the
guide to certification of related facilities

2018 edition
# 2018

**GUIDE TO CERTIFICATION OF RELATED FACILITIES**

## Significant Additions & Changes 2014-2018

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- Editorial only

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INTRODUCTION

If you're reading this booklet you most likely fall into one of three categories:

- You are considering AZA certification for your facility;
- Your facility is already certified by AZA and is preparing to undergo the full process again at the end of the five year certification cycle;
- You're simply interested in learning more about AZA's certification process.

Whichever category fits you best, this booklet contains all of the information you’ll need for understanding the certification process, why it’s so important, and what the benefits are for the facility, the animals, and the staff.

AZA has been accrediting zoos and aquariums since 1974. Our standards are based on current scientific knowledge and the best practices and philosophies of the zoo and aquarium profession. We continuously revise our standards to assure they remain current. We possess the highest level of professional expertise in zoo/aquarium animal care and welfare, veterinary medicine, safety, conservation, education, and general operations. We recognize that good animal care begins with good planning, solid financial stability, and strong support, and our process evaluates finances, governing authorities, and support organizations in addition to animal programs. Our standards are recognized by national governing agencies as the “gold ring” for which all facilities should strive. All of our experts sign pledges of confidentiality and impartiality. Our 16 member Accreditation Commission oversees every case to assure a thorough, fair, impartial, and consistent process. We also have an enforcement process and certification is removed if standards are not maintained.

Achieving AZA certification isn’t easy. It requires a strong commitment, patience, hard work, investment in facilities, and a holistic approach. Maintaining AZA certification requires a willingness to continuously move forward, to always strive for improvement, to revitalize the old and embrace the new, and to support safe and best practices. AZA certification is a perpetual process.

The Preamble to the AZA standards thoroughly describes the goals and purposes of AZA certification for any facility considering undergoing the process—whether applying for the first time or the tenth. It follows on the next page.

If you have questions about the AZA certification process please contact us.
PREAMBLE TO THE AZA STANDARDS

PREAMBLE

AZA Accreditation - PURPOSE
AZA accredited zoos and aquariums are complicated operations with important goals. The highest goals of AZA accreditation include exemplary animal care and welfare, 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 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) top to bottom assessment, resulting in the most scrutinized, specialized and dynamic organizations in the world dedicated to animal care, welfare and well-being, 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, Welfare, & Well-Being** (Excellence in Animal Care and Welfare)
- **Veterinary Care** (Excellence in Animal Health Care)
- **Education & Interpretation** (Innovation in Science and Conservation Education)
- **Conservation & Scientific Advancement** (Measurable Impact in Science)
- **Vision, Mission & 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 Visitor Amenities and Attraction Services)
- **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)

(continued next page)
Understanding, engaging, and committing to the advancement of standards and related policies in all areas of AZA assessment constitutes “modern zoological practices and philosophies”. These practices and philosophies define excellence in our profession, and are what distinguish AZA accredited institutions from all other institutions that have animals for guests to see and appreciate.

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. Distinguishing characteristics of an AZA-accredited institution include:

- **Extraordinary focus on animal care, welfare, and well-being**
  - Modern facilities and practices for comprehensive veterinary care
  - Scientific advancement in animal care and conservation
  - Focus and participation to support sustainable animal populations
  - Exhibit aesthetics and habitat studies, planning, and design
  - Innovative and inspirational educational programs and experiences
  - Excellence in guest engagement and effective guest services
  - Economic development and community partnerships
  - Professional staff development and training
  - Comprehensive preparedness in public and animal safety
  - Sound business planning and financial management
  - Dynamic and mission-driven strategic and master planning
  - “Raising the bar” and regularly advancing operational standards

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

IMPORTANT NOTE: All AZA accredited institutions and certified 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.
ACCREDITATION COMMISSION

Mission Statement
The mission statement of the AZA Accreditation Commission is to establish, uphold, and raise the highest zoological and aquarium professional standards through self-evaluation, on-site inspection, and peer review.

Goals

Establish Standards For AZA Zoos And Aquariums
AZA standards are the current nationally recognized professional standards for zoos and aquariums. Through continual review and policy setting, they will remain contemporary.

Enhance Animal Welfare and Well-Being in Zoos And Aquariums
Earning AZA accreditation requires institutions to continuously assess and maintain good animal welfare and well-being for all animals in residence.

Credential AZA’s Standards As The Profession’s Standards
The Accreditation Commission establishes and maintains professional standards through continuing review and revision; through training for consistent inspection; and through guidance provided to the profession and those we serve. It is imperative that regulatory agencies, governing authorities, international allied groups, etc. have the trust and confidence in our efforts to establish and maintain high standards, and that they be assured that institutions awarded AZA accreditation comply.

Encourage Member Institutions To Develop Superior Facilities
The holding of AZA-accreditation obligates institutions to continuously strive for superior facilities reflecting modern design and aesthetics. On occasion, the Commission is called upon to use its professional clout to encourage improvements. Our objective, third party position has been an effective tool to lobby local authorities to support member facilities. We encourage development of superior modern facilities through enforcement of accreditation standards, publication of professional information highlighting current best practices and philosophies, documenting trends, and raising professional expectations.

Support Nonmember Institutions To Achieve AZA-Accredited Status
AZA mentors interested organizations that are not AZA-accredited to aspire to improve their facilities, philosophies, and practices, in hope of achieving AZA-accreditation in future years, providing whatever professional assistance is available.
DESCRIPTION OF THE PROGRAM, OBJECTIVES, AND SCOPE

The Association of Zoos & Aquariums (AZA) is a professional organization representing zoological parks and aquariums, the majority of which are located in the Americas. Among its objectives, the Association strives to raise professional standards and to influence continuing development of superior zoological parks and aquariums, placing animal welfare, professional development and training, safety, and high quality visitor engagement as top priorities.

Throughout their history, zoological parks and aquariums in the Americas have been governed according to varying objectives. Nevertheless, AZA believes that institutions maintaining exotic wildlife must recognize and accept their common goals and seek to advance them by adhering to professional standards for maintaining quality and performance [See “Preamble” appearing on pages 8-9 of this booklet.]

CREDENTIALING PROGRAMS OFFERED

AZA offers two credentialing programs:

- Accreditation (for zoological parks and/or aquariums)
- Certification (for related facilities that operate in supportive or similar roles to zoos and aquariums, but are not open to the public on a regular basis)

CERTIFICATION VS. ACCREDITATION (RELATED FACILITIES VS. INSTITUTIONS)

Related Facilities are expected to achieve and maintain or surpass the same standards as Institution members. The Related Facility membership category requires that each facility be inspected and certified before AZA membership can begin, or continue. The inspection and review process falls under the authority of the Accreditation Commission, but Related Facilities are not considered accredited. They are referred to as AZA certified. Like accreditation, certification is required every five years.

The certification process is very similar to the accreditation process, with subtle differences. In addition to not being open to the public on a regular basis, Related Facilities typically have slight differences in mission and scope from zoological parks or aquariums. However, Related Facilities must have conservation as part of their mission, and the overall mission must be aligned with AZA’s. Related Facilities are bound by AZA’s Code of Ethics, policies, and standards, just like accredited institutions. When evaluating a Related Facility applicant, the Accreditation Commission and the inspection team use the accreditation standards as a basis for judgment (see the 2016 edition of the Accreditation Standards and Related Policies booklet).

Most Related Facilities would not be evaluated for exhibit (or enclosure) aesthetics and design, but would be evaluated on such issues as enclosure size and furniture; enrichment items and programs; whether physical, social, and psychological needs are being met, acquisition, transfer, euthanasia and reintroduction practices, etc. Related Facilities that occasionally host a small number of visitors by appointment only need not have an education program. However, facilities that have a regular flow of public visitors and/or school groups (whether by appointment or not) should strive to have an education program, and that program should...
strive to meet accreditation standards. Like Accredited Institutions, Certified Related Facilities are expected to embrace modern zoological practices and philosophies as basic tenets. If uncertain as to what may or may not apply, contact the accreditation department for clarification.

THE ACCREDITATION COMMISSION

The Accreditation Commission consists of a Chairperson and eleven Commissioners who serve three-year terms. The terms are staggered to ensure continuity of service. In addition to the Chair and Commissioners, several (usually four) Advisors are appointed to serve without vote. Advisors serve one three-year term and expand the overall body of expertise of the Commission. The AZA President-Elect makes appointments to the Accreditation Commission and selects the Chair and Vice-Chair. Only Professional Fellows are eligible for appointment to the Commission. Appointees must have actively served as accreditation inspectors on, at minimum, three inspections, and must hold leadership roles at their institutions, and be considered as experts in their fields. Appointees must hold positions that focus on operations, animal management, or veterinary medicine. The responsibilities of the Accreditation Commission include developing standards and assuring they remain current; developing policy; evaluating all institutions undergoing the accreditation process; determining if an institution meets AZA standards; overseeing inspections; enforcing compliance with accreditation standards.

The Commission and its programs are managed and guided by the AZA Senior Vice President of Accreditation Programs. The Senior Vice President, Accreditation Programs shall conduct all administrative business of the Commission, supervise accreditation staff, provide guidance on policy, maintain accreditation records, advise and consult with the Commission, Visiting Committees, and applicant institutions, and provide training as required. The Senior Vice President, Accreditation Programs may accompany the Visiting Committee on inspections, and shall also assist the Commission Chair with Commission meetings, which are conducted twice a year.

HISTORY OF AZA ACCREDITATION

1966 Passage of the Animal Welfare Act
1968 AZA begins initial discussion on guiding overall improvements within the profession
1971 Committee formed to establish best practices in animal care and operations
1972 Accreditation is identified as best method for driving improvement
1973 Standards written and process developed
1974 First institution is accredited by AZA (accreditation is a voluntary process)
1985 AZA makes accreditation mandatory for institutional membership
1986 AZA membership decreases by 75%
1990 New standards added to original group
1999 AZA moves its accreditation headquarters to Silver Spring, Md.
2006 First review and revision of all standards as one document occurs and is scheduled for automatic five-year recurrence
2007 The Preamble to standards is first introduced
2010 Standards are reorganized and numbered
2011 The automatic five-year review and revision of all standards as one document occurs
2012 The requirement for drills is removed from being part of an “explanation” and created as a stand-alone standard
2016 The automatic five-year review and revision of all standards as one document occurs
2016 The number of AZA-accredited institutions reaches new high water mark since going mandatory (232 accredited institutions)

2017 Standards for the care and welfare of cetaceans are developed and approved.

AZA’s decision in 1985 to make accreditation mandatory resulted in a 75% decrease in membership that year as most institutions were not yet able to meet all of AZA’s accreditation standards. Despite the drop in membership, AZA's willingness to take that bold step led to a rise in animal husbandry and care among serious zoological parks and aquariums in the U.S. as they began striving to reach the standards required for AZA membership and accreditation. AZA believes just as strongly today that assuring high standards of animal welfare, management, and husbandry is paramount to the overall welfare of living creatures, and good conscience permits no higher priority.

