light, proper ventilation, temperature, and water quality monitoring? Speak with the paid and/or unpaid staff who care for the animals daily to determine training levels and reporting structure.

HANDLING. Handling often involves some form of restraint including collars and leashes, jesses, harnesses, crates, or just holding an animal in a presenter's hands. AZA-accredited institutions should be using the most positive, least intrusive animal training and handling methods. Providing animals with choice and control in their environment should also be a high priority.

It is important that, in addition to the above goals, animal wellbeing always be given high priority when evaluating an ambassador animal program and the individual animals in its collection. Animal wellbeing, as defined by The AZA Animal Welfare Committee is as follows: *"A state of being comfortable, healthy, or happy; achieved by AZA facilities giving animals lifelong opportunities to thrive."* Because physical, mental, and emotional states may be dependent on one another and can vary from day to day, it is important to consider these states in combination with one another over time to provide an assessment of an animal's overall wellbeing.

When reviewing an ambassador animal program, begin by reviewing the following items on the application questionnaire:

1. ***AC-40***. *Does your facility use ambassador animals (animals that are used outside their normal exhibit or holding areas or are intended to have regular, physical contact with the public within their normal exhibits, e.g., contact area with domestic animals, browse feeding programs with giraffes, lorikeet feeding, etc.)?*

   *And **AC-40.a**. If yes, submit a copy of your institution's ambassador animal policy (including ambassador animal philosophy and contact policy) detailing recommended exposure times, animal handling policy (pick up, touch only, etc.), training for animal handlers, and animal*

rotation and/or replacement policy. This policy should clearly adhere to the AZA approved Recommendations For Developing an Institutional Ambassador Animal Policy.

> **Recommended Action**: Review the information submitted in the application and be sure that it aligns with what is observed during the inspection process. Review recent animal usage documentation at the facility to assure these records are in line with the policies that were submitted during the application process. During the inspection, ask handlers about the training/checkoff processes for handling animals to assure that they are in line with documentation provided in the application.

2. ***AC-41****. Provide a <u>detailed</u> description of how your institution maintains ambassador animals. If they are housed separately from the rest of the animals describe their housing (include photographs) and the social, physical, behavioral, and nutritional opportunities provided for the ambassador animals.*

> **Recommended Action:** Review the information in the application and assure that housing conditions are adequate for meeting the requirements of this section. Request to view records relating to diet and training/enrichment opportunities. For species that are typically housed socially, request further information if individuals are housed on their own.

3. ***AC-42****. Does your institution utilize ambassador animals in off-premises situations (i.e. shopping malls, sporting events, school programs, theatrical productions and/or television appearances, etc.)?*

*And **AC-42.a***. *If yes, submit a <u>detailed</u> explanation, including list of animals used, a description of who handles the animals and how they are trained, (including the experience of the person training the handlers), and your institution's operations and safety protocols, and institutional procedures to protect the rest of the animals from exposure to infectious agents.*

> **Recommended Action:** During the inspection, ask handlers about how their training was conducted. Who trained them? Did this trainer have the expertise to adequately share handling and safety protocols, as well as information on recognizing signs of stress? Review their protocols to assure that they are adequate and in line with documentation provided in the application. Ask to see some of the handlers demonstrate how they pick up, crate, or otherwise prepare an animal for transport and presentation in a program. Ask how the animals are housed during offsite programs (i.e., do they stay in their transport crates, move to temporary caging, etc.).

Background Ahead of the Ambassador Animal Program Evaluation:

To help promote and ensure the highest level of wellbeing for ambassador animals, below are items to look for when evaluating choice, control, and wellbeing.

4. **Voluntary Approach Behavior.** Does the animal voluntarily approach the handler when being taken out of an enclosure? Since caretaker-animal relationships have been shown to be a valid measure of wellbeing. Voluntarily approaching a handler could be an indication of animal wellbeing. Positive reinforcement does not always need to involve food. A reinforcer for approach behavior can be an opportunity to perform a favored behavior, to access a desirable location, or could be a result of a strong relationship with a handler or handlers in general.

An animal's reaction when asked to approach a handler can be an important indicator of the animal's current preferences and state. If the response is reluctance or resistance, the animal should not be forced into participation. Instead, a new plan should be developed to problem solve the reason for that animal's choice, implement strategies to increase trust, and improve voluntary performance of the desired behaviors. If an animal consistently responds poorly for a caretaker, that relationship should be evaluated.

It is important to note that not all animals need to voluntarily approach the handler to exhibit wellbeing. In the case of invertebrates, some reptiles, and other animals, wellbeing may be

evaluated by observing behavior while being handled. The appearance of comfort when handled would indicate welfare toward the "good" end of the continuum. Struggling, tugging on leashes, or other species and individual-appropriate indicators of stress would indicate welfare toward the "poor" end of the continuum.

5. **Use of Leads and Jesses.** Leads (leashes, harnesses, or other equipment that tethers an animal to handlers) and jesses (short straps designed to be used in conjunction with grommeted anklets on raptors) should be used as tools to ensure the safety of animals and not to control or restrain an animal. If leads are used, note whether the animals accept them voluntarily or strain to get away. Leashes should be slack as the animal chooses to maintain proximity to handler(s). Any equipment used for this purpose should be in good condition and free from fraying, cracks, and other signs of wear. The facility should have appropriate protocols in place to determine the use (or not) of any type of jess, harness, or lead for each individual animal based on individual and natural history as well as the anatomy and physiology of the species. The use of jesses with non-raptorial species is generally not ideal because of the risk of injury.

