



**ACA Associate Visitor Training**

**Participant Handout**

**2017**

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**ACA STANDARDS ASSOCIATE VISITOR — JOB DESCRIPTION****Overview**

Associate visitors are persons who have completed the requirements of the Associate Visitor Course. They participate as a second (or third) person on a visitation team, conducting visits to verify a camp's compliance with all applicable ACA standards. A commitment to the role (participating in the visits to which you have agreed) is of critical importance as is communication and follow-through before, during, and after visits are completed.

**Prerequisites**

1. Complete and submit the Associate Visitor Application.
2. Approval of application from Local Standards Chair.
3. Be a current ACA member.
4. Knowledge and acceptance of the Conflict of Interest Statement for ACA Volunteers. (See below)
5. Completion of the current Standards Course. (pre-requisite to the Associate Visitor Course)

**Required Training**

1. Associate Visitor Course (and required prerequisites), including course instructor recommendation.
2. Visitor Update and/or Refresher every three years (minimum) or as determined by the National Standards Commission. (NSC)

**Qualifications**

1. At least 21 years of age.
2. Maturity and good judgment.
3. Knowledge of and administrative experience in organized camping, preferably ACA-accredited camps.
4. Understanding of the mission of ACA and the purpose of the ACA accreditation program.
5. Basic knowledge of the application of ACA standards.
6. Understanding of the role of a camp professional.

**Desired Competencies**

1. Demonstrated strong oral and written communication skills.
2. Demonstrated strong observation skills.
3. Demonstrated flexibility, patience, and objectivity.
4. Ability to respect, articulate, understand different points of view.
5. Ability to work as a member of a team.
6. Demonstrated ability to use positive conflict resolution steps.
7. Ability to relate well to a diverse field of camping professionals.

**Responsibilities**

1. Assist in the interpretation of the Accreditation Program's purpose, background, function, and process.
2. Prior to the site visit:
  - a. Assist the lead visitor and designated camp contact in evaluating all aspects of the camp operation.
  - b. Review documentation for the Camp Self-Assessment, when possible.
3. Fully participate with the assigned visitor team in the on-site standards visit:
  - a. Observe all aspects of camp operation.
  - b. Assist lead visitor by scoring each standard "Yes," "No," or "DNA" on the score form, and ensuring all comments are recorded.
  - c. Inform the camp director or administrator of the responses as they are recorded.

- d. When appropriate, as a member of the visit team, provide feedback that will aid the camp personnel in developing and sharpening their own observation skills of their own program as related to the standards.
  - e. Complete an evaluation after the completion of each assigned visit.
- 4. Provide information in the Review or Appeal Process, as requested or needed.
  - 5. Maintain active visitor status\*

\*To maintain active visitor status: Visitors are expected to attend and complete Visitor Update Course and/or Refresher at least once every three years or as required by the NSC, and assist with one or more visits at least every other year. Also, must maintain current ACA individual membership.

### **Approval of Associate Visitor Status**

Approval of associate visitor status is by the LCOL/Board and is based on

- 1. Successful completion of required prerequisites and training.
- 2. Recommendation of the Associate Visitor Course instructor.

### **Conflict of Interest Statement for ACA Standards Volunteers**

*FROM GUIDING PRINCIPLES – LCOL – LO-8:*

- 1. All standards volunteers (trainers through associate visitors) will reveal any conflicts of interest with regard to their role in serving as a standards volunteer. Individuals will recuse themselves from participating in discussions and decisions relevant to their conflict of interest.
- 2. All standards volunteers (trainers through associate visitors) must not use their positions to obtain ACA employment for themselves, family members, or close associates. Should a member desire to be considered for employment, he or she must first resign their position. No volunteer may serve as a compensated staff member of ACA, Inc. or one of its Affiliates.
- 3. All standards volunteers (trainers through associate visitors) will not disclose or discuss with another person or entity, or to use for their own purpose, confidential or proprietary information gained through their volunteer work for ACA (e.g., accreditation approval issues).
- 4. All standards volunteers (trainers through associate visitors) will not receive compensation for their work. However, volunteers can be reimbursed for expenses related to participation in meetings and for other expenses incurred for the benefit of the field office or affiliate.
- 5. All standards volunteers (trainers through associate visitors) will not use the intellectual property (IP) of ACA to further any personal interests; or purport or imply ACA's IP to be their own. This includes all information in ACA's database, knowledge center products and services, logos, and any other statements or educational materials created by or for the American Camp Association.

**ACA STANDARDS VISITOR — JOB DESCRIPTION****Overview**

While the role of the visitor is similar to that of the associate visitor (to verify compliance with the ACA standards on the day of the visit), persons who have decided to accept the role of visitor must also be willing and capable of serving as the lead visitor for camp visits. Those responsibilities are outlined below in the job description. If an applicant finds that they prefer not to accept those additional responsibilities, then please do not accept the role of visitor, and remain as an associate visitor. Both roles are critically important to the integrity of the program.

**Prerequisites**

1. Active associate visitor status.\*
2. Commitment to the role of serving as a visitor, including communication responsibilities and follow-through before, during, and after visits.
3. Successful completion of the required visits under the supervision and evaluation of a lead visitor (the number of required visits determined by the Associate Visitor Course instructor is a minimum of two).
4. Current ACA member status.
5. Knowledge and acceptance of the Conflict of Interest Statement for ACA volunteers (included in this job description).

**Required Training**

Visitor Update Course and/or refresher every three years (minimum) or as determined by the National Standards Commission (NSC).

**Qualifications**

1. At least 25 years of age.
2. Maturity and good judgment.
3. Knowledge of and administrative experience in organized camping, preferably in ACA-accredited camps.
4. Understanding of the mission of ACA and the purpose of the ACA accreditation program.
5. Demonstrated knowledge of the application of ACA standards.
6. Understanding of the role of a camp professional.
7. Availability and willingness to conduct at least one accreditation visit every other year.

**Desired Competencies**

1. Demonstrated strong oral and written communication skills
2. Demonstrated skill and comfort with use of technology to include web-based and cloud based systems.
3. Demonstrated strong observation skills.
4. Demonstrated flexibility, patience, and objectivity.
5. Ability to respect, articulate, understand different points of view.
6. Ability to work as a member of a team.
7. Demonstrated ability to use positive conflict resolution steps and manage conflict.
8. Relates well to a diverse field of camping professionals.
9. Demonstrated understanding of the role of education in the accreditation process.
10. Demonstrated understanding of the complexities of differing camp operations.

11. Ability to lead a team and guide a process with an end result.
12. Ability to interpret standards in multiple settings and articulate those interpretations.
13. Ability and willingness to assume ultimate authority on standards applicability and compliance decisions.
14. Ability to relate to people in a positive and supportive manner

### **Approval to Serve as Visitors**

Approval to serve as a visitor is based on the following:

1. Indication by the candidate she or he is ready to assume full responsibility for visits.
2. Indication by the candidate he or she is ready and willing to supervise an associate visitor as necessary (for the required number of visits).
  - a. Satisfactory completion of supervised visits as an associate visitor.
3. Commitment to the program as evidenced by completion of training, timely follow-through, and effective communication.
4. Demonstrated ability to assume full responsibility and ultimate authority for visits.
5. Endorsement of local standards chair, local Standards Committee, and LCOL/Board.

### **Responsibilities**

When serving in ANY visitor role:

1. Assist in the interpretation of the Accreditation Program's purpose, background, function, and process.
2. Immediately communicate any concerns and/or questions to the local standards chair or designated ACA staff member.
3. Provide information in the Review or Appeal Process, as requested or needed.
4. Complete an evaluation after the completion of each assigned visit.
5. Maintain active visitor status.\*

\*To maintain active visitor status: Visitors are expected to attend and complete Visitor Update Course and/or Refresher at least once every three years or as required by the NSC, and assist with one or more visits at least every other year. Also, must maintain current ACA individual membership.

### **When Serving the Role of Second Visitor**

1. If serving in the role of second visitor prior to the site visit:
  - a. Assist the lead visitor and designated camp contact in evaluating all aspects of the camp operation.
  - b. Review documentation for the Camp Self-Assessment, when possible.
2. Fully participate with the assigned visitor team in the on-site standards visit:
  - a. Observe all aspects of camp operation and interpret the standards as related to each camp visited.
  - b. Assist lead visitor by scoring each standard "Yes," "No," or "DNA" on the Score Form, and ensuring all comments are recorded.
  - c. Inform the camp director/administrator of the responses as they are recorded.
  - d. When appropriate, as a member of the visit team, provide feedback that will aid the camp personnel in developing and sharpening their own observation skills of their own program as related to the standards.

### **When Serving as the Lead Visitor**

1. Take the lead on communicating with the camp's standards contact.
2. Thoroughly review the Camp Information Form and verify with camp's standards contact it is accurate.
3. Make arrangements for and complete the review of the Camp Self-Assessment by required deadline.