**BENEFITS OF CERTIFICATION**

Certification, no matter what field, is most important as an assurance to the public that an organization, facility, 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 a facility meets or exceeds the current professional standards and best practices established by AZA
- Publicly recognized badge signifying excellence in, and commitment to, animal welfare and husbandry, veterinary care, ethics, physical facilities, staffing, conservation, 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 facilities from certain government requirements [primarily at the state level];
- Promotes professional recognition by the top zoological parks and aquariums in the U.S. that current professional standards are being met
- Promotes excellence within the facility by setting in motion continuous self-evaluation in light of ever-rising zoological and aquarium standards and best practices
- Helps distinguish certified related facilities from “roadside collections” and the like
- Provides staff an invaluable opportunity to learn from other facilities and professional experts
- Fosters staff and community pride
- Significantly improves the ability to attract and retain a high quality, professional staff
- Membership in AZA
  - Access to animals from other AZA-accredited institutions or certified related facilities for loan and/or breeding
  - Participation in all Species Survival Plans
  - 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 institutions or certified facilities
POLICIES, RULES, AND GENERAL PROCEDURES FOR APPLYING

KEY POINTS AND PRINCIPLES OF CERTIFICATION

1. Facilities are certified based on what exists at the time of the inspection and review—not on future plans.

2. Achieving AZA-certification indicates that a facility is currently meeting accepted professional standards as established by AZA. The certification program notes, but does not evaluate or measure, the facility’s level of achievement beyond that of established standards. The spectrum of facilities certified by AZA range from those that meet AZA standards to those that far exceed AZA standards, thus there is a broad range in the level of achievement among facilities certified by AZA.

3. Certification is based upon the informed collective judgment of 16 highly experienced individuals within the professional fields of zoo/aquarium operations, animal management/husbandry, and veterinary medicine (the Accreditation Commission). The Accreditation Commission, and its agents, shall determine if a facility is meeting standards and incorporating modern zoological practices and philosophies, and shall further determine if a facility meets AZA’s definition of a related facility—a requirement for submitting an application. (See “Basic Definition”, pages 14-15).

4. The certification program is conducted in strict confidence, and by experts under oath to maintain impartiality (see Impartiality, page 19).

5. The granting of certification is for five years, and expires at the end of that period. To avoid a lapse in certification, facilities must successfully complete the full process again prior to the end of the five-year period.

6. The certification process is the same for all facilities, regardless of whether a facility holds certification at the time of application or is applying for the first time.

7. At any time during the five-year certification cycle, a certified related facility may be reviewed or inspected, and certification may be rescinded if a facility fails to maintain standards. (see Interim and Follow-up Inspections, pages 44-45).

8. An AZA-certified facility is expected to continuously advance its professional operation, stay abreast of constantly rising standards in all areas, and incorporate modern zoological practices and philosophies as basic tenets.

BASIC DEFINITION

The certification program is intended for those facilities that hold wildlife, but do not meet the definition of a zoological park or aquarium (following below). Only facilities meeting or exceeding the definition of a related facility (see below) should apply for certification. Commercial members holding wildlife must apply for AZA membership as a Commercial Member With Animals.
For the purposes of AZA's certification program, 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.

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.

OTHER DEFINITIONS

ACCREDITIONATION: 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/WELLNESS: an animal’s collective physical and mental states over a period of time, and measured on a continuum from good to poor.

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, see above.]

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

CERTIFICATION: A process similar to accreditation (see “Accreditation” above). In AZA’s case, certification involves review and assessment of facilities that operate in support of zoos and aquariums, but are typically not open to the public on a regular basis.

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

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

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.

GOVERNING AUTHORITY: The agency with authority to govern the operations of the facility (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 should 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 facility’s planned collection. The ICP should consider such criteria as status in the wild, status in zoos and aquariums, existence and priorities of cooperative management programs, ability to maintain the species in a physically, psychologically and socially healthy environment, exhibit value, exhibit suitability, need for husbandry and other research, recommendations stated in AZA TAG's Regional Collection Plans and any other issues specific to the facility’s mission and vision.

INTERNATIONAL RELATED FACILITIES: Facilities located outside the United States may apply for certification under the same rules as those located within the United States. In some rare cases, processing of applications for international facilities 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 (see Fees, page 19). If possible, AZA will assign an individual who is fluent in the applicant’s native language to the inspection team for all international facilities, but the questionnaire and all primary materials submitted must be in English (see Translation of Documents, page 21). If AZA is unable to assign individuals who speak the native language, the facility 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.

MENTOR (PEER CONSULTANT): An individual deemed qualified by the Accreditation Commission to assist a facility in preparing for the AZA certification process. The individual is assigned by the Commission to help the facility identify areas that need to be addressed, to review and help update policies and procedures, internal documents, record keeping, and all areas involved in the certification process. The mentor can advise as to the facility’s readiness, and can also provide guidance on assembling the application, if desired (see Mentoring Program pages 45-46).

MODERN ZOOLOGICAL PRACTICES AND PHILOSOPHIES: practices and philosophies that are commonly accepted as normal best practice by the profession. The word “practices” represents the tangible while “philosophies” refers to an overall perspective.

NEW APPLICANTS: “New” applicants are those facilities applying for certification for the first time, or any facility that is not currently AZA-certified, regardless of whether it has been AZA-certified in the past. (See Applying For The First Time, pages 19-21).

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.

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.

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: For the purpose of AZA’s accreditation programs, a related facility 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 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.

WELFARE: (see “animal welfare/wellness” above)

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.

ZOOCLOGICAL PARK: A collection of animals which are housed in many public exhibits, both indoors and outdoors [for full definition see Basic Definition, pages 14-15.]

SUMMARY OF THE APPLICATION PROCESS

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 an additional inspection is required, and it may take up to twelve months or more before the Commission makes a final decision.

The application process begins with the submission, at an established deadline, of a completed questionnaire/application. The completed questionnaire/application must be accompanied by a variety of supporting materials and is submitted in quintuplicate. A sixth copy of the completed questionnaire/application should be maintained indefinitely on site for the facility’s future reference and for the use of the Visiting Committee during the inspection. An on-site inspection will occur approximately one to three months after submission of the application. At the conclusion of the inspection, the facility 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 facility’s case will be discussed and a determination made whether to grant, table, or deny certification. The Commission’s decision will be based on what exists at the time of the inspection and final review—not on future plans.

A detailed explanation of this process appears in the pages that follow.
BASIC INFORMATION

Accreditation Resource Center. The Accreditation Resource Center (available on the AZA website at www.aza.org/accred-resource-center) is intended to serve as a tool in helping currently certified AZA related facilities (as well as new applicant facilities) to develop protocols, programs, and policies at their own facilities that, at minimum, are in line with certification expectations. The Resource Center contains numerous examples of documents and policies that are required for AZA certification as well as guidelines and information that may be useful in developing and/or revising facility programs and policies.

Application Deadlines. March 1 and September 1. The Commission meets twice yearly [in March and September] to consider pending cases. Facilities wishing to have their cases heard in March must submit application packages by September 1. Facilities wishing to have their cases heard in September must submit application packages by March 1. If the deadline falls on a weekend or holiday, the next regular business day immediately following shall be considered as the deadline. Please note that late applications will not be accepted. If you have questions about a deadline, please contact AZA. NOTE (currently certified related facilities): Missing an application deadline will not be considered an acceptable reason for extension of certification, and may result in a lapse of current certification and AZA membership.

Certified related facilities are expected to keep track of their own expiration dates (available on the AZA web site at https://www.aza.org/inst-status [aza.org → accreditation → institution status → currently certified related facilities], or by contacting AZA). Facilities will be reminded six months in advance of the deadline for submission of materials (twelve months in advance of certification expiration), but should not rely on this reminder as a method of tracking an expiration date.

Confidentiality. Information submitted to the Accreditation Commission by facilities as part of their certification application is held in strict confidence, and is made available to the following individuals only: • Accreditation Commissioners, • Commission Advisors, • Inspectors (Visiting Committee), • Senior Vice President, Accreditation Programs (and accreditation staff), • AZA Executive Director. The following also have access, but typically do not view the materials: • AZA President & CEO, • AZA Board of Directors. Each of these individuals is required to annually sign an Oath of Impartiality & Confidentiality to assure the overall integrity of the certification process. 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.

Conversely, the Commission will not disclose the names of any person(s) requesting confidentiality when providing information, verbally or in writing, about the facility. This includes staff, colleagues, and/or members of the public.

Distribution of the Final Report. The Final Report of the Visiting Committee to the Accreditation Commission shall be provided by the Accreditation Commission to the facility’s CEO/Director, and to the facility’s governing authority, only. Further distribution of that report is left to the sole discretion of the facility and/or its governing authority. The facility’s CEO/Director will receive a copy of the complete report at the conclusion of the facility’s hearing.

Early Submittals. Application packages may not be submitted any earlier than one month in
advance of the deadline for which they are intended.

**Enforcement of Standards.** Facilities holding certification from AZA must maintain all AZA standards, and support AZA practices and philosophies during the period that certification is held. If AZA has evidence that this is not taking place, it will work with the facility to see that standards are met, or will take whatever action is appropriate to ensure the integrity of its process, including removal of AZA certification when deemed necessary.

**Fees.** A filing fee and a Visiting Committee deposit are both due at the beginning of the process, and *must be included with the application*. **Filing Fee:** The certification Filing Fee is $1,200.00, and is **non-refundable**. The Filing Fee helps defray a portion of the costs involved in certification processing. **Visiting Committee Deposit:** Applicants are responsible for all costs associated with the inspection. A deposit of $1,000.00 towards inspection expenses must be submitted. The deposit for *international* applicants located in countries other than Canada and Mexico is $2,000.00. Payment must be in U.S. dollars. If Visiting Committee expenses exceed the deposit, the facility will be invoiced for the balance; if less, a refund will be issued. *Filing fees are non-refundable once the official review process has started, and costs have been incurred. Specifically, the official review begins with initial reviews conducted by accreditation staff and the Primary Reviewer. If a facility withdraws its application before the official review has started, the fee may be refunded.*

**Impartiality.** Certification and/or any thorough and accurate evaluation of any operation, no matter which field, must involve experts actually and currently employed within that field in order to assure that the extensive and explicit level of knowledge required for a rigorous examination is in place. At the same time, these professional experts must be strictly impartial in their judgments so as to assure and protect the integrity of the process. AZA takes great care to make certain that its certification process and professional experts act fairly and without bias, including requiring all inspectors and members of the Accreditation Commission to sign oaths of impartiality at minimum annually. The fact that 16 professional experts determine the outcome as a group also helps to assure an impartial judgment in each case.

**APPLYING FOR THE FIRST-TIME**

It is advisable for first-time applicants (those facilities that have never gone through the certification process before) to be familiar with fundamental AZA philosophies before applying for certification, and to determine if an assessment of suitability by AZA is needed prior to submitting an application (see below).

Facilities currently being constructed may apply for certification prior to the opening date; however, the on-site inspection will not take place until the facility is officially open and a permanent, full-time CEO/Director has been on board for at least six months.

