



**P A T H**  
INTERNATIONAL

Professional Association of Therapeutic  
Horsemanship International

*Ensuring excellence and changing lives  
through equine-assisted activities and therapies*

# **Accreditation and Reaccreditation Booklet**

**January 2018**

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# **Professional Association of Therapeutic Horsemanship International Premier Accredited Center Program**

The most current *Professional Association of Therapeutic Horsemanship International Standards for Certification & Accreditation* is available in the Members Only section of the PATH Intl. website and for purchase in the online store at [www.pathintl.org](http://www.pathintl.org).

## **Purpose**

The purpose of the PATH Intl. Premier Accredited Center program is to provide a process of evaluation that recognizes that a center's program meets basic standards for health and safety and so promotes the well-being of all participants and equines.

## **Rationale and Philosophy**

Accreditation is a voluntary membership-driven process. Accreditation focuses on education and evaluation of a center's program(s) using standards that are developed and approved by the membership and that are considered basic to equine-assisted activities and therapies. Standards are written in an objective manner to assure consistent interpretation by centers and consistent evaluation by trained site visitors. The standards are reviewed regularly and updated by the PATH Intl. Program and Standards Oversight Committee and Accreditation Sub-Committee as needed.

PATH Intl. standards identify practices considered basic to safe, quality equine-assisted activities and therapies. Standards, however, do not require that all programs look alike. The accreditation program serves a broad range of centers that may vary widely in type, history, size and budget.

As a benefit of accreditation, PATH Intl. Premier Accredited Centers may use the PATH Intl. Premier Accredited Center logo. This logo, which is a registered trademark, represents to the public that the center has met the criteria for accreditation. It is not appropriate for centers to advertise or imply that accreditation has been applied for or earned until written notification has been received from PATH Intl.

## **Objectives**

The PATH Intl. Premier Accredited Center program:

- establishes the international standards for equine-assisted activities and therapies used by centers for planning and implementing services;
- provides a formal means for accreditation and continuing self-evaluation;
- provides resources to help centers become accredited;
- builds public confidence in a center's ability to provide quality services; and
- assists the public in selecting centers that meet established standards and promotes public recognition of industry standards.

## Features of Accreditation

### Membership Driven:

- The strength of an international accreditation program lies in the grassroots participation of its members.
- Accreditation establishes the Professional Association of Therapeutic Horsemanship International Premier Accredited Center program as the benchmark of the industry.
- Accreditation builds the historical precedent of committees as representative of the membership.
- Accreditation addresses the need for greater membership participation.
- Accreditation promotes professional pride.

### Voluntary:

- Accreditation affords PATH Intl. the opportunity to educate non-accredited centers regarding industry standards.
- Accreditation's voluntary status allows for the inclusion in PATH Intl. of programs that are not PATH Intl. Premier Accredited Centers.

### Peer Review:

- The strongest and most successful accreditation programs use peer review.
- A formalized, delineated peer review process provides an objective system to ensure consistent oversight of programs.
- A specific peer review process promotes public confidence in the industry.
- Peer review offers opportunities for improvement of programs, dissemination of information and strengthening of professional respect and cooperation.

## PATH Intl. Accreditation Program

### Accreditation Period and Cost

Centers that choose to participate in the PATH Intl. Premier Accredited Center program will submit an application for accreditation and a \$150 application fee. Once a center has been granted premier accredited status, the remaining cost of accreditation (currently \$750 for five years, divided equally over five years) will be invoiced with the membership fees each year of the five-year accreditation period.

### Educational Courses

The accreditation process and PATH Intl. standards are updated annually; it is necessary to complete the PATH Intl. Standards Course and exam in person or online no more than 12 months prior to the site visit to ensure that the center has the most up-to-date information.

### Standards Course

The Standards Course is directed to both incoming instructors and centers applying for accreditation. The focus of the course is on the importance and application of the PATH Intl. standards for all who work in the EAAT industry. This course is available in person or online. The online version may be purchased through the online store at [www.pathintl.org](http://www.pathintl.org) or by contacting the PATH Intl. office.