4. Coordinate the date and details of the on-site visit by the required deadline with the camp's standards contact and other visit team members by the required deadline.
5. Determine how the visit will be conducted (e.g., with visitors viewing separate areas, as a team).
6. Assume ultimate authority on matters related to scoring and compliance.
7. Ensure the score form, including any comments, is complete and accurate. Review the score form with the camp director or standards contact and the second visitor, securing all required signatures.
8. When necessary, complete the ICA Response Form and follow through with the ICA process.
9. Immediately following the visit, mail all required visit materials using the provided envelope.
10. Consider serving as a visitor mentor (if requested).

**Additional responsibilities and competencies, if serving as a Visitor Mentor**

1. Discuss with the standards chair (or designated local contact) appropriate goals for the associate visitor assigned to you.
2. Plan the visit to help the associate visitor gain new experiences and increase skills.
3. Evaluate the visit and provide performance feedback to the associate visitor, both positive and corrective, as soon as possible after a visit.
4. Share the associate visitor's progress with the designated local person.

**Additional responsibilities and competencies if serving as a mentor of camps, as a Camp Self-Assessment (CSA) Visitor or Annual Accreditation Report (AAR) reviewer**

*Depending on the task of serving as a mentor, CSA Visitor or AAR reviewer mostly occurs between January and May.*

1. Demonstrate skill and comfort with use of technology to include both web-based and cloud based systems
2. Analyze and educate through review of written and oral materials.
3. Problem solve and apply standards interpretations.
4. Provide feedback to the camp that advances the education aspect of the accreditation process.

**Conflict of Interest Statement for ACA Standards Volunteers*****FROM GUIDING PRINCIPLES – LCOL – LO-8:***

6. All standards volunteers (associate visitors, visitors, instructors, trainers) will reveal any conflicts of interest with regard to their role in serving as a standards volunteer. Individuals will recuse themselves from participating in discussions and decisions relevant to their conflict of interest.
7. All standards volunteers must not use their positions to obtain ACA employment for themselves, family members, or close associates. No volunteer may serve as a compensated staff member of ACA, Inc. or one of its Affiliates.
8. All standards volunteers will not disclose or discuss with another person or entity, or to use for their own purpose, confidential or proprietary information gained through their volunteer work for ACA (e.g., accreditation approval issues).
9. All standards volunteers will not receive compensation for their work. However, volunteers can be reimbursed for expenses related to participation in meetings and for other expenses incurred for the benefit of the field office or affiliate.
10. All standards volunteers will not use the intellectual property (IP) of ACA to further any personal interests; or purport or imply ACA's IP to be their own. This includes all information in ACA's database, knowledge center products and services, logos, and any other statements or educational materials created by or for the American Camp Association.

### **Background Legal Information**

#### **Are visitors covered by any ACA insurance?**

ACA carries insurance which protects our organization and its agents.

This policy **covers LCOL officers, standards visitors and associate visitors.**

- Professional Liability: Should the individual officer, employee, board member or standards visitor be found individually negligent in carrying out ACA's business, ACA's insurance policy will cover the cost of damages found by the court that have resulted from independent acts by the official up to \$5,000,000. In the event of such a suit, it will pay attorney's fees for the defense of both the ACA representative and the corporation.
- Accidents and medical care: Should the ACA volunteer or employee become ill or injured while carrying out ACA business, partial coverage may be available as well. Contact ACA to determine coverage (765.349.3518).

We anticipate that if visitors carefully check documentation and/or facts by **following the guidelines** in the Compliance Demonstration statements, the **likelihood of negligent action is remote.**

#### **What is not covered?**

Neither the insurance policy nor ACA can protect a visitor from:

- **Libel or slander** that damages an individual. (An example would be if a visitor knowingly mis-scored items to ensure non-accreditation of a competitor and spoke to parents about the weaknesses of the camp.)
- **Deliberate dishonesty**. (An example would be if a visitor deliberately marked an item "yes" when there was no evidence, or the evidence indicated the answer should be "no.")

#### **Have ACA visitors ever been subpoenaed?**

Yes, in a very few instances. In such situations, ACA's insurer has provided legal counsel.

#### **Has an ACA visitor ever been sued based on their performance as a visitor?**

No.



### **Developing Your “Observation Eyes”: Questions to Ask When You Can’t See an Activity in Operation**

Sometimes an activity is not occurring on the day of the visit. For example, it could be a program that is offered on a different day or even a different session, or it could be that the activity is a part of the non-summer operations. The following questions could serve as good “starter” points to help you understand how the camp meets the standards for these activities.

#### **On site:**

- Tell me a little bit about how you offer (activity).
- Is (activity) available to all your users throughout the year or do you have specific times when you offer it?
- Who is “in charge” of (responsible for) the instruction and oversight of the activity? What are their qualifications?
- Who gets to participate in (activity)? Any special requirements or equipment adaptations?
- What kinds of emergency procedures are followed?
- Is (activity) available to user groups? Can they bring their own “leaders/instructors”?



#### **Off-site:**

- Who is “in charge” of (activity)? What are their qualifications?
- What emergency procedures are in place if something should happen?
- How are the campers supervised and by whom?
- How did you share the standards related to (activity) with them and what kinds of things did you talk over with them?
- Describe the facility/site where (activity) occurs.
- What kinds of instructions have campers been given regarding their behavior with the public, emergency situations, and participation?

You certainly do not need to ask all of these questions, but they should help you begin the conversation about an activity that you can not personally observe. As you become more experienced, you will develop your own questions that help you develop your “Visitor Eyes” even when unable to do the actual observations!



## CAMP INFORMATION FORM FOR 2017 ACCREDITATION VISIT

**This form must be completed by any camp requesting a visit in 2017.** Return this 2-page form by February 1, 2017. When the visit is assigned, this form will be available to you and to the visitors via a link in the visitor assignment e-mail. The information collected will be used only for arranging the visit. To update your camp's contact information, contact [accreditation@ACAamps.org](mailto:accreditation@ACAamps.org).

<b>CAMP INFORMATION</b>	
Camp Name:	ACA Camp ID #:
Name of Operating Organization, if different:	
Camp Director Name:	
Camp Website:	
Office/Winter Physical Address:	
Camp/Summer Physical Address, if different:	
Does your camp operate at more than one site during the summer, excluding trip/travel programs or field trips? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, include a list of the locations for ALL sites.)	
<b>STANDARDS COURSE/STANDARDS UPDATE COURSE must be <u>after</u> September 1, 2014, for a 2017 visit.</b>	
Name of person(s) completing course on behalf of camp:	
Standards Course Type: <input type="checkbox"/> Online <input type="checkbox"/> Virtual (webinar with live instructor) <input type="checkbox"/> In person (location: _____)	
Date of Course Completion:	
<b>ACCREDITATION VISIT ARRANGEMENTS</b>	
Arrange Camp Visit with (name):	Position at Camp:
Phone:	E-mail:
Date Camp Staff Training begins:	Camp SEASON Dates:
A visit should be scheduled when camp is operating on its regular schedule, and when as many activities can be observed as possible. Please list/describe any dates that would <u>not</u> work for your on-site visit (changeover days, trip days, visiting days, etc.)	
<b>CAMP SELF-ASSESSMENT REVIEW</b>	
<b>The camp must compile the Camp Self-Assessment Review standards and have them reviewed by the visitor by May 1.</b>	
Are your camp's written documents (please check one): <input type="checkbox"/> Paper <input type="checkbox"/> Electronic <input type="checkbox"/> Both	
What is your preferred method for conducting the Camp Self-Assessment Review? <input type="checkbox"/> Via the My Accreditation web portal <input type="checkbox"/> In person <input type="checkbox"/> E-mail or other electronic means <input type="checkbox"/> Postal mail	
When will your materials be prepared for your Camp Self-Assessment Review? <input type="checkbox"/> My materials are ready now <input type="checkbox"/> Late February <input type="checkbox"/> Early March <input type="checkbox"/> Late March <input type="checkbox"/> Early April <input type="checkbox"/> Late April	

Which modes of operation will be scored on your visit? (Refer to pp. 23-24 of the *Accreditation Process Guide 2012 Edition* for more information.)

☐ Day Camp   ☐ Resident Camp   ☐ Short-Term Residential   ☐ Camps that Rent to Others

Which program areas will be scored on your visit?

☐ Specialized Activities (*see page 2 of this form*)   ☐ Aquatics (ANY swimming or watercraft activities) (*see page 2 of this form*)

☐ Trip and Travel (three nights or more)

Do you **primarily** serve campers with any special needs or special medical needs?   ☐ Yes   ☐ No

Does your camp operate on a site/property that already has ACA accreditation?   ☐ Yes   ☐ No

If yes, what is the name/ACA camp ID # of your host camp/landlord?

**Please return this form to [accreditation@ACAcamps.org](mailto:accreditation@ACAcamps.org) by February 1, 2017.**  
**Or mail to: American Camp Association, 5000 State Road 67 North, Martinsville, IN 46151**

Camp Name:	ACA Camp ID #:
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### Specialized Activities

**An activity is considered a specialized activity if:**

- It requires the use of equipment, animals, or tools whose use by campers requires supervision by a person skilled in their use;
- It involves camper use of fire or of heat-producing equipment or substances;
- It requires injury protection equipment, such as helmets, goggles, or padding; or
- It requires a specialized skill set or knowledge to do the activity safely.