**Assessment of Suitability.** A basic requirement for submitting an application for AZA certification is that the applicant facility must meet the *basic* definition of a related facility appearing on pages 14-15. If an applicant, or AZA, is unsure it meets this definition, it is advisable to contact AZA for an assessment in advance of submitting an application. Applications from organizations that do not meet this definition will not be accepted.

**Requesting A Mentor.** While not a requirement, first-time applicants are *strongly encouraged* to request an official mentor approved by the Accreditation Commission prior to submitting an application. Even those facilities that believe AZA standards are being met should consider obtaining a Commission-approved mentor for an independent opinion before applying. Commission-approved mentors should be requested at least one year prior to submitting an
application, but no earlier than five years before it is realistically expected they will qualify for AZA certification. Mentors cannot be provided at the time of application or after an application is submitted. Mentors serve as guides for a facility as it works towards eventually applying for AZA certification. Mentors review agreements, contracts, procedures, physical facilities in light of standards, and identify areas and/or practices or policies that may not meet AZA standards and need to be addressed before an inspection takes place. Mentors provide an independent opinion as to whether a facility is ready to undergo a certification review, and can even advise a facility in preparing its application. There is no fee for mentoring. (See Mentoring Program, pages 45-46).

Some helpful things to remember, for first-time applicants:

• Encourage at least one staff member to become an individual member of AZA in order to gain access to important member benefits such as the Accreditation Resource Center (See Accreditation Resource Center, page 18).
• [Optional, but recommended] Contact the Accreditation Department for an official mentor approved by the Accreditation Commission at least a year in advance of submitting the application (mentors cannot be provided at the time of application or after an application is submitted).
• Thoroughly read the current edition of the “Accreditation Standards and Related Policies” booklet.
• Thoroughly read the current edition of the “Guide To Certification of Related Facilities” booklet (most questions about the process are answered within).
• Make sure that the annual edition of the materials you use to make application matches the year in which you submit your application.
• Follow the instructions for assembling the application as contained in this booklet (pages 21-23).
• When completing the application be sure to answer every question and attach required items.
• If you have any questions about assembling the application or other related topics please contact the AZA accreditation staff.
• The Commissioner (or Commission Advisor) assigned to your facility as Primary Reviewer will automatically serve as Chair of the inspection team.
• Participate in AZA through individual membership, attendance at conferences, training and/or professional development courses, and reading publications so as to thoroughly familiarize your facility with fundamental AZA philosophies, policies, and best practices. Added focus should be given to those pertaining to animal management, exhibits (size, habitat, furniture, and aesthetics), and safety.
• While future plans are important and are considered in the overall picture, the final decision to grant certification will be based on what exists at the time of the inspection and final review—not on future plans.
• Make sure to address all items on the List of Concerns received at the end of the inspection. Address as many as possible prior to the hearing, and be prepared to show timelines, contracts, etc. for those items that are not complete.
• If certification is denied, it should not be viewed as failure. In preparing for the process many improvements have been achieved, and your facility should continue on that path, though the goal has not yet been reached. Use the process as a map for moving forward. Keep working on the List of Concerns with your mentor. If you did not utilize a mentor the first time, request one. AZA wants your facility to succeed and will help as much as possible, but continuing the positive forward momentum towards meeting all standards is up to you.
• Remember, all facilities that receive certification are expected to maintain standards every day throughout the five-year period of certification. While AZA inspections take place every five years, colleagues who visit (formally or informally), and members of the public do notify us if problems are perceived. If deemed appropriate, the Commission may conduct an interim
inspection. Certification can be rescinded at any time if the Commission concludes that standards are not being consistently met and maintained (See Complaints page 43, and Interim and Follow-up Inspections pages 44-45).

ASSEMBLING THE APPLICATION PACKAGE

Please contact the AZA accreditation staff if unclear about any of these instructions.

Improperly Assembled Applications: Please read these instructions and follow them carefully. Improperly assembled or incomplete applications will be returned to the applicant and may result in an inability to continue on the processing schedule needed to avoid a lapse in certification and AZA membership.

Preparing The Application On Flash Drive. All applications must be submitted in electronic format on a USB flash drive in accordance with instructions contained in this section of the booklet.

Five sets of the completed application must be submitted to AZA by the required deadline. It is recommended that an additional copy of the completed flash drive be maintained by the facility for reference in coming years.

Assembly. When finished, each facility should submit five copies of the flash drive in small three-ring binders, folders or report covers labeled with the facility’s name. Each folder should contain the following: (1) a paper or plastic sleeve into which is placed the flash drive; (2) a printed hardcopy of the completed and signed application questionnaire without attachments; (3) samples of a few brochures, newsletters, etc. (if unavailable electronically); and (4) a sealed envelope containing salary information in hardcopy, if desired [note: this option is available if a facility does not wish to place salary information on the electronic flash drive. “For profit” operations also have the option to make complete salary information available to the Visiting Committee for review during the inspection.]

In addition to including a hardcopy of the 30 page application questionnaire inside the report covers as described above, the application questionnaire must also be contained in electronic form on the flash drive, and must be linked to attachments in accordance with instructions below. [NOTE: if you are unable to link the questionnaire to attachments after following the instructions below, please contact accreditation staff.]

Answering Questions On The Application Questionnaire. When completing the application questionnaire, applicants are required to include carefully considered statements of purpose to provide the Commission with a clear understanding of each facility’s objectives. For example, the mere statement that a facility was established to provide an adequate home to exotic animals in need will not be sufficient. It is also helpful to the Commission to know the reason(s) a new applicant facility is seeking certification.

Translation of Documents. The application and all required attachments must be submitted in English. Animal records and extremely lengthy documents do not need to be translated to English for the purpose of the application questionnaire, but they must be included in the application nonetheless where requested. An interpreter must be provided on-site for the AZA inspection team to answer questions and to translate portions of documents (including animal records) for the team as requested during the inspection.

Naming Files. All required attachments must be included. Materials must be provided
electronically, and linked to the application questionnaire. Files should be named according to the question to which they pertain, for example, the electronic file of a facility’s *Institutional Collection Plan* should be named “AC-3 ICP”. Other examples include “VC-6.a. Restraint Protocol”, “C-2 Conservation Plan”, and “EI-10 Interpretive Program”.

**Acceptable Formats.** Acceptable formats for submittals on flash drive are *Microsoft Word, Microsoft Excel, Adobe Acrobat (PDF), Power Point, and JPEG*. If you desire to use a format not listed here, please check with AZA accreditation staff first to be certain it is acceptable.

**Instructions For Creating Hyperlinks Within Your Application Questionnaire Using Windows Explorer.** [NOTE: if you are unable to link the questionnaire to attachments after following these instructions, please contact accreditation staff.] The flash drive must contain the application questionnaire and all attachments. Facilities must link each attachment to the “See flash drive” box appearing on the application questionnaire itself. Instructions for doing so follow.

[NOTE: It is recommended that the questionnaire be filled out in its entirety before adding the hyperlinks. The check boxes within the questionnaire can only be filled out when the document is protected/locked, whereas hyperlinks can only be added when the document is unprotected/unlocked (see step 3 below for instructions to do so). Therefore it is easiest to fill in all check boxes and then go back and create all hyperlinks.]

1. Create a folder on your computer that contains the completed application questionnaire and all attachments (named according to the question to which they pertain; see “Naming Files” above).
2. Open the completed application questionnaire.
3. Unprotect/unlock the document using the word: Tornado (case sensitive)
   a. Microsoft Word 2003: Click on the Tools tab at the top of the page. Scroll down to “Unprotect Document.” Enter password. Click OK. Document is now unlocked and hyperlinks can be added.
   b. Microsoft Word 2007 or later: Click on the Review tab at the top of the page. Click on Restrict Editing. Click Stop Protection, located at the bottom of the shaded box. Enter password. Click OK. Document is now unlocked and hyperlinks can be added.
4. When you come to the first question in which you need to create a hyperlink (for example GI-5), highlight the words See flash drive at the appropriate question, then right click and choose Hyperlink.
5. Choose the attachment that corresponds to the question.
   a. Microsoft Word 2003: Choose File on the right hand side of the dialogue box. A second box should open that shows the files available on your computer. Double click on the file that you would like to link.
   b. Microsoft Word 2007 or later: Use the Look In box to find the file that you would like to link. Once found, highlight the file and click OK.
6. Once linked the item should be underlined and in a different color. Click on the link to be sure it works. You may need to hold down the Control button on your keyboard as you click the link.
7. You can also link an entire folder that contains several individual documents needed to answer a single question. For example, F-9 under the Finance section asks for information regarding capital improvement projects that have taken place over the past 5 years. Perhaps you have one folder titled Improvement Projects and within that folder you have separate documents for each year. In this situation, rather than selecting a single file to link, highlight the entire folder and click OK.
8. Once all hyperlinks have been inserted you should again protect/lock the document. Use the same instructions as you did to unprotect/unlock the document, except now click “Yes, Start Enforcing Protection.” You will be asked to create a password. Please use the same case sensitive password (Tornado).
9. Once you have reviewed the entire application questionnaire, linked all the necessary documentation, and checked that the links open, be sure to save the document. You can then close the document.

10. Now it is time to copy and paste the entire application folder (including questionnaire and all attachments) to a flash drive. We recommend trying out the uploaded flash drive on a different computer from the one you tested it on to be sure that all of the links still open, before proceeding with making the remaining four copies.

11. See “Assembly” (page 21) for final compilation of application binders.

**Photos.** Please include on the flash drive with your application at least 10 photos that best depict your facility on a typical day of operation, and at least 3 photos that depict your facility in winter or cold-weather, if applicable.

**Shipping.** Upon completion, five copies of the fully assembled application should be sent to AZA, addressed as follows: Accreditation Programs, AZA, 8403 Colesville Road, Suite 710, Silver Spring, Maryland 20910.

**CERTIFICATION PROCESSING** *(listed in order of occurrence; times of occurrence are approximate)*

**AT A GLANCE**

**6-8 Weeks Prior to Application Submittal:**

- **Visiting Committee Selection Process Begins.** A facility may not select the members of its Visiting Committee. The facility’s CEO/Director receives notification of the proposed Visiting Committee for review and approval. The CEO/Director is expected to review the list and may eliminate the names of any individuals. If any names are eliminated by the CEO/Director, additional names will be substituted for approval. Once approved, AZA will then contact team members for availability.

- **Primary Reviewer Is Assigned.** The Primary Reviewer is a member of the Accreditation Commission, or a Commission Advisor, who is assigned to the case and receives a complete set of the facility’s application materials. This individual serves as chief examiner on behalf of the Commission and also works in conjunction with the Visiting Committee. As a member of the Accreditation Commission the Primary Reviewer is present at the facility’s hearing. In the case of new applicants the Primary Reviewer automatically serves as Chair of the Visiting Committee, and may occasionally do so for currently certified related facilities as well.

