



# Camp Accreditation Score Form

**Camp Name** \_\_\_\_\_

**Date of Visit** \_\_\_\_\_ **Section** \_\_\_\_\_ **Camp Number** \_\_\_\_\_

Indicate forms being returned to ACA:

- Camp Profile     Score and Comment Form     Immediate Corrective Action Form (if applicable)

FOR DIRECTOR		
I affirm that accreditation visit procedures as described in the <i>Accreditation Process Guide</i> were properly completed. The attached forms have been filled out in my presence, and I have had an opportunity to comment about any standard as scored.		
Camp Director Signature _____	Date _____	E-mail _____
Printed Name _____	Phone Number _____	
FOR VISITORS		
I affirm that accreditation visit procedures as described in the <i>Accreditation Process Guide</i> were properly completed. I will maintain confidentiality regarding all information obtained about this program through written material and during the visit, except as required by law.		
Lead Visitor Signature _____	Date _____	E-mail _____
Printed Name _____	ACA Number _____	Phone Number _____
Visitor Signature _____	Date _____	E-mail _____
Printed Name _____	ACA Number _____	Phone Number _____
WDP Visitor - If Different _____	Date _____	E-mail _____

## INSTRUCTIONS

- Please use a pencil when marking the score form.
- Use a pen on the signature page.
- Mandatory items are in bold and italic.
- W indicates written standard.
- Note the following key/code: D = Day camp, R = Resident camp, S = Short-term residential, U = User Group, SPF = Staffed Public Facility

## MAILING INSTRUCTIONS

Immediately after the visit, complete this score form packet by noting the appropriate enclosures and providing signatures, in ink, as requested. The Camp Director may photocopy this completed form, or may request a copy from the Accreditation Department. In all cases, directors will be furnished a copy of the form if the camp fails to meet the accreditation criteria as a result of the visit.

The lead visitor should mail all documents, with just one fold, in the envelope provided. Forms should be sent to: ACA Accreditation Department, 5000 State Rd. 67 North, Martinsville, IN 46151-7902. Also notify the Section Standards Chair of the completed visit and date.





OM – Operational Management						
Mark an X on the correct response						
Standard	Description	Yes	No	DNA	Written	
OM-1	Review of Foundational Practices	Yes	No	DNA	W	
<b>OM-2</b>	<b>Firearms Control</b>	Yes	No	DNA		
OM-3A	Risk Management Planning	Yes	No		W	
OM-3B	Risk Management Planning	Yes	No		W	
OM-4	Incident Analysis	Yes	No			
OM-5	Assessment of Standards Compliance	Yes	No	DNA	W	
OM-6	Intruders	Yes	No		W	
OM-7	Emergency Procedures	Yes	No		W	
OM-8	Safety Orientation	Yes	No		W	
OM-9A	Insurance Coverage	Yes	No		W	
OM-9B	Insurance Coverage	Yes	No	DNA	W	
OM-9C	Insurance Coverage	Yes	No	DNA	W	
OM-9D	Insurance Coverage	Yes	No		W	
OM-9E	Insurance Coverage	Yes	No	DNA	W	
OM-10	Personal Property Regulations	Yes	No		W	
OM-11	Smoking Policies	Yes	No			
<b>Camp Provides Pgrms. - DNA 12-17 for user groups</b>				DNA		
OM-12	Staff Emergency Training	Yes	No			
OM-13	Incident Reporting	Yes	No		W	
OM-14	Missing Person Procedure	Yes	No		W	
OM-15A	Emergency Communications	Yes	No		W	
OM-15B	Emergency Communications	Yes	No		W	
OM-15C	Emergency Communications	Yes	No		W	
OM-16	Campers in Public Areas	Yes	No	DNA	W	
OM-17A	Camper Security	Yes	No		W	
OM-17B	Camper Security	Yes	No		W	
<b>User Groups - DNA 18-19 if no user groups</b>				DNA		
OM-18	Use Agreement	Yes	No		W	
OM-19	User Group Responsibilities	Yes	No		W	

Standards #      Comment/Initial (comment made by Visitor (VIS) or Director (CD))

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HR – Human Resources						
Mark an X on the correct response						
Standard	Description	Yes	No	DNA	Written	
HR-1	Director Qualifications			DNA		
HR-1A	Director Qualifications	Yes	No			
HR-1B	Director Qualifications	Yes	No			
HR-1C	Director Qualifications	Yes	No			
HR-1D	Director Qualifications	Yes	No			
HR-1E	Director Qualifications	Yes	No	DNA		
HR-2	Special Needs Staff Requirements	Yes	No	DNA		
HR-3A	Hiring Policies	Yes	No		W	
HR-3B	Hiring Policies	Yes	No		W	
HR-3C	Hiring Policies	Yes	No		W	
<b>HR-4A</b>	<b>Staff Screening</b>	Yes	No		W	
HR-4B	Staff Screening	Yes	No		W	
HR-4C	Staff Screening	Yes	No		W	
HR-4D	Staff Screening	Yes	No		W	
HR-5A	Diversity	Yes	No			
HR-5B	Diversity	Yes	No			
HR-6	Job Descriptions/Information	Yes	No		W	
HR-7	Job Training	Yes	No			
HR-8	Personnel Policies	Yes	No		W	
HR-9A	Camper Supervision Ratios	Yes	No		W	
HR-9B	Camper Supervision Ratios	Yes	No		W	
HR-9C	Camper Supervision Ratios	Yes	No		W	
HR-10A	Staff Age Requirements	Yes	No	DNA	W	
HR-10B	Staff Age Requirements	Yes	No	DNA	W	
<b>Staff Training + Supervision - DNA 11-21 for user groups</b>					DNA	
HR-11	Pre-camp Staff Training	Yes	No		W	
HR-12	Late-Hire Training	Yes	No			
HR-13	In-Service Training	Yes	No	DNA		
HR-14	Camp Staff Responsibilities for General Camp Activities	Yes	No		W	
HR-15	Staff/Camper Interactions	Yes	No		W	
HR-16A	Behavior Mgmt. and Discipline	Yes	No		W	
HR-16B	Behavior Mgmt. and Discipline	Yes	No		W	
HR-17	Sensitive Issue Policy	Yes	No			
HR-18A	Supervision of Staff	Yes	No		W	
HR-18B	Supervision of Staff	Yes	No		W	
HR-19A	Supervisor Training	Yes	No		W	
HR-19B	Supervisor Training	Yes	No		W	
HR-20	Staff Observation	Yes	No			
HR-21A	Staff Time Off	Yes	No	DNA		
HR-21B	Staff Time Off	Yes	No	DNA		