Refer to pp. 147-148 of the *Accreditation Process Guide 2012 Edition* for more information on specialized activities.

Check the boxes for any specialized activities offered at your camp. This list is not exhaustive. List any additional specialized activities that are part of your camp program in the spaces provided.

<input type="checkbox"/> All-Terrain Vehicles (ATVs)	<input type="checkbox"/> Knife, Axe, or other Tool Use
<input type="checkbox"/> Archery	<input type="checkbox"/> Lacrosse
<input type="checkbox"/> Aviation	<input type="checkbox"/> Llama Trekking
<input type="checkbox"/> Backpacking	<input type="checkbox"/> Martial Arts
<input type="checkbox"/> Bicycling/Biking	<input type="checkbox"/> Motorized Sports
<input type="checkbox"/> Campcraft/Camping Skills/Outdoor Living Skills (knife, axe, or other tool use)	<input type="checkbox"/> Mountain Boarding
<input type="checkbox"/> Camp Stove (use by campers)	<input type="checkbox"/> Paintball
<input type="checkbox"/> Caving	<input type="checkbox"/> Power Tools
<input type="checkbox"/> Ceramics/Pottery/Enameling	<input type="checkbox"/> Pyrotechnics
<input type="checkbox"/> Challenge Course/Ropes Course (high or low elements requiring spotting)	<input type="checkbox"/> Rocketry
<input type="checkbox"/> Cheerleading with Stunts	<input type="checkbox"/> Shooting Sports (riflery, air rifle, pellet guns, etc.)
<input type="checkbox"/> Circus Arts in the Air (trapeze, tightrope, etc.)	<input type="checkbox"/> Skating (board, ice, in-line, roller)
<input type="checkbox"/> Climbing/Rappelling	<input type="checkbox"/> Snow Sports (boarding, skiing, sledding/tubing)
<input type="checkbox"/> Competitive Sports	<input type="checkbox"/> Specific Sport-focused program (basketball camp, soccer camp, etc.)
<input type="checkbox"/> Edible Plants	<input type="checkbox"/> Wood-burning Tools
<input type="checkbox"/> Fencing	<input type="checkbox"/> Woodworking
<input type="checkbox"/> Fire-building (by campers)	<input type="checkbox"/> Wrestling
<input type="checkbox"/> Go-Karts	<input type="checkbox"/> Other (please list):
<input type="checkbox"/> Gymnastics (tumbling, using apparatus)	_____
<input type="checkbox"/> Hockey (broom, ice, roller)	_____
<input type="checkbox"/> Horseback Riding (English, western, pony rides)	_____
<input type="checkbox"/> Ice Fishing	_____

### Aquatic Activities

Please use the space below to list all aquatic activities offered at your camp. Examples include recreational and instructional swimming or boating, water-skiing, wake-boarding.

\_\_\_\_\_

If your camp has previously been ACA-accredited, what activities have been added since your last accreditation visit?

\_\_\_\_\_



## CAMP INFORMATION FORM FOR 2017 ACCREDITATION VISIT

Page 1 of 2

**This form must be completed by any camp requesting a visit in 2017.** Return this 2-page form by February 1, 2017. When the visit is assigned, this form will be available to you and to the visitors via a link in the visitor assignment e-mail. The information collected will only be used for arranging the visit. To update your camp's contact information, contact [accreditation@acacamps.org](mailto:accreditation@acacamps.org).

<b>CAMP INFORMATION</b>	
Camp Name: Camp Have Lots of Fun	ACA Camp ID #: 99900009
Name of Operating Organization, if different: Lots of Fun Foundation	
Camp Director Name: Graham Kracker	
Camp Website: <a href="http://www.lotsoffun.org">www.lotsoffun.org</a>	
Office/Winter Physical Address: P.O. Box 123, Funville, IN 11122	
Camp/Summer Physical Address, if different (no PO Boxes): 101 Campfire Lane, Woodsville, IN 11222	
Does your camp operate at more than one site during the summer, excluding trip/travel programs or field trips? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, include a list of the locations for ALL sites.) NA	
<b>STANDARDS COURSE/STANDARDS UPDATE COURSE (must be after September 1, 2014, for a 2017 visit)</b>	
Name of person(s) completing course on behalf of camp: Graham Kracker and Marsha Mellow	
Standards Course Type: <input type="checkbox"/> Online <input type="checkbox"/> Virtual (webinar with live instructor) <input checked="" type="checkbox"/> In person (location: Bradford Woods)	
Date of Course Completion: October 21	
<b>ACCREDITATION VISIT ARRANGEMENTS</b>	
Arrange Camp Visit with (name): Marsha Mellow	Position at Camp: Site Director
Phone: 555-444-3333	E-mail: <a href="mailto:marshamallow@lotsoffun.org">marshamallow@lotsoffun.org</a>
Date Camp Staff Training Begins: July 1	Camp SEASON Dates: July 8 Through July 21
A visit should be scheduled when camp is operating on its regular schedule, and when as many activities can be observed as possible. Please list/describe any days that would <u>not</u> work for your on-site visit (changeover days, trip days, visiting days, etc.). July 8 or July 21	
<b>CAMP SELF-ASSESSMENT REVIEW</b>	
<b>The camp must compile the Camp Self-Assessment Review standards and have them reviewed by the visitor by May 1.</b>	
Are your camp's written documents (please check one): <input type="checkbox"/> On paper <input type="checkbox"/> Electronic <input checked="" type="checkbox"/> Both	
What is your preferred method for conducting the Camp Self-Assessment Review? <input checked="" type="checkbox"/> Via the My Accreditation web portal <input type="checkbox"/> In person <input type="checkbox"/> E-mail or other electronic means <input type="checkbox"/> US Mail	
When will your materials be prepared for your Camp Self-Assessment Review? <input type="checkbox"/> Ready Now <input type="checkbox"/> Late February <input checked="" type="checkbox"/> Early March <input type="checkbox"/> Late March <input type="checkbox"/> Early April <input type="checkbox"/> Late April	
Which MODES of Operation will be scored on your visit? (Refer to pages 23–24 of the <i>Accreditation Process Guide 2012 Edition</i> for more information.) <input type="checkbox"/> Day Camp <input checked="" type="checkbox"/> Resident Camp <input type="checkbox"/> Short-Term Residential <input type="checkbox"/> Camps that Rent to Others	
Which Program areas will be scored on your visit? <input checked="" type="checkbox"/> Specialized Activities (see page 2 of this form) <input checked="" type="checkbox"/> Aquatics (ANY swimming or watercraft activities) (see page 2 of this form) <input type="checkbox"/> Trip and Travel (three nights or more)	
Do you <b>primarily</b> serve campers with any special needs or special medical needs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Does your camp operate on a site/property that already has ACA accreditation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the name/ACA camp ID # of your host camp/landlord? 678901 Camp Happy Days	
Please return this form to <a href="mailto:accreditation@acacamps.org">accreditation@acacamps.org</a> by <b>February 1, 2017</b> . Or mail to: American Camp Association, 5000 State Road 67 North, Martinsville, IN 46151	

Camp Name: Camp Have Lots of Fun

ACA Camp ID #: 99900009

## Specialized Activities

### An activity is considered a specialized activity if:

- It requires the use of equipment, animals, or tools whose use by campers requires supervision by a person skilled in their use;
- It involves camper use of fire or of heat-producing equipment or substances;
- It requires injury protection equipment, such as helmets, goggles, or padding; OR
- It requires a specialized skill set or knowledge to do the activity safely.

Refer to pp. 147–148 of the *Accreditation Process Guide 2012 Edition* for more information on specialized activities.

Check the box for any specialized activities offered at your camp. This list is not exhaustive. List any additional specialized activities that are part of your camp program in the spaces provided.

- |  |  |
|--|--|
| <input type="checkbox"/> All-Terrain Vehicles (ATVs)   | <input type="checkbox"/> Knife, Axe, or Other Tool Use                                       |
| <input checked="" type="checkbox"/> Archery  | <input type="checkbox"/> Lacrosse  |
| <input type="checkbox"/> Aviation  | <input type="checkbox"/> Llama Trekking  |
| <input type="checkbox"/> Backpacking   | <input type="checkbox"/> Martial Arts  |
| <input type="checkbox"/> Bicycling/Biking  | <input type="checkbox"/> Motorized Sports  |
| <input checked="" type="checkbox"/> Campcraft/Camping Skills/Outdoor Living Skills (knife, axe, or other tool use) | <input type="checkbox"/> Mountain Boarding   |
| <input type="checkbox"/> Camp Stove (use by campers)   | <input type="checkbox"/> Paintball   |
| <input type="checkbox"/> Caving  | <input type="checkbox"/> Power Tools   |
| <input type="checkbox"/> Ceramics/Pottery/Enameling  | <input type="checkbox"/> Pyrotechnics  |
| <input checked="" type="checkbox"/> Challenge Course/Ropes Course (high or low elements requiring spotting)        | <input type="checkbox"/> Rocketry  |
| <input type="checkbox"/> Cheerleading with Stunts  | <input checked="" type="checkbox"/> Shooting Sports (riflery, air rifle, pellet guns, etc.)  |
| <input type="checkbox"/> Circus Arts in the Air (trapeze, tightrope, etc.)   | <input type="checkbox"/> Skating (board, ice, in-line, roller)                               |
| <input type="checkbox"/> Climbing/Rappelling   | <input type="checkbox"/> Snow Sports (boarding, skiing, sledding/tubing)                     |
| <input type="checkbox"/> Competitive Sports  | <input type="checkbox"/> Specific Sport-Focused Program (basketball camp, soccer camp, etc.) |
| <input type="checkbox"/> Edible Plants   | <input type="checkbox"/> Wood-Burning Tools  |
| <input type="checkbox"/> Fencing   | <input checked="" type="checkbox"/> Woodworking  |
| <input type="checkbox"/> Fire-building (by campers)  | <input type="checkbox"/> Wrestling   |
| <input type="checkbox"/> Go-Karts  | <input checked="" type="checkbox"/> Other (please list): Hayrides                            |
| <input type="checkbox"/> Gymnastics (tumbling, using apparatus)  | _____  |
| <input type="checkbox"/> Hockey (broom, ice, roller)   | _____  |
| <input checked="" type="checkbox"/> Horseback Riding (English, western, pony rides)                                | _____  |
| <input type="checkbox"/> Ice Fishing   | _____  |