**1-6 Weeks Prior to Application Submittal:**

- **The Visiting Committee Is Assembled.** Assembling the inspection team may take 10 or more working days to complete, depending upon how quickly we receive approval of the proposed Visiting Committee from the facility’s CEO/Director, and how quickly the selected individuals respond when contacted. If all team members from the initial list proposed cannot be confirmed, additional names will be provided for approval. For facilities that have been inspected in the past, an inspector from a previous team will be selected, if available. For new applicants, the Primary Reviewer automatically serves as Chair of the Visiting Committee. As soon as a complete team is confirmed, the facility's CEO/Director will be notified by email. [NOTE: for more information on how inspectors
are selected see *Criteria For Selection Of The Visiting Committee*, page 31-33.]

- **The Inspection Is Scheduled.** Upon confirmation of the team, the inspection will be scheduled by the Chair of the inspection team in consultation with the facility’s CEO/Director and the members of the inspection team. Once dates are selected, the facility should provide the team Chair with information for accommodations at a nearby hotel. Team members may then contact the hotel to make reservations, or the facility may choose to make these arrangements for the team. That decision is left to the preference of the facility, and the CEO/Director should inform the team Chair as to the facility’s preference at the time the dates are finalized.

[occurrences listed below are in order following receipt of application; times of occurrence are approximate]

**Weeks 1 & 2:**

- **Application Package is Checked for Completeness.** Accreditation staff will review the application materials for completeness and proper formatting. If improper formatting is used or if any information is determined missing you will be contacted right away.

**Weeks 2 – 4:**

- **The Inspection Agenda is Confirmed.** Once dates are selected, the inspection agenda will be finalized by the Chair of the inspection team in consultation with the facility’s CEO/Director and the members of the inspection team. The Chair will provide a list of individuals (staff, members of the governing authority, members of the support organization, and/or volunteers) to be interviewed by the inspection team, and meetings will be scheduled. Transportation to and from the facility and any offsite facilities will also be discussed.

**Months 1 & 2:**

- **Application and Materials are Reviewed.** Following initial review of the application package for completeness, accreditation staff will distribute application materials from the facility to individual inspection team members and to the Primary Reviewer. These individuals will begin a thorough study of the application in preparation for the inspection and as part of the overall evaluation of the facility.

**Months 2 – 4:**

- **The Inspection Occurs.** Typically, most inspections take place during the second, third, or fourth month of the process.

- **The List of Concerns is Generated.** At the conclusion of the inspection the inspection team generates the List of Concerns and delivers it to the facility’s CEO/Director during the exit interview.

- **The Facility Begins Addressing the List.** The facility should begin addressing the List of Concerns as soon as it is delivered.

**Months 5 & 6:**
• **The Inspection Report Is Submitted.** As soon as the inspection team finishes its inspection, it begins writing its full report to the Accreditation Commission. That report is submitted to accreditation staff for initial review, and then distributed to the Accreditation Commission.

• **The Facility’s Progress Report Is Submitted.** The facility must submit a report informing the Accreditation Commission of progress made addressing the List of Concerns, including documentation. That report is submitted to accreditation staff and is then distributed to the Accreditation Commission.

• **The Accreditation Commission Conducts Initial Review and Evaluation.** The Commission evaluates all information received from the inspection teams, the facilities, and accreditation staff.

Month 7:

• **The Facility’s Hearing Takes Place.** The facility appears at its scheduled hearing before the Accreditation Commission to discuss further progress made addressing the List of Concerns and to provide the Commission an opportunity to ask any questions it may have. Following the hearing the Commission makes its decision and the facility is informed.

• **The Facility Receives A Copy Of the Inspection Report.** The facility will receive a copy of the inspection report following the hearing when it meets with the Chair of the Accreditation Commission to discuss the Commission’s decision.

Month 8:

• **The Facility Receives An Official Letter Reiterating Outcome.** AZA will provide a letter, as quickly as possible after the hearing, reiterating the outcome, and outlining additional action required, if any.

• **Certified Related Facilities Receive Plaque.** A plaque denoting the related facility’s certification is delivered, and presentations are made or scheduled if requested by the facility.

THE INSPECTION

**Overview:** During the inspection, the Visiting Committee is acting on behalf of the Accreditation Commission and the Board of Directors. Inspectors will usually tour the grounds and facilities as a group, and individually return to areas of particular interest or expertise thereafter. During this time they interview staff members, view records, and make note of positive and negative impressions. During the site visit, the team will also meet with members of the governing authority and key personnel. The full cooperation of the facility’s staff will greatly assist the process. Inspections are generally conducted in two to five days.

**NOTE, currently or previously certified applicants:** it is important to understand that any concerns identified in past AZA inspections that remain present will be considered particularly serious and indicative of potential issues such as lack of progress, slippage, failure to maintain standards, and/or lack of commitment and/or funding to address concerns. The outcome of the case may be affected.
NOTE, all applicants: should the inspection team have a concern regarding the comfort or welfare of any animal at the facility, it will be considered a major issue.

Advance Notice: Ask the inspection team chair to communicate any concerns noted during the inspection that could potentially be addressed while the team is still on grounds. Address those concerns if possible, and present documentation at the exit interview.

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

Inspectors’ Expenses. The applicant facility bears the expenses of the Visiting Committee. Every effort will be made to hold expenses to a reasonable minimum. AZA reimburses the inspectors directly and, as soon as all inspectors have submitted expense reports, the applicant facility will either be invoiced by AZA for the total amount due, or refunded the unused balance from the $1,000 deposit. Reimbursable expenses are food, lodging, transportation, parking, postage, and any reasonable expense directly associated with the inspection.

Inspector Accommodations. If the applicant institution wishes to make lodging reservations on behalf of the Visiting Committee, accommodations must be at a local hotel or motel that, at minimum, has dining facilities and a lobby, is in a safe area, and is comfortable and clean. If an inspection team arrives and deems this is not the case, the applicant institution must move the team to better facilities.

Interviews. An opportunity for the Visiting Committee to interview staff in confidence, without supervisors or management present, must be provided. The Committee will also interview members of the facility’s governing authority at some point during the visit.

Media Coverage. It is inappropriate to schedule media coverage during the inspection. If local media wishes to interview inspectors, the facility should arrange an appropriate time outside of the scheduled inspection process for a member of the team to serve as spokesperson. Inspectors may speak only of the certification process in general, and not about the specific case.

Private Work Area. A dedicated workspace should be made available to the Committee while it is on site. The Visiting Committee members need ample time and space to discuss, in private, various aspects of the facility’s operation, review their reports, and to compile the final List of Concerns prior to the exit interview with the CEO/Director.

Records. All records of the facility must be readily available and staff members must be on hand to answer any questions posed by the inspectors.

Social Events. While it is helpful for the applicant 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 be expected to participate in social functions beyond those required for the orderly discharge of its duties and responsibilities.

Visiting Committee’s Written Report to the Commission. In the weeks following the inspection, the Visiting Committee (inspection team), under the direction of the Chair, shall prepare a full written report for the Commission. That report, as well as the List of Concerns presented to the facility during the exit interview, shall be submitted to the Commission for review and formal action at the facility’s scheduled hearing. The report provides insight regarding the Visiting Committee’s impression of the facility, its operations, and the care
provided its animals. Applicant facilities shall receive a copy of the full Visiting Committee Report at the conclusion of the scheduled hearing before the Commission (see also The Hearing, page 29).

CONCLUSION OF INSPECTION

Exit Interview. The inspection shall conclude in an exit interview with the facility’s Director or CEO. [NOTE: It is strongly recommended that the facility’s Director or CEO be present for the exit interview. However, should unavoidable circumstances dictate, the CEO/Director may designate a representative to meet with the Visiting Committee.] The CEO/Director may have staff present at the exit interview. During the exit interview, the Visiting Committee will discuss the general impressions (positive and negative) formed by the team during the inspection. The facility’s accomplishments will be discussed along with the list of major and lesser concerns that must be addressed for the facility to be considered in compliance with standards.

List of Concerns. During the exit interview, the Committee shall provide the CEO/Director with a written list of any items found to be of concern (this list shall also be provided to the Commission as part of the written report). The list will include both major concerns and lesser concerns, and those carrying forward from previous inspections (if any). [NOTE: It is important to understand that should there be items carrying forward from previous inspections, these will be of particular concern to the Accreditation Commission.] Also, any concerns directly related to animal welfare will be noted as such and require priority response. A facility should strive to address as many items on the list of concerns as possible prior to the hearing before the Commission. However, consideration will be given to the amount of time a facility has between the exit interview and the hearing, and the amount of time believed reasonable to complete each concern. Items that cannot be completed prior to the hearing should be covered by an action plan with estimated completion dates.

NOTE: The Visiting Committee (inspection team) is an arm of the Accreditation Commission. However, the Accreditation Commission is the final authority. The Accreditation Commission may have concerns that do not appear on the List of Concerns and, if so, may ask questions accordingly during the hearing.

Appealing A Concern. If a facility disagrees with any of the items cited by inspectors on the List of Concerns, the CEO/Director should discuss this with the Visiting Committee (inspection team) during the inspection and/or exit interview. If the matter is resolved at that time to the satisfaction of the Committee 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, the CEO/Director should address the issue in the written Response to the List of Concerns (see “Written Response to the List of Concerns” below) as follows: under the item in question, the CEO/Director should explain in detail why the item is being questioned and how the facility is meeting the standard at issue, being sure to include documentation. The Accreditation Commission will thoroughly review the facility’s Response to the List of Concerns prior to the facility’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 facility. The Commission will make its final determination at the time of the hearing.

Written Response To the List of Concerns. Upon receipt, the facility should begin immediately addressing the List of Concerns. In addition, the facility must supply the Accreditation Commission with a written response to the List of Concerns prior to the hearing. The response must be submitted by the deadline set by AZA accreditation staff (typically 5-7 weeks before the hearing). The purpose of the written response to the list of concerns is to
provide information to the Commission in advance so that, at the hearing, the facility’s CEO/Director need only report on additional progress made since the response was submitted. The response should list each concern, followed by a description of how that concern is being addressed. The response must include documentation (photos, copies of contracts, agreements, policies, etc.). The response should be submitted by e-mail in electronic format, including all attachments and photographs, and followed-up thereafter with a signed hardcopy sent by regular mail. Photos may be submitted on flash drive or CD if too numerous to submit by e-mail. NOTE: Failure to have taken corrective measures, or to present solid plans for doing so, will affect the outcome of the case.

Updates to the Written Response To the List of Concerns. It is not necessary to send updates to the written response once it has been submitted to AZA. As the members of the Accreditation Commission prepare for upcoming hearings, they will likely not have time to read updates. Instead, when the facility’s hearing begins, the Commission Chair will ask the CEO/Director to provide verbal updates on additional progress made since the written response was submitted. If he/she wishes to bring photographs documenting the additional progress, these should be limited to essential only (bring two copies: one for each side of the table). Please do not bring notebooks or large numbers of reports, photographs, and other documents to the hearing. Written updates and documentation should be mailed or emailed to AZA staff and will be placed into the facility’s file once the hearings are completed.

Inspection Evaluation Form. Each applicant is provided an opportunity to evaluate the overall process and the Visiting Committee’s effectiveness immediately after the inspection. The Accreditation Department will provide the facility’s CEO/Director a short e-mail evaluation form requesting input regarding the overall process and the performance of the Visiting Committee. Returning the form is optional, but helps the Commission to better evaluate the effectiveness of the overall process. Information contained in the form shall be shared with the Commission and may be shared with the Visiting Committee to assist them in enhancing their performance in future inspections.