6. **Choice.** Choice is the mechanism by which animals control their outcomes, and is a critical part of promoting animal wellbeing. When possible, ambassador animal programs should offer their animals the ability to choose whether or not they participate in a program. Handlers should be trained to recognize signs of stress or reluctance, and should be trained to problem solve the situation, including implementing strategies to improve voluntary participation. Handlers take away choice when they force an animal to step onto a glove or go into a crate.

7. **Control.** An animal has control in its environment whenever it has the opportunity to use its behavior for desired outcomes. Giving ambassador animals control during training and handling sessions can dramatically increase desired behavior. Of course, an animal should not be given complete control. When a handler locks the door of a crate or restrains an animal, positive reinforcement should be used as compensation for the loss of control in order to encourage future voluntary participation in the desired behavior.

8. **Use of Positive Reinforcement.** At the most basic level, all animals are either going toward something they like or going away from something they dislike. The goal of the ambassador animal program should be to work with animals using the most positive, least intrusive effective strategies. If the normal training and handling of any of the facility's ambassador animals involves negative reinforcement or aversive stimuli, this would not be acceptable under AZA standards, and plans should be made immediately to either develop alternative training and/or handling strategies, or to cease that animal's participation in future programming. In the event that an animal does cease participation in programming, a plan should be in place to ensure that wellbeing is maintained.

9. **Loading/Transport Sensitivity.** Since most ambassador animals need to be transported from their regular housing in order to participate in programs, it is important to consider what the process of loading and transporting looks like from a wellbeing point of view. Choice should again be considered here. For animals that will take food from their handlers (e.g., most mammals, birds, and some reptiles), observe if they voluntarily approach their handlers for removal from their habitats, or shy away. During transport, crates and carriers should be handled with care since this is an important aspect of promoting wellbeing.

During the on-site inspection:

10. Determine how animals are selected to participate as ambassadors, and learn how handlers assess their wellbeing both in and out of programs. Does the institution have presentations or programs with animals that may not be suitable choices? If so, ask why that particular animal is used and how its wellbeing is assessed. Make certain the institution is in line with AZA's Policy Restricting the Use of Non-human Primates as Ambassador Animals.

11. Are ambassador animals given a choice to participate? What methods/processes are in place to assure that an animal is not used too frequently or too infrequently (meaning that it rarely gets the opportunity to leave its enclosure)? Review how the scheduling of animal participants is determined.

12. Ascertain how the daily wellbeing of ambassador animals is assessed. In doing so, make sure paid and unpaid staff members have received proper training in assessing animal wellbeing. Review the steps taken by staff when a behavioral change is observed in an animal. Determine who has the authority to decide which animals participate each day and how the decision process is handled. Review a few examples of the animal welfare assessments required under standard 1.5.0, including examples that resulted in a change being made.

13. Ascertain that paid and unpaid staff members who handle ambassador animals have been properly trained to handle them, and to detect changes in stress, health, and demeanor. Review training protocols and frequency, and speak with the individual in charge of providing training and oversight.

L. EVALUATING A DIVERSITY, EQUITY, ACCESS AND INCLUSION PROGRAM

In 2020, the Association of Zoos and Aquariums (AZA) Board of Directors adopted a new Diversity, Equity, Access & Inclusion Position Statement which can be found at https://www.aza.org/board-approved-policies-and-position-statements.

Additionally, accreditation standard 7.9 has been strengthened to be more comprehensive and specific, with greater accountability for each accredited organization in regards to DEAI.

[NOTE: It is important to clarify that these guidelines are intended to serve as tools in helping institutions develop their programs, and for accreditation inspectors to use in understanding what a great program would look like. While institutions are always encouraged to exceed standards—at minimum, institutions must meet the AZA standard as written, and may decide how far they wish to go beyond the standard in building a good program.]

Standard:

7.9 The institution must follow a written diversity, equity, access, and inclusion program. Programs must be proactive and transparent, with measurable goals for assessing progress, and must have a paid staff member(s) or committee responsible for oversight.

Explanation: Programs must reflect recognition of the important connection between mission and community, and present an ongoing effort to enhance diversity, equity, access, and inclusion. Programs should consider regional/national/international differences and be designed to be most relevant and impactful for the specific facility and the communities it serves. Efforts may address areas including training and onboarding of staff, workforce (paid and unpaid staff) recruitment and retention, target audiences (such as current and future guests, members, participants in education programs), and supplier and vendor diversity. Programs must be reviewed and evaluated on a regular basis for effectiveness, impact and content. Refinements should be made as needed. Further information on the establishment of a DEAI program is available from AZA, and online at https://www.aza.org/accred-resource-center (you will be requested to log in using your individual membership user name and password).

Note: "measurable goals" is defined by the Commission as: "goals that measure culture shift within the organization".

Plain language:

- The format and contents of each organization's DEAI program will be very different. The key outcome is that the organization is demonstrating strategic thought and planning, in addition to accountability for its DEAI program.

- The paid staff member or committee member does not need to be a DEAI professional, but should be a leader and coordinator for these efforts within the organization. They should be engaged in training and development in this area.

- Organizations do not need to hire a Diversity Officer. Assignment of a staff member or committee to oversee the program is sufficient to meet the standard.