## Aquatic Activities

Please use the space below to list all aquatic activities offered at your camp. Examples include recreational and instructional swimming or boating, waterskiing, wakeboarding, etc.

Swimming

Swimming Lessons

\_\_\_\_\_  
\_\_\_\_\_

If your camp has previously been ACA-accredited, what activities have been added since your last accreditation visit?

None

### Camp Self-Assessment Directions

***A camp self-assessment is a required review of the written documentation for twenty pre-identified standards and must be completed prior to the start of staff training for the summer season. Your local office might require an earlier completion date***

**Purpose:** A camp self-assessment review (CSA) prior to the actual day of the visit is an important element of the educational process of the standards program. The review of the self-assessment may be completed person-to-person in the months prior to the start of the summer camp season, or the review can be done by mail, or electronic exchange of documentation, with a phone follow-up. Some documentation might also be viewed on a camp's website (such job descriptions, transportation information for parents, etc.).

This form lists all standards included in the required self-assessment review. The purpose of the self-assessment is to:

- A. Educate the camp director/administrator on the adequacy of the camp's paperwork BEFORE the on-site visit and scoring. While the intent is for the standard response to be complete, this review still provides the camp with the opportunity to ask questions and make needed corrections prior to the on-site visit which is when the actual scoring will occur.
- B. Reduce the time needed to review all the documentation during the on-site visit, thus allowing more time for observation and discussion.
- C. Help verify the camp is ready for their on-site visit to occur.

**Below is a list of the standards included in the required self-assessment.**

TR.5 Transportation Information for Parents	OM.15 Rental Group Responsibilities
TR.7 Accident Procedures	HR.3 Hiring Policies
TR.8 Safety Procedures	HR.6 Job Descriptions/Information
TR.15 Training for Drivers	HR.7 Personnel Policies
OM.1 Risk Management	HR.8 Camper Supervision Ratios and Staff Age
OM.4 Personal Property Policy	HR.9 Supervision Ratio Exceptions
OM.8 Emergency Plan and Rehearsal	HR.17 Behavior Management and Discipline
OM.10 Missing Person Procedure	PD.1 Camp Goals and Outcomes
OM.11 Emergency Communications	PD.4 Program Eligibility
OM.14 Rental Group Agreement	PD.6 Activity Information and Permission

#### Directions for completing the form

1. If all the needed documentation is seen and is acceptable, mark the box under "SEEN."
2. If none of the documentation is seen, mark the box under "NOT SEEN."

3. If the standard requires implementation of the policy, verification of practice, confirmation of certified personnel, etc., mark the third column "SEEN AND NEEDS ADDED VERIFICATION."
4. If some of the documentation is not completed or changes must be made, write a description of what must be completed or changed in the space under "FOLLOWING MUST BE COMPLETED." Also use this area to write any reminders of what should be seen at camp.
5. Any standard that does not apply at all to the camp operation can be marked DNA (does not apply).
6. Upon completion of the form, a copy should be made for the camp. **The visitor keeps the original.** Remind the camp that all required paperwork must be on site at the visit.
7. **Actual scoring is done at the time of the on-site visit.** On the day of the visit, after verifying compliance through observation, "SEEN" items can be marked YES on the score form. Score all others according to what is seen during the on-site visit.
8. A visitor other than the assigned on-site visitors may complete this self-assessment form. In that case, the form will be forwarded to the on-site visitors.

## Camp Self-Assessment Worksheet

Standard	Name/Title	Seen	Not Seen	Seen and Needs Added Verification	Following MUST Be completed	Comments – Visitor and/or Director
TR.5.1	Transportation Information for Parents					
TR.7.1	Accident Procedures					
TR.8.1	Safety Procedures					
TR.15.1	Training for Drivers					
OM.1.1	Risk Management - Identified and Analyzed					
OM.1.2	Risk Management					



## Camp Self-Assessment Worksheet

Standard	Name/Title	Seen	Not Seen	Seen and Needs Added Verification	Following MUST Be completed	Comments – Visitor and/or Director
OM.4.1	Personal Property Policy					
OM.8.1	Emergency Plan and Rehearsal					
OM.10.1	Missing Person Procedure					
OM.11.1	Emergency Communications - System To and From Incident					
OM.11.2	Emergency Communications - Contacting Parents					
OM.11.3	Emergency Communications - Media					
OM.14.1	Rental Agreement					
OM.15.1	Rental Group Responsibilities					
HR.3.1	Hiring Policies - Application and Screening Processes					

## Camp Self-Assessment Worksheet

Standard	Name/Title	Seen	Not Seen	Seen and Needs Added Verification	Following MUST Be completed	Comments – Visitor and/or Director
HR.3.2	Hiring Policies - Policies Reviewed					
HR.3.3	Hiring Policies - Screening Requirements for Year-Round Staff					
HR.6.1	Job Descriptions/Information					
HR.7.1	Personnel Policies					
HR.8.1	Camper Supervision Ratios and Staff Age - In General					
HR.8.2	Camper Supervision Ratios and Staff Age - 80% > 18 yrs.					
HR.8.3	Camper Supervision Ratios and Staff Age - Staff Minimum Age					
HR.9.1	Supervision Ratio Exceptions - General Ratios					
HR.9.2	Supervision Ratio Exceptions - Minimum of Two Requirements					

## Camp Self-Assessment Worksheet

Standard	Name/Title	Seen	Not Seen	Seen and Needs Added Verification	Following MUST Be completed	Comments – Visitor and/or Director
HR.17.1	Behavior Management and Discipline - Teach Campers Skills					
HR.17.2	Behavior Management and Discipline - Bullying					
HR.17.3	Behavior Management and Discipline - Fair and Consistent Discipline					
PD.1.1	Camp Goals and Outcomes - Overall Goals					
PD.1.2	Camp Goals and Outcomes - Behavioral Outcomes					
PD.1.3	Camp Goals and Outcomes - Training for Staff					
PD.1.4	Camp Goals and Outcomes - Informed Parents					
PD.4.1	Program Eligibility					
PD.6.1	Activity Information and Permission					

## Camp Self-Assessment Worksheet

Standard	Name/Title	Seen	Not Seen	Seen and Needs Added Verification	Following MUST Be completed	Comments – Visitor and/or Director
<i>Do you offer any activities that are conducted by others (a third-party/non-camp staff)?</i>					If so, please list:	

Notes:

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Visitor: \_\_\_\_\_

Phone: \_\_\_\_\_

Visitor: \_\_\_\_\_

Phone: \_\_\_\_\_

Camp Representative: \_\_\_\_\_ Date: \_\_\_\_\_

PD Score Form Activity Worksheet  
Ropes Course Interview

Mode(s) of Operation – Check all that apply

- ☐ Day Camp ☒ Resident Camp  
☒ Short-term residential ☐ Rental group



PD - Program Design and Activities				DNA
PD.1.1	Camp Goals and Outcomes - Overall Goals	YES	NO	DNA
PD.1.2	Camp Goals and Outcomes - Behavioral Outcomes	YES	NO	DNA
PD.1.3	Camp Goals and Outcomes - Training for Staff	YES	NO	DNA
PD.1.4	Camp Goals and Outcomes - Informed Parents	YES	NO	DNA
PD.2.1	Camp Experience Evaluation	YES	NO	DNA
PD.3.1	Program Progression	YES	NO	DNA
PD.4.1	Program Eligibility	YES	NO	DNA
PD.5.1	Social Development	YES	NO	DNA
PD.6.1	Activity Information and Permission	YES	NO	DNA
PD.7.1	Environmental Activities	YES	NO	DNA
PD.8.1	Program Equipment Maintenance and Safety Checks - Checked, Good Repair, Storage	YES	NO	
PD.8.2	Program Equipment Maintenance and Safety Checks - Removal of Equipment	YES	NO	
PD.8.3	Program Equipment Maintenance and Safety Checks - Size and Ability	YES	NO	DNA
PD.8.4	Program Equipment Maintenance and Safety Checks - Prior to Each Use	YES	NO	DNA
PD.8.5	Program Equipment Maintenance and Safety Checks - Records of Maintenance	YES	NO	DNA
<b>PD.9.1</b>	<b>Overnights and Trips (includes Trip/Travel Programs) - Camp Stoves and Flammables</b>	YES	NO	DNA
PD.9.2	Overnights and Trips (includes Trip/Travel Programs) - Drinking Water	YES	NO	DNA
PD.9.3	Overnights and Trips (includes Trip/Travel Programs) - Safe Food Handling	YES	NO	DNA
PD.9.4	Overnights and Trips (includes Trip/Travel Programs) - Food Utensils	YES	NO	DNA
PD.9.5	Overnights and Trips (includes Trip/Travel Programs) - Campsites and Natural Areas	YES	NO	DNA
PD.10.1	Emergency Information	YES	NO	DNA
PD.11.1	Details and Designated Person	YES	NO	DNA
	<b>If camp never offers specialized activities, DNA PD.12 to PD.37, proceed to PD.38</b>			
	<b>If camp ONLY uses SPF for specialized activities, DNA PD.12 to PD.16, proceed to PD.17</b>			
PD.12.1	Supervisor Qualifications	YES	NO	DNA
PD.13.1	Adventure/Challenge Supervisor Qualifications - Certification	YES	NO	DNA
PD.13.2	Adventure/Challenge Supervisor Qualifications - Experience	YES	NO	DNA
PD.14.1	Horseback Riding Supervisor Qualifications - Certification	YES	NO	DNA
PD.14.2	Horseback Riding Supervisor Qualifications - Experience	YES	NO	DNA
PD.14.3	Horseback Riding Supervisor Qualifications - Age	YES	NO	DNA
PD.15.1	Staff Skill Verification	YES	NO	DNA
PD.16.1	Supervision of Activity Leaders	YES	NO	DNA
PD.17.1	First-Aider	YES	NO	DNA
PD.18.1	Safety Orientation	YES	NO	DNA
PD.19.1	Competency Demonstration	YES	NO	DNA
PD.20.1	Access of Specialized Activity Areas	YES	NO	DNA
PD.21.1	Spotters and Belayers	YES	NO	DNA
PD.22.1	Supervision Ratios for Specialized Program Activities - Minimum Ratios	YES	NO	DNA
PD.22.2	Supervision Ratios for Specialized Program Activities - Minimum of Two Required	YES	NO	DNA
PD.23.1	Safety and Emergency Procedures	YES	NO	DNA
PD.24.1	Annual Inspection of Adventure/Challenge Course Elements	YES	NO	DNA
<b>PD.25.1</b>	<b>Archery Safety - Range Design</b>	YES	NO	DNA

Score Form Activity Worksheet

<b>PD.25.2</b>	<b>Archery Safety - Safety Signals and Range Commands</b>	YES	NO	DNA
<b>PD.25.3</b>	<b>Archery Safety - Bows/Arrows Locked</b>	YES	NO	DNA
<b>PD.26.1</b>	<b>Rifle, Pellet Gun, and Air Gun Safety- Guns Locked, Redundant Safety</b>	YES	NO	DNA
<b>PD.26.2</b>	<b>Rifle, Pellet Gun, and Air Gun Safety - Range Design</b>	YES	NO	DNA
<b>PD.26.3</b>	<b>Rifle, Pellet Gun, and Air Gun Safety - Safety Signals and Range Commands</b>	YES	NO	DNA
PD.27.1	Go-Kart Safety	YES	NO	DNA
PD.28.1	ATV Safety	YES	NO	DNA
<b>PD.29.1</b>	<b>Protective Headgear - Bicycling Activities</b>	YES	NO	DNA
<b>PD.29.2</b>	<b>Protective Headgear - Motorized Vehicles</b>	YES	NO	DNA
<b>PD.29.3</b>	<b>Protective Headgear - Adventure/Challenge Activities</b>	YES	NO	DNA
<b>PD.29.4</b>	<b>Protective Headgear - Boarding and Skating</b>	YES	NO	DNA
<b>PD.30.1</b>	<b>Protective Headgear for Horseback Riding - Campers and Staff &lt; 18 yrs.</b>	YES	NO	DNA
<b>PD.30.2</b>	<b>Protective Headgear for Horseback Riding - Campers and Staff &gt; 18 yrs.</b>	YES	NO	DNA
PD.31.1	Safety Apparel - Boarding and Skating	YES	NO	DNA
PD.31.2	Safety Apparel - Horseback Riding: Footwear	YES	NO	DNA
PD.31.3	Safety Apparel - Horseback Riding: Trousers	YES	NO	DNA
PD.31.4	Safety Apparel - Archery	YES	NO	DNA
PD.31.5	Safety Apparel - Firearms Activities	YES	NO	DNA
PD.32.1	Horse and Livestock Medications	YES	NO	DNA
PD.33.1	Pony Rides - Sound Horses	YES	NO	DNA
PD.33.2	Pony Rides - Provide Qualified Assistants	YES	NO	DNA
PD.34.1	Classifying Horses	YES	NO	DNA
PD.35.1	Horse Suitability/Soundness	YES	NO	DNA
PD.36.1	Rider Classification	YES	NO	DNA
PD.37.1	Riding Facilities - Location	YES	NO	DNA
PD.37.2	Riding Facilities - Cleanliness	YES	NO	DNA
	<b>If camp never uses SPF or providers for specialized activities, DNA PD.38 to PD.39</b>		NO	DNA
PD.38.1	Public Providers of Specialized Program Activities	YES	NO	DNA
PD.38.2	Public Providers of Specialized Program Activities - Adventure/Challenge	YES	NO	DNA
PD.38.3	Public Providers of Specialized Program Activities - Horseback Riding	YES	NO	DNA
				DNA
PD.39.1	Camper Supervision with Public Providers	YES	NO	DNA
	<b>If camp never serves rental groups or never provides program equipment or facilities for rental groups, DNA PD.40</b>			
PD.40.1	Rental Groups — Conditions	YES	NO	DNA
				DNA

Mode(s) of Operation – Check all that apply

☐ Day Camp ☒ Resident Camp

☒ Short-term residential ☐ Rental group



### SF - Site and Food Service

If camp uses accredited site, or if camp runs only trip and travel programs, or if camp is a day camp with no base camp that is held each day on different sites, THEN, DNA entire SF section.

SF.1.1	Emergency Exits - In Addition to Main	<del>YES</del>	NO	DNA
SF.1.2	Emergency Exits - From Second Floor	<del>YES</del>	NO	<del>X</del>
SF.2.1	Care of Hazardous Materials	<del>YES</del>	NO	
SF.3.1	Contact with Local Officials	<del>YES</del>	NO	DNA
SF.4.1	Water Testing	<del>YES</del>	<del>NO</del>	DNA
SF.5.1	Utility Systems	<del>YES</del>	NO	DNA
SF.6.1	Electrical Evaluation	<del>YES</del>	NO	DNA
SF.7.1	Facilities in Good Repair	<del>YES</del>	NO	
SF.8.1	Power Tools	<del>YES</del>	NO	DNA
SF.9.1	Fire and Safety Equipment Evaluation	<del>YES</del>	NO	DNA
SF.10.1	Playgrounds	<del>YES</del>	NO	DNA
SF.11.1	Smoke Detectors	<del>YES</del>	NO	DNA
SF.11.2	Carbon Monoxide (CO) Detectors	<del>YES</del>	NO	DNA
SF.12.1	Permanent Sleeping Quarters	<del>YES</del>	NO	DNA
SF.13.1	Bunk Guardrails	YES	<del>X</del>	DNA
SF.14.1	Handwashing Facilities	<del>YES</del>	NO	DNA
SF.15.1	Food Service Areas	<del>YES</del>	NO	DNA
SF.16.1	Refrigeration	<del>YES</del>	NO	DNA
If NO Food Service is offerered, DNA SF.17 to SF.21				DNA
SF.17.1	Food Service Supervisor	<del>YES</del>	NO	
SF.18.1	Food Temperatures	<del>YES</del>	NO	
SF.19.1	Sanitized Utensils and Surfaces	<del>YES</del>	NO	
SF.20.1	Dish Washing	<del>YES</del>	NO	
SF.21.1	Dish Drying and Storage	<del>YES</del>	NO	
If Rental Groups do NOT use kitchen, DNA SF.22 to SF.23				<del>X</del>
SF.22.1	Food Handling Procedures	<del>YES</del>	NO	
SF.23.1	Dishwashing Procedures	<del>YES</del>	NO	

**Standards #**      **Comments/Initial** by visitor (VIS) or director (CD)

SF 4.1      72 hour given for water test results no at camp. Director faxed them in with in 72 hours. Changed to YES KB