HOW TO PREPARE FOR THE CERTIFICATION HEARING

Preparing For The Hearing. Approximately eight weeks prior to the Commission’s meeting, the facility’s CEO/Director will be notified regarding the exact date, time, and location of the facility’s hearing. The CEO/Director should be prepared to verbally update the Commission on any additional progress made since the written response to the List of Concerns was submitted. The collective information from both the written and verbal reports will be considered, along with application materials, the inspection report, and other current information, in determining the outcome. Failure to have taken corrective measures, or to present solid plans for doing so, will affect the outcome of the case.

Who May Attend. The CEO/Director is encouraged to bring to the hearing any staff, governing authority representatives, governmental officials, or individuals considered pertinent to the anticipated discussion, or as observers.

CEO/Director’s Attendance At The Hearing. It is important that the facility’s CEO/Director attend the hearing to answer questions, authorize action, and to make any statements desired. If the facility’s CEO/Director cannot attend, a written notification must be provided to AZA as soon as possible. The notification must include an explanation, and provide the name of who will attend in place of the CEO/Director. The written notification must also give full authority to the CEO/Director’s selected representative to act on behalf of the facility.
The Hearing. A waiting room (the “pre-hearing room”) will be provided near the hearing room. Immediately prior to the hearing, the Commission will conduct its final review of the case. When the Commission is ready to begin the hearing, a Commission member will come to the pre-hearing room to notify the facility’s representatives. The hearing portion of the review typically lasts 15-20 minutes. Hearings are closed sessions, and are attended by all Commissioners, Commission Advisors, the Senior Vice President, Accreditation Programs, the Director, Accreditation Programs, and the AZA Executive Director. Hearings may also be attended, on occasion, by members of the AZA Board of Directors, the AZA President & CEO, and members of the Visiting Committee.

After the hearing, the applicant’s representatives will retire to a second waiting room (the “post-hearing room”), and the Commission will resume in private session to deliberate and make a decision. Once a decision is reached, the facility’s representatives will be joined in the post-hearing room by the Commission Chair, the facility’s Primary Reviewer, AZA’s Executive Director, and the Senior Vice President of Accreditation Programs to discuss the Commission’s decision and to provide the facility with a copy of the full Visiting Committee Report. An official letter noting the decision and points of discussion will be sent to the facility in the weeks following the hearing.

Final Decision of the Commission. The Commission’s decision will be based on what exists at the time of the inspection and the review at the hearing—not on future plans. In reaching its decision, the Accreditation Commission also considers the following:

- Six months of reviewing and evaluating the documents, records, policies, and practices of the facility
- The previous inspection report (if one exists)
- The 2-5 day on-site inspection
- The current inspection report
- The recommendation of the inspection team
- The investigation of comments from colleagues and outside sources (if any)
- The number and nature of concerns
- The facility’s response in addressing the identified concerns
- The facility’s hearing
- The state of the facility, its buildings, its management, and its overall operations at present

The Commission may take one of the following actions:

A. **Grant Certification**: The Commission will grant certification when it is reasonably satisfied that the applicant facility meets the requirements of a certified related facility. The Commission may, however, request progress reports on any items it wishes the related facility to address, require an interim or special inspection, and revisit the decision as often as necessary to assure itself that the related facility continues to meet all conditions and requirements of certification during the five-year certification period.

B. **Table Certification**: The Commission may table a facility’s application if it determines that certain conditions must be met or additional information submitted before the facility can be considered as meeting standards. In addition, the Commission must believe that the facility is capable of meeting those standards within one year, and a follow-up inspection is required at the end of that year. *If a certified related facility is tabled, it remains certified during the period of tabling, although tabling indicates that concerns exist.* The Chair shall write the facility’s CEO/Director, providing a copy to the
principal officer of the facility’s governing authority, advising of the Commission’s action and concerns. The facility is then given one year to meet the standards, undergo a follow-up inspection (a new application is not required), and return for a second hearing to demonstrate how the concerns of the Visiting Committee and Commission have been addressed. At the conclusion of one year, the Commission must act to certify or deny (continuing to table is not an option). Processing shall terminate for applicants not responding in the time allotted, and it shall become necessary to submit a new application and materials should certification be desired again in the future.

If a related facility is tabled, the year of tabling shall be deducted from the related facility’s subsequent five-year certification cycle should the facility receive certification at the end of the tabled year. Related facilities that are successfully certified following the year of tabling may be required to undergo a follow-up inspection at the halfway point of the four years of certification remaining in the certification cycle (an application and related fees are not required, but the cost of the mid-cycle inspection shall be borne by the facility).

C. **Deny Certification:** The Commission will deny certification when a facility does not meet standards at the time and, in its opinion, requires in excess of one year to successfully do so. The Chair shall write the facility’s CEO/Director, providing a copy to the principal officer of the facility’s governing authority and noting the reason(s) for denial. The earliest time that facilities denied certification may reapply is one year after the date of denial (assuming all identified concerns have been sufficiently addressed). Submission of a new application and materials shall be necessary. Denial of certification shall result in loss of AZA membership for related facilities that are AZA-certified at the time.

**Receiving Certification.** Once certification is achieved, the related facility’s CEO/Director will receive, at the hearing, a certificate acknowledging the related facility’s certification (for use in applying for permits, grants, exemptions, etc.) In addition, within approximately four weeks, the related facility will receive an official letter from the Commission acknowledging the certification, and outlining any requirements specific to the case. The related facility will also receive an engraved wall plaque within two months of receiving certification. New related facilities will additionally receive from the AZA Membership Department a pro-rated invoice for AZA annual dues and a welcome package containing useful membership information, “Certified by the Association of Zoos & Aquariums” window decals, and access to the AZA logo for use on letterhead and in publications, in addition to other membership items.

**Appeals Process.** If certification is denied, a request for appeal may be made in writing to the AZA Executive Committee within thirty (30) days of the date of the written notification of denial. The AZA Executive Committee must decide in forty-five (45) days whether to grant an appeal hearing. If the AZA Executive Committee grants an appeal hearing, it will be conducted by the AZA Board of Directors at its next regularly scheduled meeting. The determination of the Board is final. Facilities whose appeals are denied may reapply one year after the date of the Commission’s original denial (assuming all identified concerns have been sufficiently addressed). Submission of a new application and materials will be necessary. Appeals should be mailed to: AZA Executive Committee, Appeals Process, AZA, 8403 Colesville Road, Suite 710, Silver Spring, Maryland 20910.

**WHEN IT’S TIME TO PROCESS AGAIN**

The granting of certification is for five years, and expires at the end of that period. Certified
related facilities must successfully complete the entire process again before the end of that period to avoid a lapse in certification and AZA membership (see Long Term Expectations immediately following). **Certified related facilities are expected to keep track of their own expiration dates** (available on the AZA web site at [https://www.aza.org/current-cert](https://www.aza.org/current-cert), or by contacting AZA.) Related facilities will be reminded six months in advance of the deadline for submission of materials (twelve months in advance of certification expiration), but should not rely on this reminder as a method of tracking an expiration date. It is important that the yearly edition of the certification materials being used by a facility match the year in which the application is to be submitted.

**LONG TERM EXPECTATIONS**

Certification is mandatory for a related facility to maintain membership in AZA. Similarly, membership and participation in AZA must be maintained as a condition of certification. All related facilities must process at least once every five years and are subject to any new or higher standards, policies, guidelines, or resolutions adopted by the Association of Zoos & Aquariums. Even though a facility may have been certified previously, there is no guarantee that certification will be granted during subsequent inspections. Standards are subject to continuous review and enhancement. Once certified, a related facility is expected to continuously advance its professional operation and constantly maintain, or surpass, all professional standards. [See also “Preamble” appearing on pages 8-9.]

**CRITERIA FOR SELECTION OF THE VISITING COMMITTEE**

Prior to the submittal of the application materials, each facility will be notified of their proposed Visiting Committee team members, listing qualified persons with expertise in three primary categories: •operations, •curatorial/husbandry (animal management), and •veterinary medicine. The facility’s CEO/Director is expected to review the list and may eliminate the names of any individuals. If any names are eliminated by the CEO/Director, additional names will be substituted for approval. Once approved, AZA will then contact team members for availability. A facility may not select the members of its Visiting Committee. [NOTE: in the case of new applicants this process will take place after the application materials have been received, unless advance notice is provided to AZA regarding the intent to submit an application.] For new applicants the Primary Reviewer automatically serves as Chair of the Visiting Committee. Once the team is selected and confirmed, the team Chair will consult with the applicant facility’s CEO/Director and with team members to determine the dates of the inspection (see also Visiting Committee Selection Process Begins [page 23] and The Inspection Is Scheduled [page 24]).

[NOTE: exceptions to criteria listed below may be made occasionally on an individual basis by the Accreditation Commission Chair, Vice Chair, or by the Senior Vice President, Accreditation Programs, unless otherwise indicated.]

**Basic Criteria For Service As An Inspector**

- Must have support of current employer and supervisor
- Must hold Individual membership in AZA (Professional Fellow or Professional Affiliate members preferred)
- Must be employed at (or retired from) an AZA-accredited institution
- Must have a minimum of 5 years experience in a mid to high level position in the profession
- Must be actively involved in the profession and in AZA
• Must stay current regarding AZA Accreditation Training
• Must be able to maintain impartiality
• Must be able to maintain confidentiality
• Must have good written and oral communication skills
• 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:
  [Operations: (Director, Deputy or Assistant Director, or similar), Animal Management: (Curator, Director of Animal Operations, or similar), Veterinary Medicine: (Veterinarian)]

Criteria for Service As Team Chair
• Basic criteria for service as an inspector (see above)
• Participation as member of an inspection team at a minimum of two different institutions
• Involvement in AZA accreditation or certification process at own facility (preferred, not required)
• Strong leadership, organizational, and interpersonal skills
• 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 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
• Must be approved by the Accreditation Commission prior to service
• Must attend AZA annual conferences
• Must remain current with AZA policies and practices
• Must thoroughly review the inspector’s handbook and the accreditation standards annually
• Must stay abreast of current practices within the profession

Criteria for Determination of Team Size
• Size of the facility and complexity of operations; teams range from three to five

Criteria for Determination of Team Composition
• One team member should be from the facility’s previous inspection team, if available
• Team members’ experience and expertise should parallel the general scope of the facility to be inspected (i.e., an aquarium should have a team with strong aquatic experience)
• Two Person Teams are not normally assigned; special exceptions may be made by the Senior Vice President of Accreditation in cases of extremely small facilities or based on the special nature of a facility’s animals (for example, insects only, etc.)
• Three Person Teams should include one member with extensive experience in operations, one with extensive experience in husbandry and animal management, and one with extensive experience in veterinary medicine
• Four+Person Teams should include one member with extensive experience in operations, one with extensive experience in husbandry and animal management, one with extensive experience in veterinary medicine, and one or more with expertise particularly relevant to the facility being inspected (such as aquatics, cetaceans, elephants, birds, etc.)
Team Tools
Resources available to the team include:

• **The Visiting Committee Inspector’s Handbook** which fully explains the parameters for a related facility to be considered certified and also provides information regarding an inspector’s participation in the process.