Evaluating an Organization's DEAI Program

Each main topic below represents an aspect of a well-developed and well-executed DEAI Program. Accompanying questions may be used by Accreditation Inspectors, or by organizations preparing for accreditation to evaluate their DEAI program.

1. **Program Administration**
   a. An active, engaged staff member, committee, or working group meets, at minimum, annually to evaluate program progress and make adjustments, if needed.
      i. Questions
         1. *Who is responsible for creating and implementing your organization's DEAI program? How often do they meet and/or hold meetings to review program progress?*
         2. *What resources are allocated to support the program?*
   b. Organizational leadership, including its governing body, engages in DEAI discussions and demonstrates accountability to DEAI goals and objectives.
      i. Questions
         1. *How often are DEAI topics discussed by the senior leadership of the organization?*
         2. *How are the goals of the program evaluated for success with leadership?*
         3. *What is the nature of board/governance involvement in the DEAI program?*
   c. The institution should consider including DEAI in the organization's strategic planning process.

2. **Staff and Volunteers**
   a. Staff and volunteers are provided opportunities to engage in DEAI-focused content either through facilitated conversations, and/or trainings facilitated by internal or external providers.
      i. Questions
         1. *Does the institution offer DEAI training opportunities?*
         2. *If yes, how often?*
         3. *When was the last DEAI training offered?*
         4. *Is training accessible to all-staff? Is training available to volunteers? Board members?*
   b. A significant focus should be placed on developing an inclusive staff culture.
      i. Questions
         1. *What are you doing to develop an inclusive culture?*
         2. *How are you assessing and getting feedback from staff about your culture?*
   c. Emphasis should be placed on recruitment, retention, and development of staff and volunteers representing diverse perspectives.
      i. Questions
         1. *What does the organization do to assure that hiring and retention practices reach diverse candidates?*
         2. *How does the organization assure that the hiring process is conducted fairly?*
         3. *What are you doing to retain diverse staff?*

    d. Staff and volunteers should have a voice in DEAI conversations and decisions.
       i. Questions
          1. *What avenues are available to staff and volunteers to discuss important issues regarding DEAI?*

3. **Suppliers**
    a. An organization should have a supplier diversity program, addressing the organization's commitment to supplier diversity.
       i. *How is the supplier diversity program managed?*
       ii. *How are decisions made?*
    b. An organization should use clear metrics for increasing supplier diversity.
       i. *How is the organization using existing programs and designations to work with local, under-represented groups?*
       ii. *Who is ultimately responsible for these decisions?*

4. **Visitors**
    a. An organization actively works with the diverse demographic and geographic communities that make up its audience.
       i. Questions
          1. *How are you involved within the community to connect to diverse audiences?*
          2. *Which departments or areas work with the community?*
    b. Visitor experiences and/or programs should be co-created with input from diverse community stakeholders, with an emphasis on accessibility, relevance and sensitivity.
       i. Questions
          1. *How are diverse community voices involved in the creation of the visitor experience?*
          2. *Does it appear that staff training in this area is adequate?*
    c. Evaluation and research should be culturally appropriate and responsive - utilizing participatory evaluation when appropriate.
       i. Questions
          1. *If external evaluators are used, how do you assure they will utilize a culturally sensitive approach?*
          2. *If your organization has internal evaluation capacity, how do you assure they are utilizing culturally responsive strategies for working with diverse audiences?*
          3. *How are groups that the zoo/aquarium retains for evaluation and research chosen?*
          4. *Who assures that evaluation and research align with the organization's diversity program?*
    d. An organization should form partnerships with diverse community groups and leaders.
       i. Questions
          1. *Who do you work with within the community?*
          2. *Are there community groups that you do not work with? If so, what are the perceived obstacles to working with them?*

III.
DEFINITIONS

A. DEFINITIONS OF ACCREDITED INSTITUTIONS AND RELATED FACILITIES

To apply for accreditation, institutions must: (1) operate based on philosophies and practices considered by AZA as being *modern best zoological practices* of the profession, (2) meet or exceed all AZA accreditation standards and adhere to all AZA policies, and (3) meet <u>all</u> aspects of either the definition of a zoological park or aquarium or the definition of a related facility, as written immediately below.

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 animals 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 a core mission the exhibition, conservation, and preservation of the earth's fauna in an educational and scientific manner.*

For the purposes of AZA's <u>accreditation program</u>, the Related Facility membership category is defined as: *organizations holding wildlife that are not commercial entities, and are not open to the public on a regularly scheduled, predictable basis. The facility shall be under the direction of a professional staff trained in animal husbandry, and shall be further defined as having conservation and preservation as part of its mission—a mission that shall have a beneficial, tangible, supportive impact on the zoological and aquarium professions. This includes wildlife ranches, wildlife refuges or rehab centers, research facilities, survival centers, conservation support facilities, and/or similar organizations.*

B. BASIC DEFINITIONS

ACCREDITATION: The establishment and maintenance of professional standards and the qualitative evaluation of organizations in the light of those standards. Through this process a profession is judged based on criteria selected by experts in that field, rather than by outside agencies and/or individuals that are not actively employed in that field.

ADJACENT: Next to, close to, adjoining.

AESTHETIC: Pertaining to the beautiful.

ANIMAL WELFARE: An animal's collective physical, mental, and emotional states over a period of time, measured on a continuum from good to poor. Animal welfare refers to the science of animal welfare and is measurable using both input- and output-based measures. The science of animal welfare supports and informs our understanding of animal wellbeing (see "animal wellbeing" definition below).

