



***THE TOP 15 MOST COMMONLY
MISUNDERSTOOD AND/OR UNMET
ACCREDITATION STANDARDS***

SUPPLEMENT TO THE
***MANUAL OF ACCREDITATION STANDARDS
FOR ADVENTURE PROGRAMS
4TH EDITION***

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Introduction: This supplement to the *Manual of Accreditation Standards for Adventure Programs* (4th edition) has been written to provide guidance specific to the standards that have been deemed by AEE to be the most challenging for organizations to meet.

Through basic research, the top 15 standards most commonly listed as “unmet” during the past five years of accreditation reviews were identified. In trying to determine why these standards are not being met, it appears that they are being misinterpreted as written, their intent is not being understood, or documentation of compliance is lacking.

A Table of Contents, presented on page 5, identifies each of the top 15 standards. The standards are listed in the order in which they appear in the standards manual, they are not listed according to how often they are unmet. A thorough interpretation of the intent of each of the standards begins on page 7, and the most common reason (or reasons) why a standard is not met is provided. Examples are offered to help readers develop a better understanding of what it takes to demonstrate compliance with each standard.

Self-study authors should keep in mind that AEE standards are meant to be broadly applicable rather than narrowly prescriptive. Neither the standards manual nor this supplement will offer detailed advice on *how* to meet a standard. Accreditation reviewers will not provide that type of advice either. In fact, it is almost always inappropriate for a review team to dictate which knot, which anchor system, or which paddling stroke is best. Instead, organizations must decide which policies, procedures, and practices are most appropriate for their own uses, given their unique circumstances.

Ultimately, whether or not a standard is considered “met” will depend on whether or not the intent of the standard has been met. That is, any organization seeking accreditation is expected to apply the intent of each standard to its own circumstances. The organization is then expected to “make a case” that its operating procedures are in alignment with the intent of each standard. An organization must also provide supporting documentation to help substantiate its claim. This documentary “proof” is considered “evidence of compliance.”

To help readers understand what is meant by *intent* and *interpretation*, as well as *compliance*, summary explanations are provided in the appendices.

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THE TOP 15 MOST COMMONLY MISUNDERSTOOD AND/OR UNMET ACCREDITATION STANDARDS

Section 4. Program Oversight and Management of Activities

CHALLENGING STANDARD NO. 1

4.04 The program has a designated and functional risk management committee.

The intent of this standard is as follows: Checks and balances are important in any organization, and a risk management committee can serve this purpose well. It can be extremely helpful for a group of people from inside, as well as outside, an organization to provide insight, ideas, and feedback on risk management systems. Outsiders might not be intimately familiar with the organization, but they can help expose thinking errors, especially when an organization does not know what it does not know.

A risk management committee should have a mix of individuals with a variety of backgrounds and expertise. Outdoor educators, land managers, physicians, insurance specialists, and lawyers are examples of professionals who can serve as useful advisers. If an organization works with a special population, such as youth at risk, it is reasonable to expect that an expert in that population (such as a therapist) might sit on the committee as well.

The charge of a risk management committee varies, but the group often is asked to review an organization's standard operating procedures, to assess staff trainings or training requirements, to review curricula, to review incident reports, and/or to investigate incidents. Minutes of committee meetings are typically kept.

Most common reason(s) for a designation of unmet: Some organizations do not have a risk management committee. Some organizations have a committee, but the committee does not include any members from outside the organization. Many organizations state that a committee exists, but the group does not meet on a regular basis; has no explicit, agreed-upon understanding of purpose; and does not keep minutes.

Some organizations seeking accreditation are subsets of larger entities, like universities. Although a university generally has a risk management committee, it is common that only one member of that committee (at most) has outdoor-related expertise. This would not meet the intent of the standard.

Clarification and/or suggestions for documenting compliance: A risk management committee does not need to be of a particular size, nor does it need to meet a specific number of times per year. However, the AEE review team will want to see a list of the committee members, and it might want to talk with one or more of the members. It will also want to see agendas and minutes of meetings. In addition, the review team will want

to know that topics addressed during meetings are specific to the safety and well-being of the organization's staff, property, and participants.

CHALLENGING STANDARD NO. 2

4.05 The program engages in periodic internal and external risk management reviews.

The intent of this standard is as follows: The intent of standard 4.05 is similar to the intent of standard 4.04. Both standards are based on the belief that several sets of eyes, particularly fresh eyes, often are better than one when it comes to safety. The practice of having someone check or assess an organization's work is similar to the practice of editing. When someone who is knowledgeable about a topic (whether that topic is writing or climbing) is able to check another's work, previously undetected errors can be caught; suggestions for improvement can be made; and ultimately, the end product can be improved.

Sticking with the analogy of the editor, it generally is accepted that authors should not edit their own work. Because authors are so familiar with their own writing, they sometimes overlook errors that others might find. Consequently, before a document is released to the general public, it is standard to employ someone other than the author to review the document for mistakes. Similarly, it is often preferable to use a review team that is not closely tied to an outdoor organization to provide a critique.

As standard 4.05 implies, both internal and external reviews are beneficial and required. When an internal review is conducted, it is important to use a reviewer (or review team) who can provide honest and worthwhile feedback. Given the intent of this standard, it would be inappropriate for program managers or lead instructors to review their own programs or their own classes/outings. Instead, an organization should use a reviewer who is not intimate with a class, an outing, or a program.

External assessors often are in the best position to identify previously undetected errors. Further, an analysis provided by an external reviewer can be used to help an organization assess whether or not it is conducting its activities in a manner consistent with its peers.