	TR - Transportation			
TR.1.1	Medical Emergency Transportation	X	NO	DNA
TR.2.1	Nonpassenger Vehicles	X	NO	
TR.3.1	Private Vehicle Use	X	NO	DNA
TR.4.1	Arrival and Departure	X	NO	
If NO transportation is provided by camp, DNA TR.5-TR.11				X
TR.5.1	Transportation Information for Parents	YES	NO	DNA
TR.6.1	Supervision	YES	NO	
TR.7.1	Accident Procedures	YES	NO	
TR.8.1	Safety Procedures	YES	NO	
TR.9.1	Transportation Orientation	YES	NO	
TR.10.1	Emergency Equipment	YES	NO	
TR.11.1	Leased, Rented, or Chartered Vehicles	YES	NO	DNA
If camp NEVER provides drivers, DNA TR.12 to TR.15				
TR.12.1	Mechanical Evaluations	X	NO	DNA
TR.13.1	Safety Checks - Tires	X	NO	
TR.13.2	Safety Check - List	X	NO	
TR.14.1	Driver Requirements	X	NO	DNA
TR.15.1	Training for Drivers	X	NO	

**Standards #**    **Comments/Initial** by visitor (VIS) or director (CD)

TR Scored but no vehicles were seen-VIS



HW - Health and Wellness				DNA
HW.18 to HW.25. (Everyone answers HW.17)				
HW.1.1	Healthcare Provider - Day Camps	YES	NO	<del>X</del>
HW.1.2	Healthcare Provider - Resident Camps	<del>X</del>	NO	DNA
HW.1.3	Healthcare Provider - Special Medical Needs C	<del>X</del>	NO	<del>X</del>
HW.1.4	Healthcare Provider - Nonmedical Religious Ca	YES	NO	<del>X</del>
<b>HW.2.1</b>	<b>First-Aid and Emergency Care Personnel &lt;</b>	<del>X</del>	NO	DNA
<b>HW.2.2</b>	<b>First-Aid and Emergency Care Personnel &gt;</b>	YES	NO	<del>X</del>
<b>HW.2.3</b>	<b>First-Aid and Emergency Care Personnel - I</b>	<del>X</del>	NO	DNA
HW.3.1	Away from Main Camp	YES	NO	<del>X</del>
HW.4.1	Staff Training	<del>X</del>	NO	
<b>HW.5.1</b>	<b>Health History</b>	YES	NO	
HW.6.1	Health Exam	<del>X</del>	NO	DNA
HW.7.1	Health Screening for Resident Camps	<del>X</del>	NO	DNA
HW.8.1	Health Information Review and Screening for D	<del>X</del>	NO	DNA
HW.8.2	Health Information Review and Screening for D	<del>X</del>	NO	DNA
HW.9.1	Permission to Treat	<del>X</del>	NO	
HW.10.1	Parent Notification - Info to Parents	<del>X</del>	NO	
HW.10.2	Parent Notification - Documentation of Commu	<del>X</del>	NO	
HW.11.1	Healthcare Policies - Reviewed At Least Every	<del>X</del>	NO	
HW.11.2	Healthcare Policies - Scope and Authority Guid	<del>X</del>	NO	
HW.12.1	Treatment Procedures	YES	NO	<del>X</del>
HW.13.1	Inform Staff of Special Needs	YES	NO	
HW.14.1	Special Medical Needs	<del>X</del>	NO	DNA
HW.15.1	Healthcare Center	<del>X</del>	NO	DNA
HW.16.1	Healthcare Equipment, Supplies, and Emergen	<del>X</del>	NO	
HW.17.1	Availability of an AED	YES	NO	<del>X</del>
HW.18.1	Supervision in Healthcare Center	<del>X</del>	NO	DNA
HW.19.1	Medication Storage and Administration	YES	NO	<del>X</del>
HW.20.1	Contact Information	<del>X</del>	NO	
HW.21.1	Recordkeeping - System	<del>X</del>	NO	
HW.21.2	Recordkeeping - Reports of Incidents	<del>X</del>	NO	
HW.22.1	Record Maintenance	<del>X</del>	NO	
<b>HW.23.1</b>	<b>Staff Health History</b>	YES	<del>X</del>	DNA
HW.24.1	Health Screening for Resident Camp Staff	<del>X</del>	NO	DNA
HW.25.1	Contact Information for Staff Who Are Minors	<del>X</del>	NO	DNA
Resident and Day Camp modes DNA HW.26 to HW.28				
<b>HW.26.1</b>	<b>Emergency Care Personnel</b>	<del>X</del>	NO	
HW.27.1	Healthcare Planning	<del>X</del>	NO	
HW.28.1	Health Information	<del>X</del>	NO	

**Standards #      Comments/Initial by visitor (VIS) or director (CD)**

**HW.23.1** Health history is required for campers, however, it is not required for staff. ICA submitted.

**HW. 11.1** Camp meets standard, but barely.Policies need lots of work-KB

OM - Operational Management				
OM.1.1	Risk Management	X	NO	
OM.1.2	Risk Management - Identified and Analyzed	X	NO	
OM.2.1	Incident Analysis	X	NO	
OM.3.1	Insurance Coverage - General Liability	X	NO	
OM.3.2	Insurance Coverage - Loss on Buildings	X	NO	DNA
OM.3.3	Insurance Coverage - Business Personal Property	X	NO	
OM.3.4	Insurance Coverage - Motor Vehicle	YES	NO	X
OM.3.5	Insurance Coverage - Workers' Comp	X	NO	DNA
OM.3.6	Insurance Coverage - Coverage for Campers	X	NO	DNA
OM.4.1	Personal Property Policy	X	NO	
OM.5.1	Incident Reporting	X	NO	
<b>OM.6.1</b>	<b>Firearms Control</b>	YES	X	DNA
OM.7.1	Intruders	X	NO	
OM.8.1	Emergency Plan and Rehearsal	X	NO	
OM.9.1	Safety Orientation	X	NO	
<b>If camp provides NO D, R, or S Modes, DNA OM.10 to OM.13</b>				
OM.10.1	Missing Person Procedure	X	NO	
OM.11.1	Emergency Communications - System To and From	X	NO	
OM.11.2	Emergency Communications - Contacting Parents	X	NO	
OM.11.3	Emergency Communications - Media	X	NO	
OM.12.1	Campers in Public Areas	X	NO	X
OM.13.1	Camper Security - Release of Minors	X	NO	
OM.13.2	Camper Security - Verification of Absentees	X	NO	
<b>If camp NEVER rents property to others, DNA OM.14 to OM.15</b>				
OM.14.1	Rental Agreement	YES	NO	DNA
OM.15.1	Rental Group Responsibilities	YES	NO	DNA

**Standards #      Comments/Initial comments made by visitor (VIS) or director (CD)**

**OM 4.1**      Originally Scored as a "no" but director added missing element while we were at lunch , so we changed it to "yes". VIS

**OM 6.1**      Maintenance truck has a gun. Vehicle not requested to be locked when weapon is present. VIS

**IMMEDIATE CORRECTIVE ACTION PROCESS**Policy:

For currently accredited camps, Camp Accreditation will become **CONDITIONAL** upon completion of a camp visit during which one or more mandatory standards have been missed. Full accreditation may be restored to a currently accredited camp or granted to an applicant camp **IF** all other accreditation criteria are met and **IF** the camp takes immediate corrective action to come into compliance with the missed mandatory standard(s), provided documentation of the correction is postmarked to the ACA Administrative Office **within seven (7) days** following the visit. Failure to immediately correct missed mandatory standards in the stated time period will result in immediate withdrawal or denial of accreditation.

Procedures:

**The Immediate Corrective Action (ICA) process is used only for missed mandatory standards.**

The mandatory standards are considered essential to the operation of an accredited camp. Non-compliance with just **one** mandatory standard can cause a camp to fail to achieve accreditation. Documentation of correction must be submitted directly to the ACA administrative office **within seven (7) days** of the visit.

If, during a visit, a camp is not in compliance with a mandatory standard:

The **VISITOR** will:

1. Score the standard **NO** on the score form (even if corrected during the visit).
2. Specify on the comment form the reason for scoring **NO**. What is the problem? Why is it a "NO"?
3. Complete the Immediate Corrective Action (ICA) Notification form (see Appendix for sample form), clearly specifying action(s) the camp must take and document **within seven (7) days** to come into compliance. See list of **EXAMPLES OF POSSIBLE CORRECTIONS FOR MISSED MANDATORY STANDARDS**.
4. Submit the ICA Notification Form with the score form to the ACA administrative office, with copies of the ICA Form to the Local Standards Chair and the camp. The visitor will retain the final copy.

**ACA, Inc.** will:

1. Review ICA forms as they come in with score forms to be sure they are clear and appropriate. The lead visitor will be contacted if there is any question on the action specified.
2. Copy documentation submitted by the camp and send it to the lead visitor, along with a copy of the score form and an ICA Response form.

The **VISITOR** will:

1. Evaluate whether or not the action taken and documented corrects the non-compliance with the mandatory standard. Since **the visitor** scored the mandatory standard **NO** based on observations and discussions on the day of the visit, **the visitor** should evaluate whether or not the action taken brings the camp into compliance with the standard. Sometimes, the required immediate action may involve a change in policy or procedure, or perhaps the camp is very near the end of the season, with little opportunity to operate in compliance with the mandatory standard. In such cases, the visitor may recommend to the LCOL that, in addition to immediate action specified, some documentation of continued compliance the next season be required.