• **The Accreditation Standards and Related Policies** containing standards and policies related to the certification process.

• **The Accreditation Resource Center** which contains numerous examples of institutional documents and policies required for AZA accreditation as well as guidelines and information that may be useful in evaluating institutional programs and policies. The Resource Center is available under the Accreditation tab at AZA’s website.

• **The Primary Reviewer** (a member of the Commission or a Commission Advisor) who serves as the Visiting Committee’s direct line to the Commission.

• **AZA Accreditation Staff** who can answer policy questions and concerns, provide support, and consult with the team regarding issues that may surface during the inspection.

• **Inspector Training** sessions are offered annually at AZA’s annual conference. Inspectors should attend the general session at least once every 3 years, and specific-topic sessions as offered. The general session covers best management practices, safety requirements, related specialty concerns or specialty areas of knowledge, practical inspection techniques, evaluations of past inspections, and the opportunity to ask members of the Accreditation Commission questions, and to discuss experiences with other inspectors.

COMMONLY FOUND CONCERNS & PRIMARY CONSIDERATIONS

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
• Failure to conduct drills in accordance with standards
• Insufficient safety barriers
• No duplication of records or failure to store duplicate set in separate location
• GFI circuits in wet areas

**Examples of commonly found lesser concerns:**

• Peeling Paint
• Rusty doors and fencing
• “Permanent” extension cords
• Cluttered yards and storage areas
• Rotted (wet and dry) wood and fencing
• Potholes in asphalt
• Cracks in concrete visitor walkways
• Dark work areas
• Perimeter fence issues
• Missing or improperly mounted fire extinguishers
• Inaccessible SDS sheets
Of significant concern, if present:
- Issues affecting animal welfare
- 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

Primary considerations include:

• **The Animals.** Animal welfare must be a top priority of the facility. The Visiting Committee shall consider the size and nature of the living environments provided for the animals, and whether the physical and psychological well-being of the animals is being met. The scope of the facility’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 AZA requirements, and will evaluate the facility’s animal welfare assessment process.

• **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 to the animals must be considered adequate for the number and nature of the species at the facility.

• **Animal Security.** The security program employed by the applicant facility 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 the facility’s 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, a related facility must participate in every SSP program that pertains to an animal belonging to the facility. Related facilities may indicate at what level they desire to participate in each SSP. While not a requirement for certification, the facility’s Annual Report on Conservation and Science (ARCS reports) will be reviewed for each of the five years since the related facility’s previous inspection.

Facilities that occasionally host a small number of visitors by appointment only need not have an education program. However, facilities that have a regular flow of public visitors and/or school groups (whether by appointment or not) must have an education program that meets AZA standards.

• **Potentially Dangerous or Venomous Wildlife.** Related facilities maintaining venomous animals must have an appropriate supply of sera available and policies/procedures in place for the safe handling of those animals. Likewise, procedures must be in place to reduce the risk of injury by potentially dangerous animals. The alarm system and emergency procedures will be closely reviewed by the Visiting Committee.
• **Finance.** The facility’s financial health will be reviewed and considered in terms of meeting the needs of the facility for the five-year period of certification. Contingency plans will also be reviewed.

• **Master Plans, Policies, & Procedures.** Master plans, written policies, and procedures should be reviewed on a regular basis and updated as necessary, and should be of a quality on par with other certified related facilities of similar size and nature.

• **Physical Facilities:** The physical condition of the facility 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 8-9).

• **Policy on Responsible Population Management (RPM).** The Visiting Committee shall ascertain the facility’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.

• **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 facility’s safety programs employed for the protection of its employees, the visiting public, and the animals. Inspectors will look for potential safety hazards in both public and restricted areas.

**AREAS OF PRIMARY FOCUS**

Following are some of the areas of primary focus for the inspection team and the Accreditation Commission when evaluating a related facility. Issues are broken into the main section headings covered by the Accreditation Standards. Related facilities are encouraged to go beyond these focus areas.

**Animal Welfare, Care, & Management:** *Required for certification* A related facility must comply with all wildlife laws. In developing its certification program, AZA has been especially concerned with the need for assuring the highest standards of animal care, welfare, and management. It is our belief that this objective is paramount to the overall welfare of living creatures and that good conscience permits no higher priority. Among the things we will closely examine are:

1. The animals and their overall welfare and well-being
2. The facility’s animal welfare assessment process.
3. Institutional Collection Plan
4. *All* animal facilities, including those that may be located off-site
5. Whether the animals are protected from excessive heat and cold
6. Whether the animals are provided sufficient shade in outdoor exhibits
7. Whether the animals have access to potable water both on and off exhibit
8. Whether 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)
9. Whether the facility has a sufficient *written* enrichment program
10. Whether all of the facility’s animals are being provided with appropriate enrichment on regular and frequent basis
11. Whether exhibit enclosures are of sufficient size and nature to provide for the psychological and physical well-being of each animal
12. The written policy for animal and public safety in animal contact areas
13. The animals used in public contact areas
14. The animals used in education programs [if a program exists]
15. The animals used in off-premises programs
16. Whether animal records are current and accurate
17. Records for animals not on Species360 (formerly ISIS) [i.e., fish, insects, etc.]
18. Animal diets, food coolers, freezers, etc.
19. Whether there are noticeable signs of pests, and pest control solutions being utilized
20. SSP and endangered species designations on graphics and signs
21. Whether staff is aware of the facility’s euthanasia policy
22. Whether the facility’s RPM policy incorporates, at minimum, all requirements contained in AZA’s RPM Policy
23. Whether acquisition, transfer, euthanasia, and reintroduction records are up-to-date
24. How verification is made that collection procedures used by the collector do not cause environmental abuse [for facilities utilizing aquatic collectors and dealers]
25. How verification is made that commercial collectors are properly permitted to legally collect animals from the wild [for facilities dealing with commercial collectors taking animals from the wild]

**Facilities Maintaining Elephants:** Among the things we will closely examine are:

1. Whether there is compliance with the AZA Standards For Elephant Management & Care
2. The written elephant management protocol, which must include: ·management policies, ·staff responsibilities, ·proper training techniques for restricted contact style of management, ·behavioral profiles on each elephant, ·incident reports, ·acceptable discipline methods, ·chaining practices, ·staff training protocols for new elephant handlers, ·foot care schedules, etc.
3. The responsibilities of the Elephant Manager
4. Whether the Elephant Manager has completed the AZA Principals of Elephant Management training course
5. Whether there are a minimum of two qualified elephant care professionals present during any contact with elephants.
6. Whether continuing education and training are supported by management
7. Whether elephant staff are aware of, or involved in, AZA, EMA, AAZK or the elephant TAG
8. Whether the elephants have access to natural substrate for dusting
9. Whether the elephants have shade provided during the heat of the day in a sufficient amount to accommodate every animal
10. The most recent incident report

**Facilities Maintaining Cetaceans:** Among the things we will closely examine are:

1. Whether there is compliance with the AZA Standards For Cetacean Care & Welfare
2. Written cetacean management protocol
3. The structure and responsibilities of the cetacean staff
4. The facility’s policies and records on acquisition, disposition, and transfer of cetaceans
5. The facility’s conservation and research efforts on behalf of cetaceans
6. The facility’s public education programs about cetaceans
7. The facility’s veterinary care program for cetaceans
8. The facility’s cetacean and guest interactive programs, if they are offered
9. Environmental considerations for cetaceans
10. Transportation protocol for cetaceans

Veterinary Care: [Required for certification] The related facility’s animal health care program must be under the direction of a licensed veterinarian. Among the things we will closely examine are:

1. Whether the facility follows the *Guidelines For Zoo and Aquarium Veterinary Medical Programs and Veterinary Hospitals* of the American Association of Zoo Veterinarians
2. The animal record-keeping system
3. Whether medical records are up-to-date
4. Whether an adequate number of persons are employed in the animal health care program
5. Whether the extent of veterinary services provided to the animals is adequate
6. USDA reports, and what is being done to correct concerns
7. Quarantine procedures and their implementation
8. The alarm system and emergency procedures
9. Drug emergency protocols
10. Whether the veterinarian’s response time from home is adequate in an emergency
11. Whether adequate policies and procedures are in place for the safe handling of venomous animals
12. Whether adequate sera is available
13. Whether drugs used in aquariums or aquatic exhibits comply with FDA guidelines
14. Whether animal food, especially seafood products, are purchased from sustainable or well-managed sources
15. How the facility ensures that the animals are not exposed to toxic plants from browse material and/or plants growing naturally on the grounds of the facility

Conservation: [Required for certification] The scope of the related facility’s participation in conservation programs is important. Consideration will be given to the size, budget, and other areas affecting these programs. Each facility is required to participate in every SSP that pertains to an animal belonging to the facility, although it may decide at what level. Among the things we will closely examine are:

1. The number of staff dedicated to conservation programming
2. Whether the facility is contributing sufficiently to AZA conservation programs based upon budget and/or staff size
3. Whether there are any Studbooks published by the facility
4. Whether all SSP animals are registered with the appropriate SSP
5. Participation in field conservation programs
6. Staff attendance at AZA conferences, SSP, and TAG meetings, etc.
7. Efforts undertaken for energy and natural resource conservation (i.e., recycling, water conservation initiatives, etc.)
8. Local and national program literature
9. Level of participation in conservation programs with colleges and universities
10. The facility’s Annual Report on Conservation and Science (ARCS reports) for the previous five years.