Most common reason(s) for a designation of unmet: Organizations commonly do not meet this standard because they do not conduct formal reviews. They might ask an instructor to provide feedback or to evaluate a colleague, or they might ask staff to assess an outing, but these reviews tend to be informal and cursory. These types of actions do not meet the intent of the standard.

Organizations sometimes mistakenly believe that risk management committees inherently provide risk management reviews. This is rarely the case. Risk management committee members can be asked to conduct reviews, and committee members can make excellent reviewers. However, the work typically associated with risk management committee meetings does not intrinsically meet the intent of this standard.

Organizations that use low- or high-ropes challenge courses sometimes assume that their annual challenge course inspections fulfill the review requirement. While this type of review is important and beneficial, it (by itself) does not meet the intent of the standard.

Another assumption sometimes made is that an AEE review alone can be used to meet the standard. Although the AEE accreditation process requires both an internal review (self-assessment) and an external review (site visit), the intent of the standard is that an organization conduct reviews regularly. Given that AEE accreditation reviews happen at most every three to five years, an AEE review by itself does not meet the definition of “periodic” reviews.

Clarification and/or suggestions for documenting compliance: Whether a staff member, a risk management committee member, or an outside auditor conducts a risk management review, it must be a purposeful event. A reviewer (or review team) should be given parameters. He should know what the scope of the review will be, and he also should know if he will be expected to provide verbal or written findings.

Periodic reviews do not have to be exhaustive audits of an entire organization. Instead, an organization might ask a reviewer to look at one aspect of its program each year. This might include, but would not be limited to, an assessment of the organization’s climbing program, its water activities, or its new-staff orientation process. It could include a review of how the organization handles its safety briefings and debriefings. Or it might be an assessment of the efficacy of communication within the organization.

This standard does not dictate a timeline for reviews, and no specific number of reviews must be conducted. The scheduling and thoroughness of reviews will depend on the size and complexity of an organization. Ideally, an organization will have some aspect of its programming reviewed annually or every other year.

Review findings can be presented verbally, they can be basic one-page documents, or they can be housed in a comprehensive written report. In order to demonstrate compliance with this standard, an organization should be able to note the date when each review took place. It also should be able to identify the purpose of each review. Finally, the organization should be able to provide written or verbal findings from each review.

CHALLENGING STANDARD NO. 3

4.10 The program has explicitly designated staff-to-participant ratios for each activity.

The intent of this standard is as follows: In order to provide quality instruction and supervision, an organization must designate an appropriate number of adequately trained leaders per group size, and it must abide by those designated ratios. Typically, a leader with a higher level of training can supervise a greater number of students. Similarly, if participants are well behaved or are experienced in an activity, or if the terrain has few objective hazards, it is possible that fewer leaders will be needed per group. If leaders or participants have limited experience, if participants have special needs, or if an activity or

venue has significant risks associated with it, it is likely that a greater level of supervision will be necessary.

AEE standards do not specify what staff-to-participant supervisory ratios an organization must use. Instead, it is expected that the organization will examine its instructors' and participants' skill sets and field experience. It also is expected that the organization will evaluate the subjective and objective hazards associated with the people, venues, and activities. In short, in order to meet the standard, an organization will need to present a logical argument to convince the review team that its staff-to-participant supervisory ratios are reasonable for its circumstances.

Most common reason(s) for a designation of unmet: Some organizations do not meet this standard because the ratios they use differ significantly from the ratios that are common within the industry (i.e., they provide less supervision), and the organizations are not able to justify why the lower staff-to-participant supervisory ratios are acceptable. (See the *Manual of Accreditation Standards for Adventure Programs*, 4th edition, for a list of common ratios that are used in the industry.)

Some organizations do not meet the standard because they use minimally trained leaders as if they were skilled leaders in their staff ratios. For example, parents who enjoy the outdoors are sometimes used as pseudo-leaders on school outings. Given the intent of the standard (that a certain number of qualified leaders be used per group), it is inappropriate to use minimally trained individuals in this manner.

Some organizations meet the intent of the standard in most but not all of their programming. Typically, these organizations do not meet the standard because the ratios they use when working with special-needs populations or the ratios they use during higher-risk activities are significantly different from the ratios that are used within the industry under similar circumstances.

Finally, some organizations do not meet the standard because they have no clear process in place for determining ratios. These organizations generally are unable to provide any type of justification or rationale to explain how they came up with their ratios. This is not a common reason for receiving a designation of unmet. However, if a review team is led to believe that an organization has in the past used or would in the future use a staff-to-participant ratio that differs significantly from the ratio commonly used in the industry, and no reasonable rationale is provided, the review team might consider the standard to be unmet.

Clarification and/or suggestions for documenting compliance: It is not necessary for an organization to “prove” that a commonly used ratio is acceptable (i.e., common, as identified in the standards manual). If an organization is using staff-to-participant ratios that are well within industry standards, and no exceptional variables suggest that different ratios should be used, the organization can demonstrate compliance by documenting that it is familiar with and meets or exceeds the industry ratio standards (as identified in the standards manual).

On the other hand, if an organization works with special-needs populations, if it works in high-risk environments, or if it uses minimally trained leaders, it needs to provide a clear rationale for its designated ratios.

In order to meet this standard, an organization should familiarize itself with the common ratios provided in the *Manual of Accreditation Standards for Adventure Programs* (4th edition). If an organization conducts activities that are not listed in the manual or if its activities somehow involve a higher level of risk, the organization needs to provide evidence that it is familiar with the ratios used by peer organizations operating with a similar level of risk, and it also needs to prove that it meets or exceeds those ratios.