ANIMAL WELLBEING: A state of being comfortable, healthy, or happy; achieved by AZA facilities giving animals lifelong opportunities to thrive. This is supported through: leadership, culture, and operations; science and innovation; expertise and passion; collaboration and sharing; engagement and communication; and our approach to the conservation of species and natural spaces. Wellbeing is a concept used to communicate the desire to provide and overall positive balance of comfort, health, and happiness to the animals in our care. Wellbeing, for the purposes of this document, is conceptual. This contrasts with animal welfare (see "animal welfare" definition above) which is a science and measurable. The science of animal welfare supports and informs our understanding of animal wellbeing.

AQUARIUM: Usually at least one public building which contains aquatic animals. However, the animals are usually split into numerous exhibits. [For full definition see *Basic Definition*, above.]

BREATH-HOLD DIVING: A diving mode in which the diver uses no self-contained or surface-supplied air supply.

CAMPUS PLAN: A written long-range plan that provides an organization with direction to develop or improve land, facilities, a building complex, etc.

CEO/DIRECTOR**:** The person with the authority and responsibility for the operation of the institution. Other titles may include president, chief executive officer, superintendent, supervisor, manager, etc.

CONSERVATION: Conservation is understood to be active stewardship of the natural environment, including wildlife, plants, energy and other natural resources.

CURRENTLY ACCREDITED APPLICANTS: Currently accredited applicants are those facilities that are AZA-accredited *at the time the application is submitted and processed.*

DANGEROUS VENOMOUS ANIMAL: A venomous animal capable of causing human harm requiring special treatment beyond standard first aid.

DEFENSIVE INTERVAL PERIOD: A financial metric indicating the number of days an entity can operate without needing to access long-term assets or additional outside financial resources.

DIVER: An employee (paid or unpaid) working in water using an apparatus (including snorkels) which supplies breathing gas at ambient pressure.

ENGINEERING STANDARDS: Standards that require exact and precisely measured steps to fulfill an engineering characteristic, with little or no variation in method for meeting the goal.

ENRICHMENT: A process to ensure that the behavioral and physical needs of an animal are being met by providing opportunities for species-appropriate behaviors and choices.

EXPLANATION: A component of the standard that provides additional details regarding the requirements of that specific standard.

GOVERNING AUTHORITY**:** The agency with authority to govern the operations of the institution (such as the city, county/provincial, or federal government body, private corporation, foundation, society, board of directors, or other similar entities).

INSTITUTIONAL COLLECTION PLAN (ICP): An ICP is a document designed to thoughtfully assess the reasons for having each taxon in the collection. The ICP must be updated on a regular basis (minimally every 5 years). The ICP should include a statement of justification for all species and individuals in the institution's planned collection.

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 rare 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 facilities located outside of the United States. If possible, AZA will assign an individual who is fluent in the applicant's native language to the inspection team for all international institutions, but the questionnaire and all *primary* materials submitted must be in English (see *Translation of Documents,* page 22 of the 2025 *Guide to Accreditation of Zoological Parks and Aquariums*). If AZA is unable to assign individuals who speak the native language, the institution is responsible for providing an interpreter. Brochures and other pre-printed materials must be accompanied by a translation. If you have any questions about this please contact AZA.

MASTER PLAN: See "campus plan" above.

MENTOR (PEER CONSULTANT): An individual deemed qualified and assigned by the Accreditation Commission to assist an AZA-accredited institution in addressing identified concerns or preparing for the AZA accreditation process. Non-accredited facilities, see "Pathway Toward Membership" below).

MODERN ZOOLOGICAL PRACTICES AND PHILOSOPHIES: Understanding, engaging, and committing to the advancement of standards, practices, related policies and philosophies in all areas assessed by AZA through accreditation constitutes "modern zoological practices and philosophies". These accepted best practices and philosophies define excellence in our profession and are what distinguish AZA-accredited institutions from other institutions that have animals for guests to see and appreciate. The word "practices" represents the tangible while "philosophies" refers to an overall perspective.

NEW APPLICANTS: "New" applicants are those institutions applying for accreditation for the first time, *or* any institution that is *not currently AZA-accredited*, regardless of whether it has been AZA-accredited in the past.

OCEANARIUM: Usually aquatic animals housed in several public buildings contained in a park setting. The exhibit scale is very large with other attractions/services scattered among the exhibits.

PATHWAY TOWARD MEMBERSHIP (PTM): PTM is a program for non-member facilities that are interested in preparing for and eventually undergoing the AZA accreditation process, and who wish to have a Coach assist them. As part of the program a Coach will be assigned by AZA to help the facility identify areas that need to be addressed, will review and help update policies and procedures, internal documents, record keeping, and all areas involved in the accreditation and AZA membership process. The Coach can advise as to the facility's readiness, and can also provide guidance on assembling the application, if desired. Additional benefits are included with the program. Check with AZA's Membership Department for more information.

PERFORMANCE STANDARDS: standards that measure the level of achievement considered acceptable to fulfill a performance characteristic, and choice in method for meeting the goal.

PERMANENT (cultural institution): an institution founded by an authority which intends it to continue indefinitely.

POTENTIALLY DANGEROUS ANIMALS: Potentially dangerous animals are those species that could likely cause serious injury or death to a human through attack, disease transmission, etc. While some species are obviously dangerous, the Commission acknowledges there is not complete agreement of potentially dangerous species among all zoo/aquarium professionals or regulatory agencies. Member institutions are expected to provide their own analysis and justification of the species they consider potentially dangerous in their collections and to demonstrate that appropriate procedures are in place to prevent harm to staff, guests, volunteers, etc. Institutions are encouraged to err on the side of caution in determining what species should be considered potentially dangerous.