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2. Complete and sign the ICA Response Form and send it to the Local Standards Chair along with the score form copy and all documentation related to the missed mandatory standard(s).

The **LOCAL STANDARDS COMMITTEE** will:

1. Make the accreditation recommendation to the LCOL/Board, based on the Visitor's recommendation indicated on the ICA Response Form.
  - A. If the visitor indicates that "YES" the camp achieved compliance with the missed mandatory standard(s), the Standards Committee will recommend accreditation in the same manner as they would have had the camp met all mandatory standards at the time of the visit.
  - B. If the visitor indicates "YES", but recommends documentation of continuing compliance the following season, the Standards Committee may recommend that the LCOL/Board:
    - 1) Accredite the camp (assuming all other criteria are met).
    - 2) Accredite the camp and require documentation of continued compliance with missed mandatory standard(s) the following season, for Accreditation to continue.  
*e.g. The camp had just two trips, both completed before the visit. Both trips had been led by staff members who had training, but no certification in first aid. The visitor required the camp to submit a signed statement that all future trips would have a properly certified leader. The LCOL/Board may want to ask for documentation of certification of trip leaders before trips go out the next season.*
    - 3) Accredite the camp but require a full visit the following season.  
*e.g. During a visit the last week of camp, the camp missed 4 mandatory standards. They subsequently corrected all of them, but the LCOL/Board may feel that a full re-visit the next season is justified.*
  - C. If the visitor indicates "NO", the documentation submitted does not indicate that the camp has achieved compliance with the missed mandatory standard(s), the Standards Committee should recommend that the camp not be accredited.
  - D. If the visitor indicates "Other", the Local Standards Committee may review the information and make an appropriate recommendation to the LCOL/Board.
2. Notify the camp of the decision made by the LCOL/Board, and, if necessary, inform the camp of the Review and Appeal process.
3. Complete and sign the ICA Response Form and send it to the National Office with the Final Score Report by **October 10**. Local offices must not retain any documentation once the ICA decision has been made. Documentation for corrections that have been approved may be returned to the camp or destroyed. Documentation supplied for any ICA that is NOT approved should be forwarded on to the ACA administrative office.

**Immediate Corrective Action Worksheet**

The following are typical problems with mandatory standards encountered by visitors during accreditation visits. Fill in the specific wording you would use on the comment form and on the ICA notification form.

1. PD.9.1: Camp stoves are being used on overnights. Campers are operating them, having received no instruction in how to do so. Some procedures are in writing in the camp office.

Comment form:

ICA form:

2. HW.23: Health histories are not available for staff over 18. It is the last week of camp.

Comment form:

ICA form:

3. PA.20.1: There is never a lifeguard or certified instructor supervising boating during free time in the afternoon, though there is a guard for swimming. Water-skiing classes are supervised by an experienced counselor who is not a lifeguard.

Comment form:

ICA form:

4. PA.22. Staff are permitted to go boating alone during their free time if there is craft available. There is no written procedure regarding regulations, and no checkout system is in place.

Comment form:

ICA form:

5. SF.1: There are two second-story sleeping areas in camp that do not have ground level entrances or emergency exits.

Comment form:

ICA form:

## Examples of ICA Corrections for Missed Mandatory Standards

STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
SF.1.1	Emergency Exits	Construct ground level emergency exits or designate appropriate windows with signs. Submit signed and dated statement of action (with implementation date) and photos showing correction in the following buildings: (May includes Yurts if they are permanent structures)
SF.1.2	Emergency Exits	Purchase or construct emergency exit ladder(s) and verify placement in appropriate building(s). Submit signed and dated statement of action (with implementation date) and photos showing correction in the following buildings:  Vacate sleeping quarters, in question, until an appropriate means of escape is secured. Submit statement signed by camp director that upper building or floors are no longer used for sleeping.
SF.2.1	Care of Hazardous Materials	Change or label containers; submit statement of action with photos, include date of implementation, dated and signed by director. (Visitor should clearly state which aspects of 2 and 3 are not adequate).  Relocate flammable or poisonous materials; submit statement of action with photo with photos, include date of implementation, dated and signed by director. (Visitor should clearly state which aspects of 2 and 3 are not adequate).  Change procedures to assure handling only by trained or experienced persons; submit new procedure with a signed and dated statement from the director stating when the procedure was implemented. (The visitor must be specific as to which part(s) of the procedure is inadequate.)
TR.1.1	Medical Emergency Transportation	Submit copy of letter to or confirmation from community service including date of implementation, and make sure director not only signs, but dates the document.  Submit statement signed by director that a vehicle has been designated. The letter might include information such as: where the vehicle is parked, who has access to the keys, where are the keys, what's the process for maintaining the fuel level . . .  Submit copy of procedures provided to user groups that they are required to provide their own emergency transportation. (HW27)
HW.2 (HW.2.1, 2.2, 2.3)	First Aid and Emergency Care Personnel	Submit copy of certification or license of staff person(s) with first aid responsibility and verification of their position. Submit statement of action taken, date of implementation, signed and dated by director. (2.1)  Revise schedule to assure that first aider is always on duty. Submit statement of action taken, date of implementation, signed and dated by director. (2.1)  Submit copy of certification of staff and verification of trip staff responsibility. Submit statement of action taken, date of implementation, signed and dated by director. (2.2)
		Re-staff or reschedule to assure that currently certified staff accompanies all trips; submit verification of action signed and dated by camp director and trip director. (2.2)

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STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
HW.5.1	Camper Health History	Once director has obtained missing forms, or waivers, and/or missing information, he/she is to submit a signed and dated statement attesting to that fact, and the date on which all information was received.
HW.23.1	Staff Health History	Once director has obtained missing forms, or waivers, and/or missing information, he/she is to submit a signed and dated statement attesting to that fact, and the date on which all information was received.
HW.26.1	Emergency Care Personnel	Submit information or contract language advising rental group leaders to provide trained adults for emergency care personnel. Submit statement of action taken, date of implementation, signed and dated by director.
		Provide camp staff certification cards and statement that trained camp staff will be on duty to provide emergency care.
OM.6.1	Firearms Control	Relocate guns and/or ammunition to a locked location; document and submit statement of action taken, photo of secured location, date of implementation, then signed and dated by director.
		Submit statement signed by camp director and that guns have been removed from the site.
HR.4.1 and HR.4.2	Annual Staff Screening: NSOPW and Voluntary Disclosure Statement	Submit statement signed and dated by the camp director, that voluntary disclosure statements have been received from each member of the staff and that a check of the National Sex Offender Public Website (NSOPW) <a href="http://www.nspow.gov">www.nspow.gov</a> is complete for each staff/eligible person, and that <b>both</b> of these actions were completed by what date.
HR.5.1	New Staff Screening	Submit statement signed and dated by the camp director that criminal background checks for all new staff ages 18 and older was completed by what date.
HR.8B.1	One on One Camper/Staff Interaction	Submit copy of camp's training schedule indicating where this is covered and statement from director regarding when and what training occurred related to appropriate supervision and camper/staff interaction
PD.9.1	Overnights and Trips	Cease using camp stoves (and/or flammable liquids) immediately and do not resume until compliance is met (as described below).
		Develop written procedures for the use and care of camp stoves and/or flammables and train persons using the same, using persons qualified to train and supervise.
		Immediately train campers and staff in procedures for use of stoves or flammable liquids; document and submit statement of action including process for supervision until competency is demonstrated.
		Submit procedures and policies in place for the training, supervision and the determination of competency. Director is to date, and sign and indicate that date the procedures and practice were put into place.
PD.26.1	Rifle, Pellet Gun, and Air Gun Safety	Cease activity immediately and until compliance is met (as described below).
		Relocate guns and/or ammunition to a locked location; document and submit statement of action.

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STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
		Submit statement and photos stating and showing compliance with standard and the date that compliance was met. Statement signed and dated by director. Statement will include specific equipment stored and specific type of redundant safely being used (if this is the part not in compliance) and/or the third and separate location/container for all ammunition with a separate key or access system (if this is a part not in compliance). Visitor will state what is required to comply.
PD29.1, 29.2, 29.3, and 29.4	Protective Headgear	Cease activity immediately and do not resume until compliance is met (as described below).
		Submit dated and signed statement of the director that appropriate helmets are required for the activity indicated by visitor. Submit photos of participants in the activity. Director must include date that the requirement was implemented and action that was taken.
PD.30.1	Protective Headgear for Horseback Riding (< 18 yrs. of age)	Cease activity immediately and do not resume until compliance is met (as described below).
		Submit dated and signed statement of the director that the camp requires staff and campers under the age of 18 are required to wear helmets. Include action taken and photos of participants complying with standard, and date practice was implemented.
PD.30.2	Protective Headgear for Horseback Riding (> 18 yrs. of age)	Immediately cease all horseback riding activities until compliance is met.
		Submit dated and signed statement of director that the camp requires campers and staff over the age of 18 to wear helmets. Include action taken and photos of participants complying with standard, and date practice was implemented AND/OR submit document that includes points A - E, with a statement from the director stating that the documents is signed by staff/campers over the age of 18 who elect not to wear helmets. These statements must be dated and signed by director with date requirement was implemented.
PA.3.1	Swim Lifeguard Certification	Cease activity immediately and do not resume until compliance is met (as described below).
		Submit dated and signed statement of director as to action taken and that current lifeguards are required. Submit copy of certifications, and date that requirement was implemented. Visitor must clearly state waterfront activities that are not in compliance.
		Re-staff or reschedule to assure that appropriately certified guards are at all aquatic activities; submit documentation of action.