## **Center Representatives**

Centers interested in participating in the PATH Intl. Premier Accredited Center process must designate a person from the center who will lead the center in the accreditation process and be the point of contact for all correspondence regarding accreditation. This person should also assist the center in preparing for the accreditation visit. This person is referred to as the center's "center representative" and must meet the following requirements:

- Must be a PATH Intl. Individual Member
- Must successfully complete the in person or online Standards Course within twelve months of the site visit
- Must be present on the day of the site visit

It may be a good idea for the center to select an alternate center representative.\* The alternate center representative should be able to step in should there be an unexpected change due to an emergency on the day of the site visit. Any changes of the center representative on or before the day of the visit MUST be submitted to the PATH Intl. office in writing as soon as possible. Faxes and emails are acceptable.

\*Must meet all the requirements of a center representative.

## **Site Visitors**

Site visitors are volunteers who work on behalf of PATH Intl. and the premier accreditation program. They have completed a minimum of 20 hours of standards training to become visitors. They must participate in updates and continue to complete visits in order to retain their status. All site visitors are required to sign confidentiality statements and keep all information concerning the visit confidential. The visitors will sign releases or confidentiality policies as might be required by the center. Visitors have experience in the PATH Intl. center profession, often serving as the center representative of another PATH Intl. Premier Accredited Center.

There are two classifications of PATH Intl. site visitors: associate visitors and lead visitors. The lead visitor is defined as the visitor who is charged with the administrative responsibilities for arranging the process and coordination of the visit.

## **Center Accreditation Self-Assessment Form**

The PATH Intl. Center Accreditation Self-Assessment form is a resource for centers to determine if they are ready to start the accreditation process. To become accredited, centers must be in 100% compliance with all PATH Intl. mandatory standards, have a passing score of 75% or higher in each category with an overall score of 80% or higher. The self-assessment allows centers to ensure that they are meeting the standards prior to the site visit. Center Representatives are not required to complete this form for Accreditation; however it is strongly encouraged to help you assess your centers compliance with the standards.

### **Guidelines for Communication**

- All communications between centers and the Accreditation Sub-Committee must be made in writing and sent to the PATH Intl. office.
- Suggestions and/or complaints about the PATH Intl. Premier Accredited Center program should be made in writing to the PATH Intl. office, directed to the attention of the Accreditation Sub-Committee.

### **Section Summary**

- The purpose of the PATH Intl. Premier Accredited Center program is to provide a process of evaluation.
- The cost of accreditation is \$750 for the five years of the accreditation period, divided equally over five years at \$150 per year due with center renewal.
- The Standards Course must be taken no less than 12 months from the date of the site visit.
- The center representative is designated by the center and coordinates the site visit details. The center representative must be present the day of the site visit.
- The Center Accreditation Self-Assessment is a tool to help centers prepare for an accreditation site visit.

## How to Become a PATH Intl. Premier Accredited Center

A center must be a Professional Association of Therapeutic Horsemanship International center in good standing for at least one full year before it is eligible to apply for accreditation.

1. The center's representative must complete and pass the Standards Course in person or online with a minimum score of 90%. If the center designates an alternate center representative, he/she must also complete a Standards Course.
2. Upon completion of the Standards Course, a PATH Intl. Application for Center Accreditation and a Center Accreditation Self-Assessment form will be handed out at the in person Standards Course at PATH Intl. regional and annual conferences. The forms can also be downloaded at [www.pathintl.org](http://www.pathintl.org), under the Center's tab, or obtained by contacting the PATH Intl. office.
3. The center must complete and submit a PATH Intl. Application for Center Accreditation within 90 days of completion of the Standards Course.
4. The PATH Intl. office will review all applications to determine eligibility. Only complete applications will be accepted. Complete applications are those that are received within the center's 90-day time limit and include the following:
  1. Any supporting documentation as detailed on the application
  2. A \$150 application fee
5. Centers that submit incomplete applications will be notified as to what steps to take in order to complete the application process.
6. All core standards as well as any standards for specialty activities indicated on the center's application must be scored on the day of the visit. Any and all changes to center activities must be submitted in writing to the PATH Intl. office no later than two weeks prior to the date of the visit.
7. Accepted applications are assigned site visitors. The PATH Intl. office will notify the assigned site visitors of the required visit. The center representative will be notified that visitor assignments have been made. Centers that are going through the accreditation process for the first time need to complete the site visit within one year from the date the center representative took the Standards Course and exam online or in person. Site visits for premier accredited centers must occur before accreditation due date. All center representatives must have taken the Standards Course and exam online or in person within 12 months of a site visit.
8. A center cannot request a visitor.
9. A center has the right to decline an assigned visitor by contacting the PATH Intl. office in writing.
10. The lead visitor will contact the center representative to schedule a mutually agreeable date and time for the visit. The lead visitor initiates scheduling with the center and coordinates the date with the associate visitor. The lead visitor then confirms the agreed-upon visit in writing to the center, the associate visitor and the PATH Intl. office.