PROFESSIONAL STAFF: a paid full-time employee who commands an appropriate body of special knowledge and has the professional training, experience and ability to reach zoological park or aquarium management decisions consonant with the experience of peers, and who has access to and knowledge of the literature of the field.

REGULAR BASIS: regular hours, so that access is reasonably convenient to the public.

RELATED FACILITY: Organizations holding wildlife that are not commercial entities, and are not open to the public on a regularly scheduled, predictable basis. The facility shall be under the direction of a professional staff trained in animal husbandry, and shall be further defined as having conservation and preservation as part of its mission—a mission that shall have a beneficial, tangible, supportive impact on the zoological and aquarium professions. This includes wildlife refuges or rehab centers, non-

invasive research facilities, survival centers, breeding farms, and/or similar organizations." The Accreditation Commission, and its agents, shall determine whether a facility meets the definition of a related facility.

STRATEGIC PLAN: A written plan defining an organization's focused direction and core mission areas, including main goals and resources necessary to achieve these goals and strategic success.

SUPPORT ORGANIZATION: A subordinate or independent organization and non-governing entity, usually a public charity, one of whose primary purpose is to support through a formal agreement an accredited zoo or aquarium by performing mutually agreed upon functions such as fund raising, endowment, membership, education, guest services and public relations.

VENOMOUS ANIMAL: An animal which envenomates by biting, scratching, stinging, or direct contact, but not by ingestion.

WILDLIFE: Non-domesticated animal life.

WILDLIFE PARK: Animals maintained in a public park setting, usually in very large exhibits that include animals which are free-ranging within the exhibit.

ZOOLOGICAL PARK: A collection of animals which are housed in many public exhibits, both indoors and outdoors. [For full definition see *Definitions*, page 53 - 56]

IV.
THE WRITTEN REPORT

The accreditation inspection written report is the property of AZA. Inspection teams serve as the "eyes and ears" of the AZA Accreditation Commission, and inspectors are agents of AZA. Each inspection report will be checked thoroughly by AZA and edited as necessary for format, spelling, grammar, clarity, and content (as related to standards). Narrative reports that do not adhere to the instructions in this section will be restructured by AZA to fit the format. If any statements are unclear, the team chair will be contacted to ensure that content is correct.

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.

A. COVER LETTER (LETTER OF RECOMMENDATION)

The cover letter forwarding your final report should state your Committee's recommendation for granting accreditation, granting provisional accreditation, tabling (in the case of new applicants), or denying accreditation, and anything else you believe the Commission should know, both positive and/or negative. This letter is *not* shared with the applicant. 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, provisional accreditation, tabling, or denial, other appropriate recommendations include: ** provisional accreditation 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 granting provisional 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: (new applicants only)

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 application 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 4:

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 <u>recommends denial of accreditation</u>. Please see the narrative portion of the attached report for details regarding these concerns.

B. VISITING COMMITTEE REPORT FORM QUESTIONNAIRE

It is important that <u>all</u> 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). <u>The List of Concerns *must* contain the items marked "U" from the report form.</u> It may be helpful for the team to meet nightly during the inspection to discuss and complete the questions on the form.

Correct Edition. Before proceeding, first <u>make sure</u> you have the correct edition of the report form. You must have the edition matching the year in which you <u>received the assignment</u>, and it must match the edition year of the institution's application (a *2025* application requires a *2025* Visiting Committee Report Form questionnaire, etc.). The edition year you are using may not necessarily be the year in which you are writing the report (for example, a team assigned in October may not perform the inspection and write the report until January or February). Also verify that you are using the correct

"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 <u>"Comments"</u> area at the end of that section, and again *in greater detail* in the narrative report. *<u>"U"s **must** also be included on the list of concerns given to the CEO/Director during the exit interview. If multiple questions relating to the same area of concern are marked "U", that item should only be listed one time on the list of concerns.</u>*

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 AZA accreditation staff 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, the following items should be sent to accreditation staff by email or through a file sharing service such as Dropbox: •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./F-2.   *Appearing on Institutions Questionnaire only.*

<div style="text-align:center">See "Question Aids" above.</div>

		YES	NO	N/A	A/Q/U
F-3.	Does the institution meet all state and federal laws regarding financial reporting and auditing?	☒	☐	☐	A
F-4.	Does the institution have continuing financial support? [9.1] < A >	☒	☐	☐	Q
F-5.	Is the total financial support adequate to meet the needs of the institutions [9.1]	☐	☒	☐	U
F-6.	Is financial support the recognized responsibility of the governing authority? < A >	☒	☐	☐	A
F-7.	Is the institution's written contingency plan adequate should significant decreases in operating income occur? [9.5] < A >	☐	☒	☐	Q
F-8.	Does the insurance protection appear to be adequate for guests, governing authority, staff, society, volunteers, animals, and physical facilities? [9.3] < A + >	☒	☐	☐	A
F-9.	Is there a separate budget for capital improvements and major repairs/replacements? [9.4] < A >	☒	☐	☐	A
F-10.	Are sufficient amounts allocated for capital improvements and major repairs/replacements? [9.4, 10.1.2] < A >	☐	☒	☐	U
F-11.	Are sufficient amounts allocated for conferences, continuing education, training/seminars, etc.? [7.5] < A >	☒	☐	☐	A
F-12.	Are sufficient amounts allocated for maintenance and supplies? [9.4, 10.1.2]	☒	☐	☐	Q

COMMENTS: F-4/5: Total financial support has decreased and is not at a level sufficient to meet the institution's needs (9.1). F-7: The contingency plan is weak and needs improvement (9.5). F-10: The amount allocated for capital improvements is insufficient to meet the needs of an institution this size (9.4, 10.1.2). F-12: The amount allocated is minimal for an institution this size (9.4, 10.1.2).