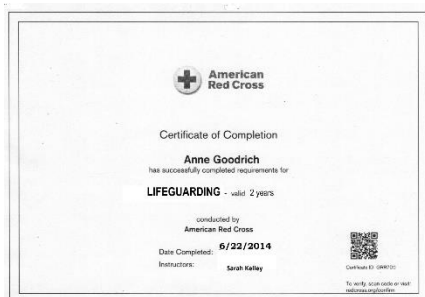
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STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
PA.3.2	Swim Lifeguard Certification	Submit document provided rental groups and describe how the information will be shared with already contracted groups stating lifeguard certification requirement. Director submits signed and dated statement of action taken along with above document.
PA.4.1	Swim Lifeguard Skills	Remove lifeguards from duty, without documented verification, until verification is achieved.
		Submit documentation of skill verification for each guard specified by visitor and as specified in standard, specific to the camp's aquatic program. Director also submits dated and signed statement of action taken and date compliance was met.
PA.5.2	First Aid/CPR	Submit copy of certification of staff and verification of responsibility at swimming locations.
		Re-staff or reschedule to assure that currently certified staff is at all aquatic locations; submit documentation of action.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups.
PA.17.1	Staff Swimming	Submit written policy requiring lifeguards and additional procedures as required by standard and as specified by visitor. Director submits signed and dated statement along with policies stating when the policy went into effect.
		Develop policy and procedures; submit written copy. Submit statement, signed and dated by camp director, that all staff use of aquatic facilities follows specified policy and procedures.
PA.18.1, 18.2	SCUBA Diving Activities	Cease activity immediately and do not resume until compliance is met (as described below).
		Submit statement, signed and dated by director, of date correction was implemented. Include copy of certification of staff and verification of their SCUBA responsibilities.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups
PA.20.1, 20.2	Watercraft Guard Certifications	Immediately cease all waterfront activities that are not properly guarded until compliance is met (as described below).
		Submit dated and signed statement of director as to action taken and that current lifeguards are required. Submit copy of certifications, and date that requirement was implemented. Visitor must clearly state watercraft activities that are not in compliance.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups
PA.21.1	Watercraft Rescue Skills	Remove lifeguards from duty, without documented verification, until verification is achieved.
		Submit documentation of skill verification for each guard specified by visitor and as specified in standard, specific to the camp's aquatic program. Director also submits dated and signed statement of action taken and date compliance was met.

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STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
PA.22.1	Watercraft Safety for All-Adult Groups	Submit dated and signed statement of director as to action taken and that current lifeguards are required. Submit copy of certifications, and date that requirement was implemented. Visitor must clearly state watercraft activities that are not in compliance.
		Submit copy of written procedures, safety regulations and a description of the check out system with implementation.
		Submit copy of information to be provided to rental groups and describe how the information will be shared with already contracted groups.
PA.23.1, 23.2	First Aid/CPR	Submit copy of certification of staff and verification of responsibility at watercraft locations.
		Re-staff or reschedule to assure that currently certified staff is at all aquatic locations; submit documentation of action.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups.
		Re-staff or reschedule to assure that currently certified staff is at all aquatic locations; submit documentation of action.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups
PA.24.1	PFDs	Immediately cease all waterfront activities that are not properly outfitted until compliance is met (as described below).
		Submit statement, signed and dated by camp director that all persons involved in watercraft activities have been retrained and will wear a PFD.
		Submit copy of written information to user group and describe how the information will be shared with already contracted groups
PA.30.1	Public Providers of Swimming	Immediately cease all aquatic activities at public facilities that are not properly guarded; submit verification of action signed by camp director.
		Develop policy on use of staffed public facilities; submit copy.
		Submit proof that facility has currently certified lifeguards and current first aid, CPR and use of AED along with a signed and dated statement of director of action taken and date compliance achieved.
PA.31.1, 31.2	Public Providers of Watercraft Activities	Immediately cease all aquatic activities at public facilities that are not properly guarded and do not resume until compliance is met (as described below); submit verification of action signed by camp director.
		Develop policy on use of staffed public facilities; submit copy.
		Submit proof that facility has currently certified lifeguards and current first aid, CPR and use of AED along with a signed and dated statement of director of action taken and date compliance achieved.
PA.32.1	PFDs Off Site or at Public Aquatic Facilities	Immediately cease all waterfront activities that are not properly outfitted and do not resume until compliance is met (as described below).

STANDARD	HEADING	EXAMPLES OF POSSIBLE CORRECTIVE ACTIONS
		Director submits signed and dated statement of action taken and that PFD's are required, with date of compliance.
PT.5.2	Trip Orientation	Submit statement, signed and dated by camp director, that campers and staff on all trips have (or will) receive the appropriate information and training. Submit a copy of the training outline.
PT.14.1 Score if you have either boating or swimming or both!	Aquatic Supervisor Qualifications	Cease activity immediately and do not resume until compliance is met (as described below).
		Submit statement of action and documentation of skills and training and appropriate certifications. Director submits statement of action, and date of implementation, signed and dated.
PT.18.1	PFDs	Immediately cease all waterfront activities that are not properly outfitted until compliance is met (as described below).
		Director submits signed and dated statement of action taken and that PFD's are required, with date of compliance.

**Samples of Written Documentation****Sample Certification Card****Sample of Entry in Health Care Log:**

7/25: Susan James; headache – no other symptoms and temp. 98.2; Tylenol 1 tab administered per permission of parent, advises to drink lots of water.

**Document A (from a University Department Head)**

“John passed our course in Archery 101 during the spring semester 2016.”

**Document B (from another camp)**

“Rachel was our rocketry director for the past two years. She demonstrated good judgment with campers and was alert for safety considerations.”

(attached note from the director of the camp being visited)

“I have personally interviewed Rachel, and asked her how she would set-up a rocketry area within our camp property and what safety procedures she would follow. I am confident she is prepared to be the senior leader in this activity.”

**Document C (from the program director of the camp being visited)**

“Greg learned his pottery skills as a camper here at Piney woods. When he was a CIT last year, I observed his operation of the kiln under the supervision of the Crafts Director. He was careful at that time, followed the established procedures, and prior to this season has been able to describe to me the procedures he would use with older campers for having pottery fired in the kiln. I feel confident that he is able to handle this responsibility.”

**Document D (from the counselor herself on her application)**

“I am an experienced gymnast; I have competed at the high school level for three years. In 2015 I was first in state for floor exercise. I like working with younger children and teaching them gymnastics very much.”

(Verbal comments from the camp director) “We were lucky to get Nikki. I just turned the gymnastics area over to her and knew I wouldn’t have to worry.”

## Fishbowl Scoring Activity– For Observers

This form is for fishbowl observers to track their thoughts regarding the scoring techniques of the various mock visit teams. The different teams will be assigned to one of the mock visit areas for scoring practice. Fill in the applicable areas visited during the mock visit and make comments as appropriate related to the team's scoring efforts.

Questions	Mock Visit Area 1	Mock Visit Area 2	Mock Visit Area 3	Mock Visit Area 4
Did they ask the right questions?				
Were the questions appropriately open-ended and non-threatening?				
Did they overlook something they should have asked?				
Did they mark the score form properly?				
Were they appropriately assertive in making compliance decisions or did they give in too easily?				
Did they interpret the standard too loosely or too rigidly?				
Did they seem like visitor/educators or inspectors?				

**Associate Visitor Candidate Assessment**

Please complete this assessment using the following scale:

**SD = Strongly Disagree    D = Disagree    A = Agree    SA = Strongly Agree**

When finished turn it into the instructor(s) for additional feedback on your participation in the Associate Visitors Course. **The completed form will be returned to you with instructor's comments.** Thank You.

Name: \_\_\_\_\_

<b>Outcome</b>	<b>Self Assessment</b> Please circle your response	<b>Instructor Assessment of Skill Demonstrated</b>
1. I feel like I have a good grasp of the visit process.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
2. I am comfortable with the idea that I can function effectively as an Associate Visitor.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
3. I feel confident in my understanding of the Standards.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
4. I believe I can explain ACA Accreditation to someone unfamiliar with this program.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
5. I understand how to use the forms (Score Form, ICA, CIF, CSA)	SD   D   A   SA Comment:	SD   D   A   SA Comment:
6. I have a good grasp of the external resources available to me as a visitor.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
7. I feel comfortable making compliance decisions on the standards.	SD   D   A   SA Comment:	SD   D   A   SA Comment:
8. I understand how to gather information from a variety of techniques (i.e. observation, talking to staff/campers, etc)	SD   D   A   SA Comment:	SD   D   A   SA Comment:
9. I can explain the educational value of the Accreditation process.	SD   D   A   SA Comment:	SD   D   A   SA Comment:

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_