CHALLENGING STANDARD NO. 4

4.15 The program has a long-term post-incident plan to be used following a serious incident or fatality.

The intent of this standard is as follows: Many organizations create emergency action plans (EAPs) that can help guide them in the minutes, hours, and days following a serious incident or fatality. However, it is common for an organization to be challenged with decisions that can arise days, weeks, and even months or years post-incident. This standard requires that an organization seeking accreditation have a plan in place for addressing the following types of questions: Will there be an investigation, and if so, who will conduct it? Will the investigation's findings be shared with the victim's family or the public? Will employees who were involved in a serious incident be allowed to go back into the field? Will there be any type of memorial for a fatally injured participant or employee? Will the organization provide a critical incident stress debriefing (CISD)? If so, who in the area is qualified to conduct a CISD for an adventure program?

This standard also includes an expectation that organizations consider ramifications of certain actions or inactions. For example, organizations that have never dealt with a serious incident or fatality might not think to address the concerns and needs of current employees, new employees, and potential customers. Yet, it has been AEE's experience that organizations that have not considered these types of needs often remain in turmoil for longer periods of time following serious incidents. Similarly, AEE has found that organizations suffer when difficult decisions (such as whether or not to conduct or allow an investigation) are not discussed until after the fact.

It is not necessary for an organization to have a plan in place that outlines exact actions that will be taken in every case. However, given how difficult it can be to make effective decisions during highly stressful times, and given how helpful post-incident guidelines and checklists can be during these times, it is important that a long-term post-incident plan exists. The plan can be fairly generic and might simply denote options, or it might include a checklist of issues to consider days, months, and years after an event. It should clearly identify who will make key decisions, especially because there can be disagreement about what actions to take.

Most common reason(s) for a designation of unmet: The most common reason why organizations do not meet this standard is because no written long-term post-incident plan exists. In some instances, a plan exists, but it is extremely basic and does not clarify how difficult decisions will be made.

Clarification and/or suggestions for documenting compliance: As noted, the intent of this standard is not to force organizations to come up with a concrete plan and commit to certain steps. Instead, the intent is to make sure that organizations are ready to address the long-term needs that might arise following a serious incident. In order to demonstrate compliance with this standard, an organization should provide AEE and the review team with a copy of its long-term post-incident plan (which should include a strategy for making difficult decisions).

CHALLENGING STANDARD NO. 5

4.16 A program clearly explains to staff which medical skills or practices are approved for field use.

The intent of this standard is as follows: Organizations seeking accreditation need to remember that their employees bring a wide variety of skills to the workplace. Some trip leaders might have limited first aid training, while others might be paramedics. In fact, trip leaders often have training in myriad medical techniques, such as suturing (stitching) wounds, using nontraditional materials (such as superglue) to close wounds, reducing a variety of dislocations, using oral and/or nasal airways, assessing a spine, and administering prescription drugs.

Organizations seeking accreditation need to realize that trip leaders who possess Wilderness First Responder (WFR) certifications, but were certified by different agencies, may have been taught different skills. For instance, Wilderness Medical Associates, Wilderness Medical Institute, and SOLO, three of the leading wilderness medical providers, have slightly different curricula. Thus, WFR students from these different agencies do not learn identical techniques.

Any organization that authorizes the field practice of skills that go beyond first aid, including some of the skills taught in a typical WFR course, will be expected to know and understand the ramifications of that authorization. It should be familiar with each of the authorized skills. It also should be familiar with what can go wrong if treatment is applied incorrectly. (The following medical skills, taught in most WFR classes, are sometimes considered more than first aid: spine assessment; reduction of dislocations; use of prescription medications, including epinephrine; and wound care, including the cleaning and closing of wounds and the removal of impaled objects.)

Organizations should be aware that individuals who have advanced medical training (such as paramedics) generally are not allowed to practice advanced skills unless they are under the direct or indirect supervision of a physician. Thus, it is generally inappropriate,

and perhaps illegal, for an organization to suggest that a trip leader who has advanced medical training is allowed to perform advanced skills in the field.

In short, an organization should not suggest to its staff members that they are authorized to use any skills they have learned unless it has done its homework. By adopting a blanket policy (“It’s okay to use what you’ve learned”), an organization is, in fact, suggesting that unorthodox techniques that trip leaders might have learned are sanctioned. It is also suggesting that employees who have been trained to use advanced medical skills (such as techniques used by paramedics) are authorized to use those skills on the job.

To avoid dilemmas like these, organizations should take steps to learn about the types of medical training that their employees have received. Not only should program managers identify potential differences in what their trip leaders have been taught, but they also should know whether or not their employees’ skills can be legally used in the field.

Most common reason(s) for a designation of unmet: The most common reason why a designation of unmet occurs is because an organization provides a blanket statement implying that its field staff can practice any medical skills they have learned.

Another common problem that can lead to an unmet designation is when an organization states that its field staff can practice any skills they have learned as part of their WFR certifications. This can be problematic if the organization is not familiar with the variations between the WFR curricula. Given that different agencies teach skills such as spine assessment, dislocation reductions, and administration of prescription medications differently, the organization needs to clarify which method or methods it is authorizing.

Clarification and/or suggestions for documenting compliance: In order to document compliance, an organization needs to minimize or eliminate blanket statements, and it needs to clearly articulate which skills its staff are authorized, or are not allowed, to practice. For instance, an organization that authorizes trip leaders to reduce dislocations in the field should clarify which joints its trip leaders can reduce. This communication can be done in staff training, in a staff manual, or through other means.

If an organization allows its trip leaders who have advanced medical training (generally EMT IIs or EMT Intermediates and above) to use advanced skills, it should show that this is being done under the supervision of a physician sponsor (medical control). If an organization does not authorize the field use of advanced medical skills, it is not required to have a physician sponsor.

CHALLENGING STANDARD NO. 6

4.21 The program has a system for tracking and analyzing field-related incidents. The program also agrees to submit data to the AEE/WRMC incident reporting project on an annual basis.