C. HOW TO FORMAT THE NARRATIVE REPORT

FOR "HOW TO WRITE THE NARRATIVE REPORT" SEE TUTORIAL PAGES 26 – 31

NOTE: 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 will be restructured by AZA to fit the format. The team chair will be contacted if there are issues of clarity or content.

Formatting:

All team members should take part in writing the narrative report (see "How To Write The Narrative Report", pages 26 – 31). The team chair should assign portions of the narrative to each team member, and each team member should send their finished section to the team chair for integration into a single

final document. The team chair should edit and submit the final document to AZA as instructed. Important rules to remember are:

1. Begin the report by listing the names and titles of all team members (see example below).
2. Follow this by affirming that your team reviewed the report of the previous team (if applicable), noting whether any items of concern indicated by the previous team remain at issue.
3. If there *are* items from the previous report that still remain an issue, list them after affirming that this is the case, and underscore them.
4. Next, include a list of staff interviewed while on site (include full names and titles).
5. Begin the main body of the report with a section called "General Overview", briefly sharing your overall impressions of the zoo and a light overview of its history.
6. Follow by organizing the report in the same order as the sections appearing in the Standards (i.e., Animal Care, Wellbeing, & Management, Veterinary Care, Conservation, Education and Interpretation, Scientific Advancement, etc.)
7. Do not include photos in the body of the report.

Example of Proper Narrative Report Formatting:

State whether previous concerns are still present; if yes, list them

List those interviewed here, including full names and titles

PLEASANT ZOO & AQUARIUM
NARRATIVE REPORT
JUNE 17 – 20, 2018

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, 2018.

The team thoroughly reviewed the previous inspection report of the Pleasant Zoo & Aquarium and found 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
Debra Ivy, Zoo Director
Bonnie Anderson, Lead Animal Care Specialist
Tom Miller, Accountant
Gale Patrick, Vet Tech & Registrar
Adam Constant, Animal Care Specialist
Evan Crow, Assistant Zoo Director
Charles Easter, President, Zoo Society

Start with "General Overview" and then follow the order of sections in the Standards.

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 are important to note that do not fit into any of the categories that follow, include them here.

Animal Care, Wellbeing, and Management

The animals appear well cared for by a dedicated staff. Exhibits and holding areas were clean and in good repair. Behavioral enrichment and animal training programs are well documented and meet AZA standards.

Animal records are very well-kept by the newly-hired registrar. The inspection team's requests for further records were promptly and easily addressed. Daily animal care specialist reports are entered

onto computers in animal care specialist 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; <u>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</u>.

<u>Water quality maintenance is not a priority at this facility</u>.

> Be sure to underscore all items noted on the List of Concerns.

 [NOTE: Next would follow "Veterinary Care", "Conservation", etc., in the order in which they appear in the Standards. 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.]

Example of Narrative (Finance Section):

Finance

The financial base of the institution appears stable. However, <u>there has been decreasing support in recent years</u>. Although the current operations do not seem to be affected, it will soon begin to take a toll. The governing authority should consider reviewing ways to increase funding so the current trend does not begin to affect maintenance, education programs, or other functions within the institution. Also, the <u>contingency plan in the event of financial downturn is weak.</u> 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. <u>The capital improvements budget is insufficient as it currently stands</u>. 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.

IMPORTANT: For "How To Write the Narrative" see pages 26 – 31.

D. POINTS OF ACHIEVEMENT/LIST OF CONCERNS

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.

Removing Items from the List: If the institution can address a concern to the satisfaction of the inspection team during the inspection, the item may be removed from the list by the team prior to or during the exit interview (also see "Appealing A Concern" below).

Appealing a Concern (Items in Dispute): If an institution disagrees with any of the items cited by inspectors on the List of Concerns (believes the institution is meeting the standard at issue), the CEO/Director should discuss this with the inspection team during the inspection and/or exit interview. If the matter is resolved at that time to the satisfaction of the team the concern may be modified or removed altogether.

If the matter cannot be resolved at that time, or if the CEO/Director decides later to question an item on the List of Concerns, please inform the CEO/Director that he/she should address the issue in the written Response to the List of Concerns as follows: under the item in question, the CEO/Director should explain in detail why the item is being questioned and how the institution is meeting the standard at issue, including documentation. The Accreditation Commission will thoroughly review the institution's Response to the List of Concerns prior to the applicant's hearing, and will make a decision as to whether the item may be removed from the List of Concerns or must remain a concern to be

addressed by the institution. The Commission will make its final determination at the time of the hearing.

