

# Introduction to Accreditation

**WILEAG**



**WI-PAC**



# Training Outline



- Accreditation Overview
- WILEAG & WI-PAC
- Benefits of Accreditation
- The Accreditation Process
- File Construction
- Self-Assessment & Mock
- On-Site Assessment

# What is Accreditation?



- Accreditation is a progressive and time-proven way of helping institutions evaluate and improve their overall performance.
- Voluntary process in which an agency is evaluated on the existence of prescribed standards and demonstrated compliance with those standards.
- Accreditation is an on-going process and requires the agency to be evaluated on a regular basis.
- Standards are developed from best practices in law enforcement.

# WILEAG Accreditation



- The 4<sup>th</sup> Edition of the WILEAG Standards requires agencies to comply with state-of-the-art standards in four basic areas: policy and procedure, administration, operations, and support services.
- The program consists of 235 standards, containing 579 separate dimensions, that incorporate the best police practices and are specifically tailored to the needs and capabilities of Wisconsin agencies.
- Agencies are evaluated every three years.

# WILEAG



- Wisconsin Law Enforcement Accreditation Group
- Authority over the development of standards, requirements of the accreditation process and the awarding of accreditation status.
- Formed as an initiative of the Wisconsin Chiefs of Police Association to provide a high quality, affordable alternative to national accreditation.
- Tailored to meet the needs and capabilities of Wisconsin agencies.

# WILEAG



- Original standards developed by CALEA and adopted by WILEAG in 1995.
- Governing Board consists of 15 members who come from leadership roles in Wisconsin law enforcement agencies as well as professionals from related disciplines.
- Currently there are 20 accredited agencies with additional 14 agencies in self-assessment. Program continues to grow stronger every year.
- [www.wileag.info](http://www.wileag.info)

# WI-PAC



- Wisconsin Police Accreditation Coalition
- Resource for agencies involved in the accreditation process.
- Provides guidance in file construction and Standards interpretation.
- Network for communication, support and sharing of resources.
- Works in cooperation with WILEAG to enhance accreditation through standards review and process recommendations.

# WI-PAC



- Provides training and mentoring in achieving accreditation.
- Resource for sample policies and proofs of compliance.
- Assists with mock assessments to member agencies.
- [www.wi-pac.org](http://www.wi-pac.org)

# Benefits of Accreditation



- Promotes excellence and professionalism within law enforcement through voluntary compliance with recognized best practices.
- Basis for enhanced sense of professionalism and pride for agencies and agency personnel.
- Confidence that your agency is in functional compliance through an independent review and evaluation of agency operations.

# Benefits of Accreditation



- Security in the knowledge that agencies are well managed.
- Confidence that enforcement operations and personnel are consistent and well directed.
- Policies and procedures following best practices can help reduce liability and may increase savings on insurance costs.
- Network and collaboration with other professional agencies and organizations.

# The Accreditation Process



- Agency adopts and implements the standards.
- Develops required policies and gathers proofs of compliance.
- Agency does an in-depth self-assessment to determine readiness for the on-site assessment. A mock assessment is highly encouraged.

# The Accreditation Process



- The WILEAG assessment team conducts an on-site review and presents their findings and recommendations to the WILEAG Governing Board.
- The WILEAG Governing Board grants accreditation status to the agency or counsels the agency on the steps necessary to achieve accreditation.
- Agencies are evaluated every three years, begin process for re-accreditation.

# The Accreditation Process



- Standards identify what needs to be addressed but doesn't dictate how you do it.
- Accreditation is not just a paper process – requires functional compliance throughout agency.
- Make accreditation work for you, not you work for accreditation.
- Compliance demonstrated on an annual basis.
- Agency must comply with all standards except NAF (Not Applicable by Function).

# File Construction



- Electronic or paper system, format is the same.
- Selection of Accreditation Manager.
- Organization, clarity and consistency are key to a successful file system.
- 235 standards / 579 separate dimensions.
- Each standard requires a separate folder containing all documentation relevant to that standard. (235 folders)

# File Construction



- Standard vs. Context – the context serves as a guide to clarify the intent of the standard and is not binding. Need to prove the standard, not the context.
- Written Directives and Proofs of Compliance must directly address the standard / dimension.
- Each standard and dimension requires individual documentation of compliance.