The intent of this standard is as follows: It is generally accepted that incidents and close calls should be recorded. By tracking and analyzing accident and close call data, organizations have an opportunity to modify and improve field policies and staff training regimens. After recognizing a trend, for instance, an organization might alter the time of year in which it visits a venue so that environmental hazards are less likely to be encountered. Or it might make changes to required equipment lists so that trip leaders and participants are better prepared for field outings.

This standard has been included to make sure that any organization seeking accreditation has a system in place for recording and learning from field incidents. Additionally, AEE believes that the industry as a whole will benefit if industry-wide incident data is collected, analyzed, and shared. Consequently, organizations seeking accreditation are expected to submit data to the AEE/WRMC incident reporting project.

Most common reason(s) for a designation of unmet: Most organizations seeking accreditation collect incident data. Many, however, do not seem to know what to do with the data, or they do not have the time to analyze it. Instead, the incident reports are kept in a file and reviewed perhaps once per year, sometimes by a single individual, sometimes by a group (such as a risk management committee). Although the incident reports are discussed, nothing more is done with the information. Commonly, the findings are never shared with anyone other than the reviewers, and any lessons learned are lost.

It is the intent of this standard that an organization's incident data be thoroughly assessed so that trends, surprises, and lessons learned can be identified and shared within the organization. If only one or two people from an organization review the data and nothing is learned, the intent of the standard will be considered unmet.

Occasionally, an organization receives an unmet because it is not submitting its data to the AEE/WRMC reporting project. Organizations seeking accreditation do not need to submit this data prior to being accredited; however, they must have a plan or system in place for submitting the data on an annual basis once they are accredited.

Rarely, an organization receives a designation of unmet because it does not track or analyze its close calls/near misses. It is not a requirement to track close calls. However, if a review team finds, through interviews or other means, that an organization has experienced numerous (or serious) close calls/near misses in the field, and it also finds that those incidents have not been documented, shared with appropriate staff/supervisors, or otherwise addressed, the team might consider the intent of the standard to be unmet.

Clarification and/or suggestions for documenting compliance: An organization seeking accreditation should expect to provide AEE reviewers with access to its incident reports. The review team might want to see reports of physical injuries, behavioral incidents, and/or close calls. The organization might also consider providing some sort of summary of its incidents, such as an annual summary. This summary might include numbers of injuries, types of injuries, and perhaps even contributing factors that played a role in the incidents. More importantly, the organization should be able to show that it is attempting to use the data to improve its programming.

Organizations are expected to debrief incidents. Consequently, an organization seeking accreditation might present debrief forms as supporting documentation. In absence of debrief forms, the organization might describe how incidents are debriefed. For example, the organization might address the following questions: When does the debrief occur? Who leads the debrief? Who sits in on the debrief? What is done with the information?

An organization seeking accreditation also should be able to show that any lessons learned from incidents are shared with field staff or other applicable personnel. Further, staff should not be penalized for or discouraged from reporting incidents. When instructors fear that they will be unfairly reprimanded for field errors or close calls, an atmosphere of secrecy and distrust almost always results. This goes against the intent of the standard.

Organizations need to be able to show that incident data is recorded in a manner that can be forwarded to the AEE/WRMC reporting project. Personal information can be deleted, and confidentiality can be maintained. Organizations do not need to use the AEE/WRMC incident report form; however, AEE prefers that they do use this form, if possible.

Section 5. Human Resources: Staff Selection, Hiring, Training, and Supervision

CHALLENGING STANDARD NO. 7

5.01 There is a system for identifying and communicating core competencies that are considered requirements for field staff, supervisors, and administrative positions.

The intent of this standard is as follows: Baseline job qualifications differ significantly across the spectrum of outdoor programming and depend on the duties employees are expected to perform. Consequently, before sending trip leaders into the field, an organization should create and use core competency lists for all positions.

Core competency lists usually differ slightly from job descriptions. A job description provides an overview of duties that will be performed. It might also identify skills that are required for hire. A core competency list, on the other hand, identifies skills that are necessary to complete a job or to perform a job adequately.

A trip leader who is hired to lead a technical whitewater trip would be expected to have different core competencies than a leader who is hired to lead a day-long hiking trip. Consequently, it is preferable that a core competency list be written for each activity. Competency lists might also note which skills are required if/when an organization works with a special-needs population.

It is unusual for a new employee to be strong in all core competency areas. By comparing an employee's incoming skill set to a core competency list, a solid professional development plan can be crafted. Additionally, when competency lists are used, an employee generally will be more knowledgeable about where he stands, what is expected of him, and what he needs to work on to improve. When staff members' skills as a whole are compared to competency lists, the organization can adjust its staff training regimen if it recognizes weaknesses.

Not only are core competency lists useful in the hiring process and when identifying training needs, but they also can be used to help determine when an employee is ready to be promoted. If these lists are not used, promotions often are made subjectively. That is, an assistant might inappropriately be moved to a lead instructor position because he has "put in his time," he seems to know what he is doing, or he is a "good instructor" who gets along well with participants.

Most common reason(s) for a designation of unmet: Organizations typically understand which skills are required to competently lead an activity, and organizations often have appropriate expectations of their trip leaders. However, for the reasons stated above (under intent of this standard), core competency lists should be written down and should be available to staff. If an organization cannot provide written lists of some sort, the standard will likely be considered unmet.

The most common reason why an organization receives an unmet designation is because it does not have or use core competency lists. Instead, generic skill lists or job descriptions are used for multiple positions. It is not uncommon, for instance, for an organization to use a single job description for an assistant instructor as well as a lead instructor; the same job description is used regardless of the activity an employee will be leading and regardless of the populations he will be supervising.