Cite the Standard (or Standards) with Each Concern: When creating the list of concerns, you must cite the standard or standards to which each concern relates [for example: The team found XXXXX (11.3.4., 11.3.5.)]. If there is a concern that does not fall directly under a specific standard but the team believes is clearly outside what AZA considers to be "modern zoological practices and philosophies", place this into the narrative report as a recommendation based on best practices (for example, state "the Visiting Committee recommends that the institution consider doing XX which is a current best practice." See also "Citing the Preamble" below.). In some instances it may be appropriate to cite the Preamble **and** a standard. In those cases, cite the standard first, then the Preamble [for example: The team found XXXXX (11.3.4., 11.3.5., Preamble)].

Citing the Preamble (Modern Zoological Practices and Philosophies): Citing the Preamble should _not_ be considered as a "catch all" under which concerns may be cited if a standard does not exist. It should only be used when the team _agrees unanimously_ that the issue genuinely falls within the definition of "modern zoological practices and philosophies" as provided in the Preamble (see definition below). If the team does not agree unanimously, or if unsure, then the issue should be included _only_ in the narrative report as a _recommendation_, in accordance with item 2.l. under "Formatting & Narrative Requirements" above, which states: if the team has an issue that is not directly related to a standard or the Preamble, but believes it would be helpful to note the item for the benefit of the institution, _do so in the narrative_, not on the list of concerns. Include a concern of this nature at the appropriate spot in the narrative in the following manner: state your observation followed by _"The inspection team recommends that the institution consider XXXX which is current best practice",_ or similar language.

> **Definition:** For the purposes of accreditation, the Preamble defines "modern zoological practices and philosophies" as: _practices and philosophies that are commonly accepted as the norm by the profession. The word "practices" represents the tangible while "philosophies" refers to an overall perspective._

If your team is unsure of a standard when compiling your list of concerns, **contact your Primary Reviewer who, as a member of the Accreditation Commission, will provide guidance**. Be sure to obtain your Primary Reviewer's cell phone number **before** the inspection so it will be easier to reach him or her should the need to do so arise during the creation of the list of concerns.

List of Concerns "Check List":

When compiling the list, be sure to:

☐ List each concern only once, regardless of whether is it a remaining concern or a new concern.

☐ Any concern regarding the wellbeing of an animal or group of animals may be ranked in one of three ways:

> Major concern – of an urgent nature where immediate action is required
> Lesser concern – not urgent, but of a nature where action is required in a reasonable prompt manner (action could include assessment of the situation rather than physical action)
> Discussed with the applicant institution – of a nature where improvements would be beneficial and are encouraged, but doesn't rise to the level of an actual concern

☐ Be sure to cite the standard or standards to which each concern relates.

☐ If there is a concern that does not fall directly under a specific standard but is clearly outside what the team considers to be "modern zoological practices and philosophies", cite the Preamble [for example: The team found XXXXX (Preamble)]. In some instances it may be appropriate to cite the Preamble in addition to a standard.

- [ ] If the team has an item or concern that is not related to a standard or the Preamble, do <u>not</u> include it on the list of concerns. Instead, include it in the narrative as a recommendation for the institution's consideration, stated as follows (generally): "The Visiting Committee recommends that the institution consider XXXXXXXXX." *See the 2025 Inspector's Handbook for more details.*

- [ ] Concerns may be removed during the exit interview if the team receives documentation that the concern has been addressed.

- [ ] Email a copy of the List of Concerns/Accomplishments to the Primary Reviewer and appropriate AZA staff as soon as you return from the inspection.

- [ ] Include on the List of Concerns all items that are designated as "U" in the Visiting Committee Report Form. The team should determine on a case-by-case basis whether items designated as "Q" belong on the list, or only in the narrative.

- [ ] Be certain to list any concerns remaining from the previous inspection under "Concerns Remaining From Previous Inspection".

- [ ] The List of Concerns need not be typed for the purpose of presenting it to the institution's Director. However, please type it *exactly as written* before submitting it to the Commission with this report.

- [ ] Leave a copy with the institution's Director at the time of the exit interview.

Example List of Concerns:

PART I:

<u>Points of Particular Achievement</u>

INSTITUTION DIRECTOR: During the inspection the Visiting Committee was particularly impressed with the items listed below, which are especially well done and of notable mention.

<u>The grounds are very well kept. Routine maintenance in public areas is also good.</u>

<u>Newer graphics are attractive and effective.</u>

<u>The Director has assembled an enthusiastic, knowledgeable, competent, and committed staff.</u>

<u>New African exhibit expansion is aggressive and will enhance the guest's experience and increase.</u>

<u>The new giraffe facility is especially well designed.</u>

PART II:

<u>Items of Concern</u>

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.] Having proper documentation is essential to meeting these standards; lack of documentation must be considered as not being in compliance (*for example*, having determined that collectors have the necessary permits, but having no documentation of this). Also, please note that <u>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</u>.

A written report to the Commission on how you are responding to the concerns listed below must be submitted by the established deadline (usually six-seven weeks before the hearing—check with AZA if uncertain of the 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.