Education and Interpretation: [Facilities should strive to have an education program if the facility has a regular flow of public visitors and/or school groups. If a program exists, it
should be based on accreditation standards.] Education need not be an element in the mission statement of the facility. Facilities that host only a small number of visitors or by appointment only need not have an education program. However, facilities that have a regular flow of public visitors and/or school groups (whether by appointment or not) should strive to have an education program that meets accreditation standards. Among the things we will examine are:

1. The number of staff dedicated to education programming  
2. That one paid staff member is dedicated to education on (at least) a part-time basis  
3. How the education message is conveyed to the casual visitor  
4. Publications, brochures, or other printed material  
5. Classrooms and teaching areas  
6. The availability of funds allocated for education programs  
7. Whether exhibit signage contains appropriate information  
8. The level of education department contact with local schools, colleges, and other academia  
9. The volunteer and outreach programs  
10. The level of outreach programming and whether appropriate animals are being used  
11. How graphics are developed and designed

**Scientific Advancement:** [Required for certification] Consideration will be given to the size, budget, and other areas affecting these programs. Among the things we will closely examine are:

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

**Governing Authority:** [Required for certification] The governing authority must be supportive of the related facility’s decision to abide by the AZA Code of Ethics, Policy on Responsible Population Management, Accreditation Standards, and Charter & Bylaws, and must recognize and support the facility’s goals and objectives. Among the things we will closely examine are:

1. The governing authority’s perception of what the Director’s role is in the decision making process  
2. The process of hiring and firing personnel  
3. The lines of authority for acquisition, transfer, euthanasia and reintroduction of animals  
4. The relationship between the governing authority and the Director  
5. The levels of control on the part of the governing authority, and whether they are appropriate or inappropriate  
6. The governing authority’s role in the day-to-day management of the facility, including animals, staff and programs

**Staff:** [Required for certification] A key element of a facility’s successful operation is maintaining a staff sufficient in qualification and number. Effective communication, working relationship, and training are also important. Among the things we will closely examine are:

1. Job descriptions and the qualifications of staff in those positions  
2. How familiar staff are with their responsibilities  
3. Management’s relationship with staff, including problems and proposed solutions
4. Staff’s relationship with management, including problems and proposed solutions
5. Animal care staff roles and responsibilities, and relationship with management, including problems and proposed solutions
6. Clarity of lines of authority for staff
7. Frequency of staff training and professional development etc.
8. Staff involvement with AZA, SSPs, TAGs, etc.
9. Funding for staff travel and participation in meetings, and which staff members are eligible to participate
10. Staff salaries to determine if levels are appropriate

Support Organization: [Evaluated if one exists] A support organization must share a facility’s goals and objectives, and have a good working relationship with the facility. Among the things we will closely examine are:

1. The society representatives’ roles at the zoo or aquarium
2. The society’s support and fund-raising efforts
3. How funds are allocated and distributed
4. Financial reports and how funds benefit the facility
5. The relationship between the society board and staff
6. Whether having a support organization might be helpful, if one does not exist

Finance: [Required for certification] A related facility must provide sufficient evidence of its financial stability, including contingency plans, and funding for capital improvements and maintenance. Among the things we will closely examine are:

1. Whether the facility will be solvent for the five-year certification cycle, including long-term funding, contingency plans, emergency funds, etc.
2. Whether budget cuts or other financial problems are anticipated in the future
3. All financial records
4. The budgeting process, including who has control, how do requests originate, what is the role of the governing authority in the process, what are your in-house controls on spending, and is there an audit process, etc.

Physical Facilities: [Aesthetics and amenities evaluated in terms of how often the public is present] While the Commission is interested in a facility’s future plans, certification will be based upon its operations and facilities at the time of inspection and review. Among the things we will closely examine are:

1. Facilities and conditions that exist at the time of the inspection and review
2. Appearance and condition of the buildings and grounds
3. Adequacy of maintenance program
4. Adequacy, appropriateness, and condition of exhibits and holding areas
5. Adequacy of furniture in exhibits
6. Appropriateness of exhibit groupings
7. Adequacy of ventilation in buildings and holding areas
8. Whether the animal facilities meet or exceed all relevant federal and state requirements
9. Whether all service areas have sufficient space for safety
10. Program of water quality monitoring for all animals, including written records
Safety/Security: [Required for certification] The security program employed by a related facility should be sufficient to provide appropriate protection for the animals, its employees, and the visiting public. Adequacy will be based on the operation, location, size, and physical facilities. Among the things we will closely examine are:

1. Whether the facility is conducting required drills in accordance with standards
2. Location of escape procedures throughout the facility
3. Files on safety incidents over the past five years (i.e., escapes, accidents, injuries, attacks, public problems)
4. Whether staff knows the process of treating an injury to a visitor, and where the nearest first-aid station is located
5. Whether exhibits are safe for the animals, the staff, and the public
6. Whether walkways, steps, and other public areas are free of debris and in good repair
7. Whether work areas are free of clutter and safe work environments for employees
8. How flammables and other hazardous solutions are stored
9. Whether adequate safety procedures are in place for potentially dangerous animals
10. The alarm systems and emergency procedures
11. Whether minimum operational safety standards for diving are being met [for facilities using underwater diving with compressed air]
12. Whether adequate security is provided for the animals both day and night
13. Whether incidents of vandalism have occurred, how prevalent the problem is, and how it is being addressed
14. Security personnel routines for nightly rounds, emergencies, etc.
15. Firearms storage
16. Whether the perimeter fence is of sufficient height and construction, and is separate from all exhibit fencing

Guest Services: While the Commission is interested in a facility’s future plans, certification will be based upon its operations and facilities at the time of inspection and review. Among the things we will closely examine are:

1. Facilities and conditions that exist at the time of the inspection and review
2. The public’s overall experience [examples: the entrance; parking; the restrooms (cleanliness and convenience); drinking fountains (cleanliness and convenience); refreshment stations (number and convenience); quality of food being sold; benches and rest areas (number and convenience); ADA compliance; etc.]
3. Way-finding: availability of maps and signs
4. Overall aesthetics of the exhibits, buildings, and grounds
5. Adequacy of maintenance and trash collection
6. Adequacy of ventilation in public buildings

Strategic Planning: [Required for certification] A facility should have a strategic and/or master plan to guide the facility in its development. Among the things we will closely examine are:

1. The master plan and whether it is on schedule
2. The strategic plan
3. Other programs being developed or already in place
GENERAL ADMINISTRATIVE POLICIES

Accidents Involving Injury or Welfare. Should an accident occur at an accredited institution or certified related facility involving serious staff injuries, serious public injuries, animal incidents/escapes, or significant barrier breaches, a written report must be submitted to the Accreditation Commission within thirty (30) days explaining what happened and noting what actions are being taken by the institution as a result. The Commission will determine if a special inspection or other action is necessary and will notify the institution in writing once a decision has been made.

Considerations for submitting such reports include:

- **Staff Injuries** – site and/or animal-related injury to staff, causing death or significant trauma resulting in a hospital stay and/or sustained disability.
- **Public Injuries** – site and/or animal-related injury to people other than staff, causing death or significant trauma resulting in extended hospital stay and/or sustained disability.
- **Animal Incidents/Escapes** – these include unusual circumstances involving a single animal or group of animals, and/or multiple similar individual cases or incidents of mass mortality; escape of a dangerous animal or mass escapes of any species within the zoo or during transport; or death/grievous trauma to individuals of an endangered or other notable species within the zoo or during transport.
- **Barrier Breaches** – these include incidents in which a visitor crosses a barrier or guardrail, putting themselves, others, or the animal in jeopardy of serious injury, significant trauma, or death.

Accidents Resulting In Human Fatality: An on-site inspection shall be automatic after any accident involving an animal that results in a human fatality. The inspection shall focus on the incident and shall be scheduled to take place as soon after the incident as can be reasonably scheduled. Site related human fatalities not involving an animal shall be immediately assessed by AZA relative to the AZA Accreditation Standards. The Commission shall determine if a special inspection is necessary in those cases and will notify the facility in writing once a decision has been made. Related facilities are responsible for submitting a written report to the Accreditation Commission as noted under “Accidents Involving Injury or Welfare”, above.

Achieving Certification: Certification can only be achieved by a judgment from the AZA Accreditation Commission that the applicant facility meets or exceeds all AZA standards, and supports and employs AZA practices and philosophies. This decision is preceded by a lengthy application and evaluation process, involving information from a number of sources, including a thorough on-site inspection.

Addition of an Elephant Inspector. For facilities with elephants, an inspector who specializes in elephants will be added to the regular team and will focus on the facility’s elephant program.

Addition of a Specialist Inspector. It is occasionally necessary for a specialist inspector to be added to an inspection team. The Commission will determine, on a case by case basis, when this is justified and will notify the facility. Examples would be zoological parks with aquarium facilities of a sufficient size and nature to require an inspection team member specializing in aquatics. The same would be true of aquariums with exhibits containing land-based animals, etc.
Attendance At The Hearing (Who Should Be There). The facility’s CEO/Director must attend the hearing to answer questions, authorize action, and to make any statements desired. The CEO/Director may bring to the hearing any individual(s) he or she would like to have present. This may include members of the facility’s staff, governing authority, support organization, or local government officials. If the CEO/Director cannot attend, a written notification must be provided to AZA as soon as possible. The notification must include an explanation, and give full authority to an individual selected by the CEO/Director to represent the facility in place of the CEO/Director.

CEO/Director Requirement For Applicants Not Currently AZA-Certified. Any facility not currently certified may not apply for certification if it is without a permanent, full-time CEO/Director. Materials may not be submitted under the leadership of an Interim or Acting Director.

CEO/Director Vacancy. When a vacancy occurs in the position of CEO/Director a certified related facility must notify the Accreditation Commission in writing, and a follow-up letter must be submitted to the Commission every six months thereafter reporting the status of the search until such time as the position is filled. The status update must include details as to what has occurred, how the facility is being managed in the interim, and an estimation as to when it is expected the position may be filled. An AZA-certified related facility that is without the services of a permanent, full-time, compensated CEO/Director for longer than one year may be subject to loss of certification and membership.

CEO/Director Vacancy Occurring Immediately After Receiving AZA Certification. If a CEO/Director vacates his or her position at the facility within ninety days of receiving certification, the Commission may, in its discretion, require written biannual progress reports, or may require that the facility reprocess again at the earliest opportunity to do so once a new CEO/Director is in place.

Certification Cycle: The cycle of certification shall be five years, after which a facility must undergo the full certification process again. Exceptions: • In cases where an applicant processes and is granted certification on a cycle in conflict with the geographic rule, its initial certification cycle will be shortened to four and a half years to place it on the proper seasonal cycle for future inspections (see Geographic Location, page 44). • If an extension is granted, the year of extension shall be deducted from the facility’s subsequent five-year certification cycle if the facility receives certification at the end of the year of extension (see Extensions of Certification, page 44). • If a related facility is tabled, the year of tabling shall be deducted from the facility’s subsequent five-year certification cycle if the facility receives certification at the end of the tabled year (see Table Certification, pages 29-30).

Change of Governance. A change in governance refers to a change of the governing authority, such as from a governmental agency to society or vice versa. If a change in governance occurs, a letter or affidavit from the CEO or chairperson of the new governing authority is required pledging to uphold and abide by standards, including the AZA Charter & Bylaws, Code of Ethics, Policy on Responsible Population Management, and other related policies. The letter must be sent to the Commission within 30 days of the governance change.

Change of Location. In the event of a relocation of a certified related facility, the facility must reprocess for certification as soon as the new location is officially open. An application must be received by the submission deadline that falls immediately prior to, or following, the opening.

Change of Ownership. A change in ownership refers to the sale or formal transfer of
ownership of a facility. In the event of a change in ownership of a certified related facility, the facility must reprocess for certification within 12 months, regardless of when its certification is scheduled to expire. A letter or affidavit from the CEO or chairperson of the purchasing or receiving organization is also required pledging to uphold and abide by standards, including the AZA Charter & Bylaws, Code of Ethics, Policy on Responsible Population Management, and other related policies. The letter must also indicate the new owner’s intent to submit materials applying for certification within the required time period. The letter must be sent to the Commission within 30 days of final sale or transfer.