Some organizations receive an unmet because they do not have comprehensive job descriptions for managers. (A job description [vs. a core competency list] is generally adequate for a manager.) Some organizations receive an unmet because they use students or volunteers as trip leaders, but they do not have adequate core competency lists for these positions.

Clarification and/or suggestions for documenting compliance: To demonstrate compliance, an organization seeking accreditation should provide lists of the core competencies, or basic skills, required of trip leaders (including volunteers or student leaders, if these are used). The lists should be based on the activities that the organization conducts. If an employee is expected to work with a special population, core competency

lists should be written to include applicable skills that would be needed to work with that clientele. Comprehensive job descriptions for managers should be available as well.

CHALLENGING STANDARD NO. 8

5.02 Staff are technically qualified to lead activities, and records of their qualifications are available.

The intent of this standard is as follows: The intent of standard 5.02 is similar to that of standard 5.01 in that it has to do with identifying and verifying core competencies. If core competency lists are available, an organization likely will find it uncomplicated to assess and document whether or not its staff are qualified to lead activities. The organization can compare its employees' skill sets to the core competency lists. Gaps or deficiencies can be identified and addressed. Once this happens, the organization can feel confident that its employees are qualified to lead program activities.

Some organizations seeking accreditation use students or volunteers to lead trips and facilitate activities. This is entirely acceptable as long as the accreditation-seeking organization is able to show that its students/volunteers possess adequate core competencies. If the organization allows chaperones (e.g., parents or accompanying classroom teachers) to attend outings, the organization should either hold the chaperones to core competency standards (and could consider them as part of the supervisory ratio) or make it clear that the chaperones are not part of the instructional team (and not count them as part of the supervisory ratio).

In summary, an organization seeking accreditation is expected to know what it takes to lead an activity. It is expected to have a good assessment of each instructor's skill sets. Ultimately, if the organization can show that its instructors' abilities meet or exceed core competencies, the standard will be considered met.

Most common reason(s) for a designation of unmet: Some organizations do not meet the standard because they are unable to provide documentation verifying their employees' skills, trainings, and experience. When resumes are provided, they often are not up to date and/or do not provide a detailed description of the employees' outdoor backgrounds. Applicable staff certifications are sometimes expired or are not kept in personnel files. Trainings that employees have attended are not documented, or the dates, hours, and topics covered are not recorded. Similarly, an organization sometimes receives an unmet because it fails to document its employees' professional development. Documenting professional development is particularly important for employees who lacked expertise at the time of hire but obtained it at a later date.

Another relatively common reason why an organization receives an unmet is because it uses a trip leader who is qualified to lead activities A, B, and C but not activity D. Although the staff member might be a very experienced outdoor leader, if he does not have the requisites needed to lead activity D (but is allowed to lead it anyway), the standard will be considered unmet.

A common contributory reason why an organization receives an unmet is because it does not have or use core competency lists (see standard 5.01 of this document). If the organization cannot clearly identify what it takes to perform a job, it will have a more difficult time proving that its employees are adequately qualified.

Finally, organizations occasionally receive an unmet because they are not able to provide documentation showing that management staff are qualified to perform their duties.

Clarification and/or suggestions for documenting compliance: The simplest way to document compliance is to provide AEE reviewers with a list of core competencies for all positions and make personnel files available for all applicable employees. Personnel files might include, but should not be limited to, the following: employee applications, updated outdoor-related resumes, performance evaluations, professional development plans, copies of applicable licenses and certifications, letters of recommendation, and details of applicable staff trainings.

CHALLENGING STANDARD NO. 9

5.04 Field staff are prepared to deal with unforeseen circumstances other than medical emergencies.

The intent of this standard is as follows: Attention almost always is paid to a trip leader's first aid background, and standard 5.03 was written with that in mind. Specifically, standard 5.03 requires that an organization make sure its field staff have adequate training so that they are able to deal with basic medical emergencies.

Organizations should realize, however, that not all backcountry predicaments involve injuries or illnesses. Consequently, this standard (standard 5.04) has been written to emphasize that instructors should be trained and ready to deal with non-medical emergencies, such as helping a student who has fallen into water, rescuing someone who has been buried in an avalanche, or assisting a climber who has become stuck on rappel. These are examples of potential crises in which quick action would be required and injury might be avoided.

Additional non-medical challenges might include, but would not be limited to, the following: inclement weather, including high winds, extreme cold, extreme heat, rain, and flash floods; difficult terrain that might involve avalanche hazard, a river crossing, or the potential for someone to become lost or disoriented; roads/trails that are impassable; and encounters with dangerous animals or humans. Extremely tired, scared, or stressed participants can also create field challenges. These situations would not necessarily require quick action but would require good decision-making and good leadership skills.

This standard does not suggest that field staff are expected to be professional rescuers. Instead, the intent of the standard is to make sure that organizations recognize the need to

assess and possibly train trip leaders so that they are more likely to perform well in these types of challenging situations.

Most common reason(s) for a designation of unmet: The most common reason why this standard is unmet is because organizations identify only their employees' WFR certifications as documentation for compliance. Although WFR certifications can be used to demonstrate compliance for standard 5.03, WFR training alone does not meet the intent of standard 5.04.

Clarification and/or suggestions for documenting compliance: A variety of methods can be used to document compliance for standard 5.04. These might include, but would not be limited to, identifying trainings attended and/or certifications received in high-angle rescue, whitewater rescue, avalanche, and search and rescue, or documenting experience in group management and crisis intervention. An organization also can help demonstrate compliance by including documentation of staff trainings that focus on its emergency action plan.