11. A site visit consists of two visitors; one is designated as the lead visitor, and the other is designated as the associate visitor.
12. The center is responsible for the visiting day schedule and must be prepared for visitation of all activities and at all sites. The visit should be completed in one day. When a site visit requires more than one day, the lead visitor submits the Site Visit Confirmation form to the PATH Intl. office for review. The responsibility of the extra expense is determined by the PATH Intl. CEO. The center will be notified by the PATH Intl. office if the additional travel expenses will be incurred by the center.
13. During the course of the visits, differences of opinion may arise regarding the interpretation of a standard. If the problem cannot be resolved, the lead visitor will make a determination and score the standard. The standard will be circled. The center representative and both visitors will write their opinions on the comment form for the Accreditation Sub-Committee to review. The visit will continue until all standards have been scored.
14. At the completion of the visit, the accreditation score form is completed by the lead visitor and a copy of the form is given to the center representative and a copy is retained by the lead visitor. **Comments are written by both the lead visitor and the center representative for any standard receiving a “no” score.** The score form and comment form are signed by the lead visitor, associate visitor and center representative.
15. Upon completion of the visit, the original score form and any supporting documentation is sealed in the presence of the center representative in a stamped envelope and mailed to the PATH Intl. office the same day for calculation. The responsibility to mail the score form rests with the lead visitor. If the original score form is lost, an unaltered copy may be used for scoring.
16. Results are calculated by the PATH Intl. office. Centers will be notified of the results of the visit. If the center received a non-passing score, the review and appeal process may be initiated. In order to initiate the review and appeal process, the center must submit a letter requesting an appeal. (See pages 10-11)
17. In order to receive a passing score, centers must be in 100% compliance with all mandatory standards. Centers must also receive 75% or better in each category, Administration and Business, Facility, Equine Welfare and Management, Driving (if applicable), Ground (if applicable) and Medical/Mental Health (if applicable), an 80% or better in its overall score and 50% or better in Mounted, Interactive Vaulting and Equestrian Skills (as applicable). Mandatory standards are deemed significant in the assurance of safety precautions, certifications and liability.
18. The Accreditation Site Visit Evaluation form will be given to the center representative for completion and returned to the PATH Intl. office.
19. All site visit documentation is reviewed by the Accreditation Sub-Committee. Following this review, the center’s accreditation status is determined.
20. Those centers who achieve PATH Intl. Premier Accredited Center status will be sent official written notification of their status. A plaque denoting premier accreditation status is sent.



## Policy & Procedures for Rescheduling of Site Visit

1. If an emergency situation warrants rescheduling the site visit, the lead visitor will reschedule.
2. It is the joint responsibility of the lead visitor and the center to schedule a mutually acceptable visit day. If satisfactory arrangements cannot be determined, a reassignment will be made by the PATH Intl. office.
3. If the center cancels and rescheduling is not a mutually agreed upon option, the center will forfeit a portion up to the total fee, based on expenses incurred to date, as calculated by the PATH Intl. office.
4. Newly accrediting centers must complete the site visit within one year of completing the Standards Course and exam online or in person to gain accreditation status. Site visits for premier centers must occur before accreditation due date. All center representatives must have taken the Standards Course and exam online or in person within 12 months of a site visit.