CONCERNS REMAINING FROM PREVIOUS INSPECTION

Inadequate quarantine space. (2.7.1., 2.7.3)

The institution does not have a written conservation plan. (3.2.1)

Enrichment program is not being documented. (1.6.1)

MAJOR CONCERNS FROM CURRENT INSPECTION

Water bowls in several small mammal exhibits contained algae. (1.5.1, 1.5.2, Preamble)

Animal waste holding/disposal is not done in a sanitary manner. (10.1.1)

The locking system on the main doors to the bear holding area are insufficient. (11.3.2)

The primary barriers in the bison/elk and zebra exhibits are inadequate and may expose guests to danger. (11.3.1, 11.3.6)

Animal escape and injury plans are insufficient in specificity and responsibility. (11.2.4, 11.2.5)

The issue of inadequate financial support needs to be addressed, including the capital improvements budget. (9.1, 9.4)

The financial contingency plan is inadequate. (9.5)

LESSER CONCERNS FROM CURRENT INSPECTION

Human water bottle found in animal food storage freezer. (2.6.4)

Drills are not being conducted in accordance with standards. (11.2.5)

Guard rail in walk-through aviary needs painting. (10.1.2)

"Permanent" extension cords abound in several back-of-house areas (rhino barn, reptile house, small mammal house). (10.1.1)

A broken concrete sill over door in wall to otter area is in need of repair. (10.1.2)

V.
GENERAL SUMMARY OF ACCREDITATION

A. DEFINITION OF APPLICANTS

Currently Accredited Applicants Defined. Currently accredited applicants are those facilities 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 rare 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. AZA will make every effort to assign an individual who is fluent in the applicant's native language to the inspection team for all international institutions, but the questionnaire and all *primary* materials submitted must be in English. Brochures and other pre-printed materials must be accompanied by a complete translation. International applicants must provide an onsite interpreter to answer questions and translate animal records as needed by the Visiting Committee. If you have any questions about this please contact AZA.

B. THE APPLICATION PROCESS

Summary. To apply for accreditation, a facility must meet the definition of a zoological park or aquarium, or related facility, as provided in this booklet *(see pages 54 – 56).* In addition, it must be operating under modern zoological practices and philosophies, and meet or exceed current AZA professional standards.

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 (new applicants only), or if provisional accreditation is granted, 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 one to three months after submission of materials. At the conclusion of the inspection, the institution will be presented with a list of items that must be addressed 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 accreditation, grant provisional accreditation, table a new application, 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 facility'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:

- ***Grant Accreditation:*** The Commission will grant accreditation when it is reasonably satisfied that the applicant meets the requirements of an accredited institution or related facility. 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.

- ***Grant Provisional Accreditation:*** The Commission may grant provisional accreditation if it determines that certain conditions must be met, or additional information submitted, before the facility can be considered as fully meeting AZA standards. The institution is given one year to continue to address the concerns and, in addition, the Commission must believe that the institution is capable of addressing the concerns within one year. A follow-up inspection is required prior to the institution's final hearing which takes place in one year. At that hearing, provisional accreditation is no longer an option; the Accreditation Commission must vote to grant or deny accreditation.

- ***Table Application [New Applicants Only]:*** The Commission may table a new applicant's application if it determines that certain conditions must be met or additional information submitted before the institution can be considered as meeting accreditation standards. Tabling indicates that the Accreditation Commission believes the concerns *can* be addressed in a year or less. Tabling allows the institution additional time to continue to alleviate the concerns noted by the Commission without having to resubmit a full application package. Tabling is typically for one year, although the institution can take as long as they need before requesting a reinspection and another hearing. It should be noted that, if longer than two years, it will be necessary for the institution to complete and submit a current edition of the accreditation application along with updated materials, but additional filing fees will not be required. At the zoo's next hearing, the Commission may accredit, deny, or once again table the application.

- ***Deny Accreditation:*** The Commission will deny accreditation when an institution does not meet the standards and, in its opinion, would require in excess of one year to successfully do so. Institutions denied accreditation may reapply one year *after the date of denial*. Submission of a new application and materials shall be necessary.

C. LONG TERM EXPECTATIONS

Accreditation is mandatory for an institution to maintain 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 _as they are adopted_. Even though a facility 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, a facility is expected to continuously advance its professional operation and constantly maintain, or surpass, all professional standards. [See also "Preamble" pages 16 – 18.]

D. BENEFITS OF ACCREDITATION

AZA accreditation is a •publicly recognized badge signifying excellence in, and commitment to, animal management and promoting animal wellbeing, collaborative population 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, no matter what field, are most important as an assurance to the public that an organization, institution, or program meets or exceeds the standards established by its profession. Overall, benefits include:

- Development of public confidence by means of a thorough, impartial, measured, and documented audit that establishes whether an institution meets or exceeds the current professional standards and best practices established by AZA
- Publicly recognized badge signifying excellence in, and commitment to, animal wellbeing and husbandry, veterinary care, ethics, physical facilities, staffing, conservation, education, safety and security, finance, and supportive bodies
- Improvements in identified areas and a concurrent increase in cooperation and support from governing bodies and other organizations
- An indicator to private organizations, foundations, and governmental agencies in connection with contributions, grants, contracts, funding, permitting, and other areas
- Exempts institutions from certain government requirements [primarily at the state level];
- Promotes professional recognition by the top zoological parks and aquariums that current professional standards are being met
- Promotes excellence within the institution by setting in motion continuous self-evaluation in light of ever-rising zoological and aquarium standards and best practices
- Helps distinguish institutions from "roadside collections" and the like
- Provides staff an invaluable opportunity to learn from other institutions and professional experts
- Fosters staff and community pride
- Significantly improves the ability to attract and retain a high quality, professional staff
- Membership in AZA
  - Science driven population management and access to animals from other AZA-accredited facilities for loan and/or breeding
  - Engagement in all AZA Animal Programs, including SSPs
  - Information and knowledge exchange (access to top experts and colleagues within the zoological and aquarium professions)
  - Access to AZA's resource center
  - Reciprocity with public membership of other AZA-accredited facilities

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