CHALLENGING STANDARD NO. 10

5.05 Staff are qualified to work with the populations they are instructing.

The intent of this standard is as follows: Different client populations have different needs. Consequently, trip leaders who work with special populations should understand how those groups might differ from others in how they learn, process information, and express themselves. Certainly not all associates of a special-population group are identical; however, many possess like traits. In fact, whether a group is made up of college students, youth at risk, or physically disadvantaged participants, several of its members likely will have similar characteristics.

This standard also takes into account the importance of participants' emotional safety and well-being. Trip leaders who have a basic understanding of the values, needs, and fears of their clientele generally will be better able to manage emotional risk. Additionally, it is assumed that trip leaders who have been trained to deal with potentially unsafe behaviors (such as fighting, making threats, and running away) will be better equipped to deal with, if not prevent, such behaviors in the field.

Ultimately, it is expected that organizations seeking accreditation will have a decent understanding of the needs of the populations with which they work. It is also expected that organizations will make sure that trip leaders are aware of potential challenges associated with various clientele and that the leaders are trained or educated accordingly.

Most common reason(s) for a designation of unmet: The most common reason why this standard is not met is because organizations that work with special populations (such as youth at risk, corporate groups, and people with disabilities) are not able to (or simply do not) document that their staff members are qualified to work with their clientele.

Routinely, organizations work with special populations only on occasion. Sometimes these organizations have minimal expertise when it comes to addressing the unique needs of these groups. Consequently, it is common that few to no applicable staff trainings are conducted, and staff core competencies sometimes are found to be inadequate.

Clarification and/or suggestions for documenting compliance: Organizations seeking accreditation should include in their core competency lists the knowledge, skills, and experience needed to work with any special population groups they serve. The organizations also should document that employees who work with these client groups possess the required knowledge, skills, and experience.

If new employees lack experience working with a given population, an organization should document that it has an apprentice, mentoring, or training program (or other system) to assist with staff development. If the organization is not qualified to provide staff training, it should identify options that it can use instead.

CHALLENGING STANDARD NO. 11

5.06 In the event a program contracts out services for activities, a system is in place to assess and track the appropriateness of the subcontractor's credentials and performance.

The intent of this standard is as follows: Organizations do not always have the expertise or equipment needed to properly conduct a particular activity. Consequently, they contract out for these services. Before an organization seeking accreditation hires an outside source to lead an activity, to transport students, or to teach specific courses, it will need to do some homework.

An organization that wishes to contract out its rock climbing activities might, for instance, ask to see the following: a contractor's rock climbing policies; records of the contractor's rock climbing equipment, including purchase dates and inspection records; applicable accident/loss reports; the contractor's rock climbing ratio guidelines; a copy of the contractor's release of liability form; and a copy of the contractor's proof of insurance.

Although the organization might not be able to effectively evaluate some of the information identified above (given its lack of expertise in the activity), a quality contractor should be able to provide the requested documentation. Further, the organization could receive assistance from other sources (such as members of its risk management committee or peer institutes) to help evaluate the information.

Most common reason(s) for a designation of unmet: The most common reason why an organization receives an unmet is because it has not conducted adequate research on a contractor's credentials or performance. Instead, the contractor's credentials are accepted simply "because it has been in business for a long time" or "because it specializes in the activity."

Another common reason why an organization receives an unmet designation is because none of its research or findings (such as the contractor's proof of insurance, policies, etc.) is documented or available to the review team.

Clarification and/or suggestions for documenting compliance: To demonstrate compliance, an organization seeking accreditation should show that it has used due diligence in its selection of a contractor. At a minimum, it should be able to provide copies of all applicable licenses and permits that the contractor is required by law to have. It also should be able to provide a copy of the contractor's policies and procedures and proof of insurance, or it should be able to show that these documents have been reviewed by an appropriate staff member. Other documents that can be used to support compliance might include the contractor's staff qualifications and accident history.

An organization seeking accreditation also should consider addressing legal issues (such as whether or not they will use their own as well as the contractor's liability form). The organization is encouraged (though not required) to provide evidence that it has been named as a co-insured. It is also encouraged to explain how its own employees will be used in staff-to-participant supervisory ratios when its staff attend a contracted outing. If the organization's trip leaders plan to attend a contracted outing, the organization should document in advance how leadership roles will be determined in the event of an emergency. Finally, the organization should consider identifying and addressing any of the contractor's policies that appear to be in conflict with its own policies.

Not all the steps described above are required to meet this standard; however, each can be used to help document compliance with the standard's intent.

CHALLENGING STANDARD NO. 12

5.07 Upon hiring, the program has a system for orienting and/or training new staff.

The intent of this standard is as follows: It is reasonable to assume that new employees need to be oriented to an organization's way of doing things. In addition to receiving an overview of the organization's pay, health benefits, etc., a new employee also should receive an orientation that is specific to his duties. This briefing might include, but would not be limited to, the following: a review of the organization's mission and clientele; an introduction to the organization's activity-based policies, especially as they apply to field practices and expectations; a discussion of authorized medical protocols; and an overview of the organization's emergency action plan (EAP).

Additionally, it is expected that new employees will come in with certain skills, but they generally will need to develop in certain areas as well. Skill development and progression are often enhanced through staff trainings.

Staff trainings, in particular skill-based trainings, should include hands-on practice. Examples could include technical skill workshops, rescue-based exercises, and classes

that focus on behavioral or emotional needs and emergencies. The training requirements of an organization are not defined by this standard. Instead, training topics will depend on the size and complexity of the organization, and the backgrounds of staff.

Most common reason(s) for a designation of unmet: Organizations that do not meet this standard typically have systems for orienting and training new employees, but the orientation processes or the trainings are considered inadequate.