**Change of Scope.** Certified related facilities must notify the Commission in writing in the event that a change in the scope of its facility occurs (for example, the opening of a new exhibit of significant proportions, or an exhibit that changes the overall scope of the facility, such as an aquarium in a zoo, or land-based animals in an aquarium, etc.). The Commission may assign a team, or individual, to conduct an inspection. Cost of such inspection shall be borne by the certified related facility concerned. (See Interim and Follow-up Inspections, pages 44-45.)

**Complaints.** If a documented, written complaint is received from a member of the general public, the facility’s staff, or a professional colleague regarding an AZA-certified related facility, the Commission will take steps to determine the situation and, based upon its findings, will make recommendations to the facility, or take appropriate action. In some cases the Commission may assign a team to conduct an inspection. (See Interim and Follow-up Inspections, pages 44-45.)

**Determining Compliance:** The AZA Accreditation Commission, based on the collective professional training and experience of its 16 member panel, is the body officially tasked with determining whether a standard is being met or not. The Commission’s decision is absolute. In cases of denial of certification, an appeal of that denial may be made to the AZA Executive Committee [See Appeals Process, page 30].

**Elephant Management & Care – Requesting A Temporary Variance Under the AZA Standards.** Related facilities requesting a temporary variance under the AZA Standards For Elephant Management & Care should submit that request to the Accreditation Commission at the time it becomes apparent that a temporary variance may be needed. The request should be in the form of a letter detailing the temporary variance being requested, and should include all necessary documentation. The Commission will consider the requested temporary variance and will thereafter notify the facility of its decision. Temporary variances must be re-applied for prior to the expiration date contained in the variance, or documentation must be provided that the reason for the temporary variance has been addressed. **NOTE:** facilities not currently AZA-certified must be in full compliance with AZA standards at the time application is made.

**Elephant Management & Care – Special Welfare Variance.** In cases where an elephant’s physical and/or psychological welfare is believed to be at risk by implementation of a standard, a related facility may request a special welfare variance under the AZA Standards For Elephant Management & Care. To qualify for a special welfare variance, the elephant(s) in question must be considered geriatric, and the facility must provide evidence that the elephant’s welfare will be at risk without the variance, or that moving the elephant could result in serious injury or death. Evidence must be in the form of documentation from the facility’s veterinary and animal management professional staff. The request for a special welfare variance must be in the form of a letter detailing the variance being requested, and containing all necessary documentation. The AZA Accreditation Commission will consider the request and will thereafter notify the facility of its decision. If granted, the variance will be for three (3) years and must be re-applied for prior to the expiration date contained in the variance. If granted, facilities must submit an annual report documenting the status and health of the elephant(s),
including veterinary records, assessments, behavioral profiles, and the written recommendations of the facility’s veterinary and animal management professional staff. NOTE: for the purpose of this variance, welfare is defined as physical health and function, and psychological well-being.

**Enforcement of Standards:** Related facilities holding certification from AZA must maintain all AZA standards, and support AZA practices and philosophies during the period that certification is held. If AZA has evidence that this is not taking place, it will work with the facility to see that standards are met, or will take whatever action is appropriate to ensure the integrity of its process, including removal of AZA certification when deemed necessary. (See Interim and Follow-up Inspections, pages 44-45, and Rescinding Certification, page 46.)

**Extensions of Certification.** Under extenuating or special circumstances extensions of certification may be granted to extend current certification by one year. A related facility desiring an extension must submit a request in writing to the Accreditation Commission, including a full explanation as to why the extension is being requested, as soon as possible to avoid a potential lapse in certification and AZA membership. Before considering the request, the Commission may require a site visit to assess the facility’s ability to maintain standards during the period of extension. If a site visit is deemed necessary, it must take place prior to any decision being made by the Commission. The Commission will thereafter make a determination, and the facility will be notified. A second extension will be considered only in extreme cases, and will require a site visit. If an extension is granted, the year of extension shall be deducted from the facility’s subsequent five-year certification cycle should the facility receive certification at the end of the year of extension. [NOTE: Missing a deadline will not be considered an acceptable reason for extension of certification. Extenuating or special circumstances shall not include a vacancy in the position of CEO/Director.]

**Facilities Under Construction.** Facilities currently being constructed may apply for certification prior to the opening date; however, the on-site inspection will not take place until the facility is officially open and a permanent, full-time CEO/Director has been on board for at least six months. (See Deadlines and Early Submittals pages 18-19).

**Facilities Within Facilities.** In order to be certified, a facility which is a part of a larger facility (such as a university, museum, or botanical garden) must be distinct enough to be separately identified and must adequately fulfill the definition of a zoological park, aquarium, or Related Facility as earlier defined. When certification is granted in such cases, it will apply only to the facility concerned and not to the non-zoological activities of the larger organization or in fields in which AZA has no expertise.

**Geographic Location and Certification Cycle.** To optimize weather conditions for inspectors and to create a more even distribution of the case load for the Commission, facilities located in geographic areas that typically experience a mild winter season will be placed on a five-year certification cycle that affords a fall-winter inspection (i.e., will have their certification expire in March). Facilities located in geographic areas that typically experience a harsh winter season will be placed on a five-year certification cycle that affords a spring-summer inspection (i.e., will have their certification expire in September). In cases where an applicant processes and is granted certification on a cycle in conflict with the geographic rule, its initial certification cycle will be shortened to four and a half years to place it on the proper seasonal cycle for future inspections. NOTE: Because aquariums, by their nature, are primarily indoor facilities, they will be placed on a five-year certification cycle that affords a fall-winter inspection (i.e., will have their certification expire in March).

**Interim and Follow-up Inspections.** The Accreditation Commission or AZA Board of
Directors may, at its discretion, assign a team to conduct an interim or follow-up inspection of any AZA-certified related facility at any time during the five-year certification period. A follow-up inspection shall be conducted for all tabled facilities at the end of the tabled period, as a condition of proceeding forward in the process. While on site, the individual or team may, at their discretion, inspect all or portions of the facility. Cost of such inspection shall be borne by the facility as a requirement of maintaining and/or achieving certification. (See Mid-Cycle Inspections, page 46).

“Last Minute” Inspector Replacements. Although it is highly unusual, a “last minute” change in inspectors may become necessary in a sudden emergency. In this case, there may not be sufficient time for AZA to follow its standard procedure and provide the facility with a list of potential replacements. Every effort will be made to alert the facility in advance, but in extreme circumstances, AZA will assign a replacement inspector and notify the facility thereafter.

Mentoring Program. The Commission, itself, does not conduct “pre-certification” inspections. Although it is not a requirement, the Commission strongly encourages facilities that are not AZA-certified to have their operations evaluated by an official mentor approved and assigned by the Accreditation Commission prior to submitting an application. The Commission recommends that currently-certified related facilities consider doing the same prior to undergoing the process again when certification expires at the end of five-years (see Long Term Expectations page 31). [NOTE, currently-certified related facilities: The observations of the mentor often aid the facility in preparing to renew certification after five years, but the observations may also result in tabling of current certification in rare circumstances.] If the facility, or AZA, is unsure it meets the definition of a related facility, it is advisable to contact AZA for an assessment in advance of requesting a mentor.

To request assignment of a Commission-approved mentor, the facility should contact AZA accreditation staff. A Commission-approved mentor is a professional from an accredited institution who serves regularly as an inspector, is a past or present member of the Accreditation Commission, or an Accreditation Commission Advisor. The Commission-approved mentor is considered by the Accreditation Commission as being particularly well versed in current standards, expectations, and fundamental AZA philosophies and best practices, and can be consulted throughout the preparation phase. The mentor will be available to the facility by phone throughout the preparation process to provide guidance regarding policies, procedures, agreements, situations, philosophies, and the assembly of the application materials as needed. In addition, it is considered important that the mentor visit the applicant facility for an unofficial inspection at least once, and thereafter as desired by the facility. Following the inspection, the mentor will provide a list identifying all things (including physical facilities and related issues, as well as practices and/or documents) that need work prior to making application, or before the official inspection, as the case may be. Additionally, in the case of first-time applicants, the mentor will provide a professional opinion as to whether the facility is best advised to make application later rather than sooner and, if later, may continue to work with the facility long-term in guiding it to full readiness. The applicant institution bears the expenses incurred by the mentor (including related travel, accommodations, and meals) for each site visit. The mentor submits an expense report and AZA reimburses the mentor directly after which the applicant institution will be invoiced by AZA for the total amount due. Reimbursable expenses are food, lodging, transportation, parking, postage, and any reasonable expense directly associated with the inspection.

Mentors should be requested at least one year prior to submitting an application, and no earlier than five years prior to submitting an application. Mentors cannot be provided at the time of application or after an application is submitted. Having a mentor does not guarantee that a facility will be granted certification. Certification can only be achieved by a judgment.
from the AZA Accreditation Commission that the applicant facility meets or exceeds all AZA standards, and supports and employs AZA practices and philosophies.

**Mid-Cycle Inspections.** The Accreditation Commission may, at its discretion, require a mid-cycle inspection as a condition of maintaining certification. When such an inspection is required, the visiting team will focus on key areas identified when certification was issued, and will also review the facility as a whole. Cost of such inspection shall be borne by the facility as a condition of maintaining certification. An application and application fees are not required.

Mid-cycle inspections may apply to the following:

- Related facilities that are tabled and receive certification one year later.
- Related facilities that meet minimum standards when certification is granted but that the Commission believes may be challenged in successfully maintaining AZA standards throughout the full five-year cycle of certification.
- Related facilities with a large number of identified concerns; facilities with significant safety and/or animal welfare concerns; facilities that are not well prepared for the inspection.

**Multiple Facilities Under One Authority.** If two or more facilities are under the same ownership and governing authority, administration, or control, are located adjacent to each other, and public admittance for all facilities is covered by a single entrance fee, they will be considered as a single facility. In such cases, the facility should first submit a request in writing for the consideration of the Commission. All facilities are subject to inspection. Should the Commission determine that the facilities do not meet the above criteria, processing as separate facilities will be necessary.

**Offsite Facilities.** The inspection will include a facility’s offsite facilities. An offsite facility is one that is owned and operated by the facility, is not open to the public, and operates in support of the facility. Facilities must list all offsite facilities. Examples of offsite facilities include, but are not limited to: food storage areas, maintenance, quarantine, and animal holding areas. The Primary Reviewer, in consultation with the inspection team chair, will determine which of these areas need to be inspected.

**Related Facility’s Membership In AZA:** A related facility’s membership and participation in AZA must be maintained as a condition of certification.

**Rescinding Certification.** The Commission may rescind or table certification at any time if it concludes that standards are not being consistently met and maintained.

**Temporary Closings.** Related facilities temporarily closed to the public will retain their certification and their AZA membership. Should a facility’s cycle of certification review fall within the period of temporary closure, an extension must be requested in writing prior to the facility’s regular deadline for submission of certification materials. During the period of closure, a written Progress Report must be submitted every six months until such time as the facility has re-opened. Upon re-opening, the facility must submit materials for full certification review by the first deadline that falls after re-opening. In the case of facilities closed for less than six (6) months, a waiver may be requested in writing.
AN IMPORTANT NOTE:

The criteria and procedures of the certification program are under continuous review by the Commission and Board of Directors. Constructive comments and suggestions are welcome and will receive careful attention.

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