# File Construction



- ACR (Accreditation Compliance Report)
- ACR / Written Directive / Proofs of Compliance
- All items in file must be in the order listed on ACR
- Highlight & Identify documents
- Redacting names & sensitive information
- Keep documents limited to relevant pages needed to prove standard.

# File Construction



- Four Methods of Assessing Agency Compliance:
- Written Directives
- Written Documentation
- Observation
- Interview

# File Construction



- Written Directive – Policy, Rule, Directive, etc.  
Authoritative document – “Says what you do”
- If the standard states “written directive” the agency must have a written policy or procedure
- Written Documentation – Proof of Compliance  
Documentation / demonstrate that you comply with the standard – “Shows that you do what you say”
- Observation & Interview

# File Construction



- “If” Standards – if the agency performs that function then must comply with the standard. Ex.  
1.2.5 - Locker Room Privacy  
3.2.4 - Pre-Employment Polygraphs
- NAF (Not Applicable by Function) standards – if the agency does not perform that function then does not need to comply with standard/dimension.  
Ex. 2.7.1 – Part-time Officers

# File Construction



- NAF does not apply to required standards where there were no occurrences during accreditation cycle. Ex 6.3.8 – Officer Involved Shooting
- Agency Comments – used to document missing proofs (no occurrences in a given year) and other relevant information regarding compliance.



**Accreditation Compliance  
Report  
(4<sup>th</sup> Edition)**

**Chapter 1**  
Organization and Management  
**Section 1**  
Agency Role  
**Standard 2**  
Goals and Objectives

Standard #: <b>1.1.2</b>
Assigned to:
Prepared by:

WILEAG Assessor Use Only		
<input type="checkbox"/> Compliance Verified	<input type="checkbox"/> Non Compliance	<input type="checkbox"/> Not Applicable by Function
Assessor Comments:		
Assessor Signature:		Date:

Scope and Dimension(s)
The agency has written goals and objectives that are reviewed and updated at least annually and are available to all personnel.

Agency Compliance Information
<input type="checkbox"/> Written Directive:
<input checked="" type="checkbox"/> Written Documentation: 2014 Goals & Objectives, 2013 Goals & Objectives, 2012 Goals & Objectives
<input checked="" type="checkbox"/> Observation of: Goals & Objectives posted on Department web site
<input type="checkbox"/> Interview with:
<input checked="" type="checkbox"/> Agency Comments: Goals & Objectives posted on web site and available to all personnel through supervisory staff
<input type="checkbox"/> Not Applicable by Function: Explain:



**Accreditation Compliance  
Report  
(4<sup>th</sup> Edition)**

**Chapter 1**  
Organization and Management  
**Section 2**  
Employee Conduct  
**Standard 5**  
Locker Room Privacy

Standard #: <b>1.2.5</b>
Assigned to:
Prepared by:

WILEAG Assessor Use Only		
<input type="checkbox"/> Compliance Verified	<input type="checkbox"/> Non Compliance	<input type="checkbox"/> Not Applicable by Function
Assessor Comments:		
Assessor Signature:		Date:

Scope and Dimension(s)
If the agency has a locker room, a written directive addresses privacy in the locker room, as required by §175.22, Wis. Stats.

Agency Compliance Information
<input checked="" type="checkbox"/> Written Directive: Policy 101, Locker Room Privacy
<input checked="" type="checkbox"/> Written Documentation: 2012 Discipline report for policy violation
<input checked="" type="checkbox"/> Observation of: Policy/warnings posted in locker rooms
<input type="checkbox"/> Interview with:
<input checked="" type="checkbox"/> Agency Comments: There were no locker room issues or policy violations in 2013 & 2014
<input type="checkbox"/> <b>Not Applicable by Function:</b> Explain:



**Accreditation Compliance  
Report  
(4<sup>th</sup> Edition)**

**Chapter 1**  
Organization and Management  
**Section 4**  
Command Authority  
**Standard 2**  
Command Protocol

Standard #: <b>1.4.2</b>
Assigned to:
Prepared by:

WILEAG Assessor Use Only		
<input type="checkbox"/> Compliance Verified	<input type="checkbox"/> Non Compliance	<input type="checkbox"/> Not Applicable by Function
Assessor Comments:		
Assessor Signature:		Date:

Scope and Dimension(s)
A written directive requires that at a minimum there are command protocols for the following situations:
<ul style="list-style-type: none"> <li><b>1.4.2.1</b> Normal day-to-day agency operations.</li> <li><b>1.4.2.2</b> Exceptional situations.</li> <li><b>1.4.2.3</b> Situations involving personnel of different organizational components engaged in a single operation.</li> <li><b>1.4.2.4</b> Absence of the chief executive officer.</li> </ul>

Agency Compliance Information
<input checked="" type="checkbox"/> Written Directive: 1.4.2.1 Rules & Regulations 3.2 1.4.2.2 Rules & Regulations 3.1.1 1.4.2.3 Rules & Regulations 3.3 1.4.2.4 Rules & Regulations 3.1
<input checked="" type="checkbox"/> Written Documentation: 1.4.2.1 Shift Assignment rosters 1.4.2.2 Special Events plans 1.4.2.3 Special Events plans 1.4.2.4 Organizational Chart, Out-of-Office emails
<input type="checkbox"/> Observation of:
<input type="checkbox"/> Interview with:



**Accreditation Compliance  
Report  
(4<sup>th</sup> Edition)**

Standard #: <b>2.7.1</b>
Assigned to:
Prepared by:

**Chapter 2**  
Personnel Services  
**Section 7**  
Part-time Officers  
**Standard 1**  
Part-time Officers

WILEAG Assessor Use Only		
<input type="checkbox"/> Compliance Verified	<input type="checkbox"/> Non Compliance	<input type="checkbox"/> Not Applicable by Function
Assessor Comments:		
Assessor Signature:		Date:

Scope and Dimension(s)
Agencies that utilize part-time officers have a written directive that describes duties and responsibilities, delineates authority and discretion and specifies the amount of and types of supervision part-time officers are to receive.

Agency Compliance Information
<input type="checkbox"/> Written Directive:
<input type="checkbox"/> Written Documentation:
<input type="checkbox"/> Observation of:
<input type="checkbox"/> Interview with:
<input type="checkbox"/> Agency Comments:
<input checked="" type="checkbox"/> <b>Not Applicable by Function:</b> Explain: Agency does not utilize part-time officers

# Proofs of Compliance



- Standards require 1 proof per year.
- Dimensions – all dimensions must have at least 1 proof and proofs must cover all 3 years of cycle.
- Wet Ink – newly implemented policy where there was inadequate time to develop proofs to support policy compliance
- For initial accreditation only need 1 proof in file per standard/dimension.
- Time Sensitive Standards.

# Self-Assessment



- Reviews standards and determines agency's current level of compliance.
- Begin policy development and file construction.
- Determine which standards are NAF.
- Agency assess if they believe they are in compliance with each standard.
- Gathers appropriate proofs of compliance.

# Mock Assessment



- Not required but highly encouraged.
- Informal review of files to identify any file maintenance or compliance issues.
- Conducted by accreditation managers from outside agencies – WI-PAC.
- Schedule 3-6 months prior to formal on-site.
- Contact WILEAG before making any significant changes.

# On-Site Assessment



- Agency schedules on-site dates with WILEAG Program Manager.
- Completes Public Information Plan, disseminates public notices, and completes required forms.
- On-site lasts 3 days and conducted by a team of 3 trained assessors.
- Agency responsible for costs associated with assessor's meals, lodging and mileage.

# On-Site Assessment



- Agency has a designated Assessor work area that is a confidential and uninterrupted workspace.
- Work area contains the files, required forms, non-recorded telephone line and file review items for assessors.
- Accreditation Manager, Command Staff and any necessary personnel should be available during entire on-site.

# On-Site Assessment



- Day 1

- Tour / Static Display / Observable Standards
- Scheduled Interviews
- File Review

# On-Site Assessment



- Day 2

- File Review
- Informal Interviews / Ride-Alongs
- Public Telephone Contact
- Public Information Hearing

# On-Site Assessment



- Day 3
  - File Review
  - Agency completes any outstanding file repairs
  - Exit Interview

# On-Site Assessment



- Assessment team report delivered to WILEAG Governing Board.
- Governing Board determines if agency is awarded accreditation status.
- Accreditation status is for 3 years.
- Formal accreditation award presented at WCPA conference.