For example, many organizations provide a basic orientation, but the orientations sometimes are found to be insufficient. The orientation might only require that a new employee read a staff manual and EAP. No follow-up occurs, and no time is allotted for questions and answers. When this is the only method used to orient a new employee, key safety policies and procedures often are not fully understood or are not assimilated. This would not meet the intent of the standard.

Occasionally, an organization receives an unmet designation because its trainings do not effectively address staff needs. Reviewers sometimes find that training goals and objectives are vague, or curricula are unavailable. At times, the people conducting the trainings have received limited (or no) training themselves in “methods of instruction” and are found to be ineffective teachers.

Some organizations receive an unmet due to a lack of documentation. Although orientations and trainings are conducted, the dates, topics covered, and attendance are not recorded.

Clarification and/or suggestions for documenting compliance: In order to demonstrate compliance, an organization seeking accreditation should provide evidence that a new-employee orientation process exists. At a minimum, the organization should show that it takes steps to ensure that new employees are familiar with and understand critical information (such as the organization’s mission, its safety policies, and applicable steps within its EAP).

Similarly, an organization should be able to provide evidence that an applicable staff training system exists. It might provide documentation that helps reviewers understand how training topics are selected, and it should be able to provide evidence that its trainers are qualified to lead the trainings.

An organization also should be able to provide documentation of all staff trainings conducted within a given period (e.g., the past year), including dates of the trainings, an outline of the information covered, and a list of attendees.

CHALLENGING STANDARD NO. 13

5.08 The program has a system for assessing and supervising staff.

The intent of this standard is as follows: An organization seeking accreditation should have a system in place for providing continuous oversight of its employees. The system should allow the organization to assess the employees' understanding of key policies, to evaluate their hard and soft skills, and to appraise their judgment and decision-making abilities.

As noted earlier in this supplement, core competency lists (or similar) can be used as part of an organization's staff assessment system. If core competency lists are available, the organization can compare each employee's skill set to the list(s). Conversely, if this or a similar type of assessment process does not take place, the organization might find it difficult to recognize staff weaknesses and identify staff training needs.

Most common reason(s) for a designation of unmet: Most organizations seeking accreditation assess and supervise staff to some degree. The most common reason why an organization receives an unmet is because its system is informal and incomplete.

Many organizations receive a designation of unmet because their assessments are too basic. Some organizations, for instance, use traditional staff evaluations that address qualities such as punctuality, reliability, and workmanship. This would not meet the intent of the standard. In some cases, evaluations are adequate; however, the employees are not given any follow-up advice, mentoring, or training to help them improve. No benchmarks are identified, and no professional development plans are created.

Some organizations do not meet this standard because they rely on peer evaluations that prove to be ineffective. In these instances, the evaluators (often other trip leaders) are not always qualified to, or have not been trained to, assess their colleagues. Occasionally, the evaluators do not want to hurt the feelings of their peers, or they find the process awkward, so they offer only positive feedback. At other times, the feedback is too vague or not particularly useful. For example, comments such as "Needs work" or "You rock" do not meet the intent of the standard.

Participant evaluations are commonly used by organizations and can be beneficial, but they rarely assess an employee's technical abilities, rescue skills, or decision-making abilities. Self-evaluations can be helpful, but employees cannot always accurately assess themselves, and they do not know what they do not know. Consequently, neither of these methods, used alone, meets the intent of the standard.

Finally, an organization sometimes receives a designation of unmet because there is no system in place for evaluating managers. If no one within the organization has the expertise to assess a manager's performance and to help address weaknesses, the organization as a whole will suffer. When there is inadequate oversight, the person who is in charge of the outdoor program ends up functioning without checks and balances.

Clarification and/or suggestions for documenting compliance: In order to document compliance, an organization seeking accreditation should provide evidence that a system exists for evaluating staff. Evaluations should be based on core competencies, and records of these appraisals should be kept. The organization might make available a variety of completed staff evaluations as samples so that reviewers can feel assured that the process is thorough, useful, and effective. Names can be deleted from the samples, and confidentiality can be maintained.

Organizations also should show that there is a system in place for evaluating managers. If no one within an organization is qualified to assess and supervise its managers, the organization should show that it uses a risk management committee (or other) to provide appropriate oversight.

Section 6. Transportation

CHALLENGING STANDARD NO. 14

6.02 The organization has identified and follows operator testing and training procedures.

The intent of this standard is as follows: If nonprofessional drivers are used to transport participants, extreme care should be taken to ensure that they are adequately trained and are prepared to handle an unexpected event (such as a breakdown, a flat tire, or an accident). Ideally, drivers should be at least 21 years of age and should have three to five years of experience driving the type of vehicle that they will be asked to use to transport students.

Although AEE does not require that drivers be of a particular age or have a certain driving background (other than what the law requires), the intent of the standard is to make sure that drivers are prepared and able to take their responsibilities seriously. For example, organizations might allow drivers to practice, with no participants in the vehicles, in realistically challenging conditions. Drivers who might drive on dirt roads or on snow, for instance, should be given the opportunity to practice on dirt roads or on snow, if possible. Organizations that use 15-passenger vans should give employees time behind the wheel of this type of vehicle. If trailers are used, training associated with backing up, hitching, and loading should be included.

Organizations that do not train their own drivers are still expected to make sure that the drivers used are adequately trained.

Most common reason(s) for a designation of unmet: The most common reason why an organization receives an unmet is because no driver-training program exists within the organization, and no alternate plan is in place to make sure drivers are adequately trained. Organizations seeking accreditation commonly obtain driving records, but this step alone does not meet the intent of the standard.

Occasionally, a program receives an unmet designation because its driver-training program is deemed to be inadequate. For instance, some organizations require employees to watch a video or read a manual before they are allowed to drive, but the intent of the standard assumes that the training process will include a hands-on teaching component. If the hands-on component of a training session is too brief, such as a drive around the block, it might be deemed inadequate. Further, if drivers will be expected to pull trailers, but those drivers are not allowed to practice driving with a trailer, the standard might be considered unmet.

Clarification and/or suggestions for documenting compliance: In order to document compliance, an organization should show that all employees used to transport passengers or drive specialized vehicles have received adequate training. An outline of all applicable training courses should be made available.

An organization also should show that it has obtained and examined driving licenses and records, and it has established standards for disqualifying or eliminating people who have unacceptable records.

Section 7. Equipment, Nutrition, and Hygiene

CHALLENGING STANDARD NO. 15

7.02 Equipment is managed and maintained appropriately by the organization.

The intent of this standard is as follows: The intent of this standard is to make sure that an organization seeking accreditation has a system in place for confirming that its field equipment is appropriately distributed, adequately maintained, and properly stored. As part of this system, gear in need of maintenance should be tagged and separated so that it does not inadvertently reappear in the field, and time should be allotted for performing repairs.

Most common reason(s) for a designation of unmet: The most common reason why an organization receives an unmet is because fuel (e.g., white gas used for stoves) is not stored in a proper fireproof container or a proper location.

An organization might also receive an unmet designation if it does not keep records of purchase for critical/safety items (e.g., ropes), or if it does not have a system for noting when critical/safety gear needs to be retired.

Another reason why an organization sometimes receives an unmet is because no formal system for routine equipment inspections exists. Although an informal system of inspection might be used (e.g., instructors looking over gear prior to use), such a system, if used alone, generally does not meet the intent of the standard.

Clarification and/or suggestions for documenting compliance: If fuel is stored on-site, it must be stored appropriately. Typically, fuel should be kept in fireproof containers. If fireproof containers are not used, however, it is acceptable for an organization to store fuel in an area that is a significant distance from food and other equipment that might be damaged by the fumes or spillage.

In order to demonstrate compliance, an organization also should provide records of purchase for all critical/safety items, and it should provide logs, such as rope logs, that document the equipment's use, wear, and retirement schedules. The organization also should be able to provide evidence that it has a system for inspecting equipment on a regular basis. The system should limit the possibility that damaged gear will be inappropriately returned to the field.

APPENDICES

Appendix A

Overview of Intent and Interpretation

Organizations seeking accreditation sometimes need assistance to interpret some of AEE’s accreditation standards. To help clarify what is meant by interpretation, consider the concept of staff-to-participant supervisory ratios.

Outdoor professionals generally understand that the quality of instruction and supervision an organization can provide will depend on a variety of factors, such as a trip leader’s qualifications, the age and background of participants, the number of participants, and the type of activity. Trip Leader A, for instance, might be able to provide excellent instruction and supervision to a group of six healthy and motivated adults. The same person might have a more difficult time providing instruction and supervision to a group of eight developmentally disabled and behaviorally challenged youths—particularly if he has little or no experience working with that population. Trip Leader A might, in fact, feel overwhelmed if he was expected to instruct and supervise, with or without assistance, 12 behaviorally challenged and disabled youths who are embarking on a remote backpacking trip through difficult terrain.

Because of these variables, AEE does not dictate specific supervision ratios. Instead, the intent of the “ratio standard” (standard 4.10) is to ensure that an organization seeking accreditation has considered applicable variables and has made appropriate supervisory ratio decisions accordingly.

Commonly used supervisory ratios are provided in the *Manual of Accreditation Standards for Adventure Programs* (4th edition), and organizations are expected to consider these ratios when they are determining what will work best for them. The ratios listed in the standards manual assume that trip leaders are well trained and that participants are mature and healthy adults. Because this is not always the case, AEE and the visiting review team will expect that an organization, when deciding on ratios, has taken into account the qualifications of its own staff, the ages and backgrounds of its participants, its choice of activities, and its venues. In other words, an organization is expected to interpret the standard and apply the intent to its own circumstances.

In conclusion, in order to meet Standard 4.10, an organization simply needs to use a logical argument to demonstrate to the review team that its staff-to-participant supervisory ratios are reasonable for its circumstances.

Appendix B

Overview of Compliance

Many appropriate methods can be used to demonstrate that an organization complies with the intent of a standard. The challenge that self-study authors often face is choosing which method to use to document compliance.

One of the most common problems a review team faces occurs when a self-study author suggests, “Yes, we meet that standard,” but the organization does not provide appropriate evidence to support its claim. Consider, for instance, the standards that address instructor qualifications. While an organization might believe that its employees are well qualified to lead activities, it needs to demonstrate this to the review team by providing appropriate supporting documentation.

The standards in Section 5, for example, have been written to show that an organization seeking accreditation has an appropriate system for selecting, hiring, training, and supervising its employees. The organization needs to be able to provide clear evidence that it does each of these effectively. Consequently, the review team might want to see employee resumes and copies of applicable certifications. The team also might ask to see documentation of the courses an instructor has taught as well as documentation of his field experience. In addition, the reviewers might want to see instructors work in the field during the site visit. In order to verify that the organization has a process in place for supervising staff, the review team might ask to see written performance evaluations, including evaluations of upper administrators. Almost anything an organization can do or provide to support its case that it meets a standard will be beneficial.

Ultimately, an organization might use or arrange any number of the following as proof that is able to adequately select, hire, train, and supervise its staff: job descriptions and core competency lists; outdoor-related resumes for staff; copies of applicable staff certifications; outlines of staff trainings, including topics covered and lists of attendance; evidence that a staff evaluation process exists, including copies of employee performance evaluations; interviews with staff and program participants; interviews with board members and/or risk management committee members; and on-site observations of safety briefings and other field practices.