### Section Summary

- A center must be a PATH Intl. center member in good standing for at least one full year before it is eligible to apply for accreditation.
- The center representative must complete the Standards Course and exam online or in person and submit the application for accreditation within 90 days of completion of the course.
- The application fee is \$150.
- For centers going through accreditation for the first time, the site visit must be completed within 12 months of completing the Standards Course and exam online or in person.
- For centers reaccrediting, the site visit must be completed prior to the center's accreditation lapse date.
- The date of the site visit is scheduled by the lead visitor with input from the associate visitor and center representative.
- All core and specialty standards indicated on the application must be scored on the day of the visit.
- A passing score is 100% compliance with all mandatory standards. Centers must also receive 75% or better in each category, Administration and Business, Facility, Equine Welfare and Management, Driving (if applicable), Ground (if applicable) and Medical/Mental Health (if applicable), an 80% or better in its overall score and 50% or better in Mounted, Interactive Vaulting and Equestrian Skills (as applicable). Mandatory standards are deemed significant in the assurance of safety precautions, certifications and liability.

## **Non-Compliant Mandatory Standards**

### **Procedures for Immediate Corrective Action Notification of Non-Compliant Mandatory Standard(s)**

At the end of a visit, the lead visitor will review with the center representative any mandatory standards that have been scored NO and complete the Immediate Corrective Action Notification of Non-Compliant Mandatory Standard form.

Mandatory standards are deemed to be significant in the assurance of safety precautions, certifications and liability. The purpose of this procedure is to notify the center that in order to be in full compliance with PATH Intl. membership requirements, the listed mandatory standard(s) must be immediately corrected. In addition and in order to be considered for premier accredited status, the center must follow the review and appeal process (see below).

The lead visitor will list the mandatory standard(s) that have been found to be in non-compliance and the steps the lead visitor feels should be taken immediately in order to come into compliance with the standard(s). Immediate corrective action must be completed, and documentation of such action, along with a letter of appeal, must be sent to the PATH Intl. office postmarked no later than five (5) working days from the date of the visit. Failure to do so will result in an automatic non-passing score.

The center representative and lead visitor will sign and date the form. A copy of the Immediate Corrective Action Notification of Non-Compliant Mandatory Standard form is given to the center representative and a copy is retained by the lead visitor. The original is returned to the PATH Intl. office with the score form and other supporting documentation.

**Completion of this process in no way guarantees that PATH Intl. Premier Accredited Center status will be granted.**

### **Review and Appeal Process**

#### **Step One: Appealing to the PATH Intl. Accreditation Sub-Committee**

The following criterion MUST be met without exception before the PATH Intl. Accreditation Sub-Committee overturns a non-passing score due to the center not passing a mandatory standard(s) on a visit:

- The center must complete and return to the PATH Intl. office all non-compliant mandatory standard paperwork and actions, along with a letter of appeal, within five (5) business days of its visit. (See above)

#### **Accreditation Sub-Committee Action**

- The Professional Association of Therapeutic Horsemanship International Accreditation Sub-Committee assigns and completes two (2) interviews. One committee member is assigned to interview the lead visitor and another to interview the individual who served as the center representative on the day of the visit.
- An overall score of 80% on all core and specialty standards must be achieved with no core or specialty section receiving less than 75% in order for a center to be considered eligible to appeal

a non-passing score. Only in this instance, for the sole purpose of calculating a percentage in this specific step of the appeal process, does a failed mandatory standard carry the same scoring weight as a non-mandatory standard receiving a “no” score.

- Written information submitted from the day of the visit, the appeal letter and information gathered through the interviews conducted by the assigned PATH Intl. Accreditation Sub-Committee members only is considered in the committee’s appeal decision for that visit.
- The PATH Intl. Accreditation Sub-Committee, through a review of all information presented and relevant past performance regarding any previous similar non-passing scores may decide to overturn a non-passing score. Continued operation as a Premier Accredited Center must be in accordance with ALL criteria outlined in the *PATH Intl. Standards for Certification and Accreditation*. No committee member who participated in the appealed center’s visit participates in the discussion or decision to uphold or overturn a center’s non-passing score.
- After a decision is reached by the PATH Intl. Accreditation Sub-Committee the center is notified.

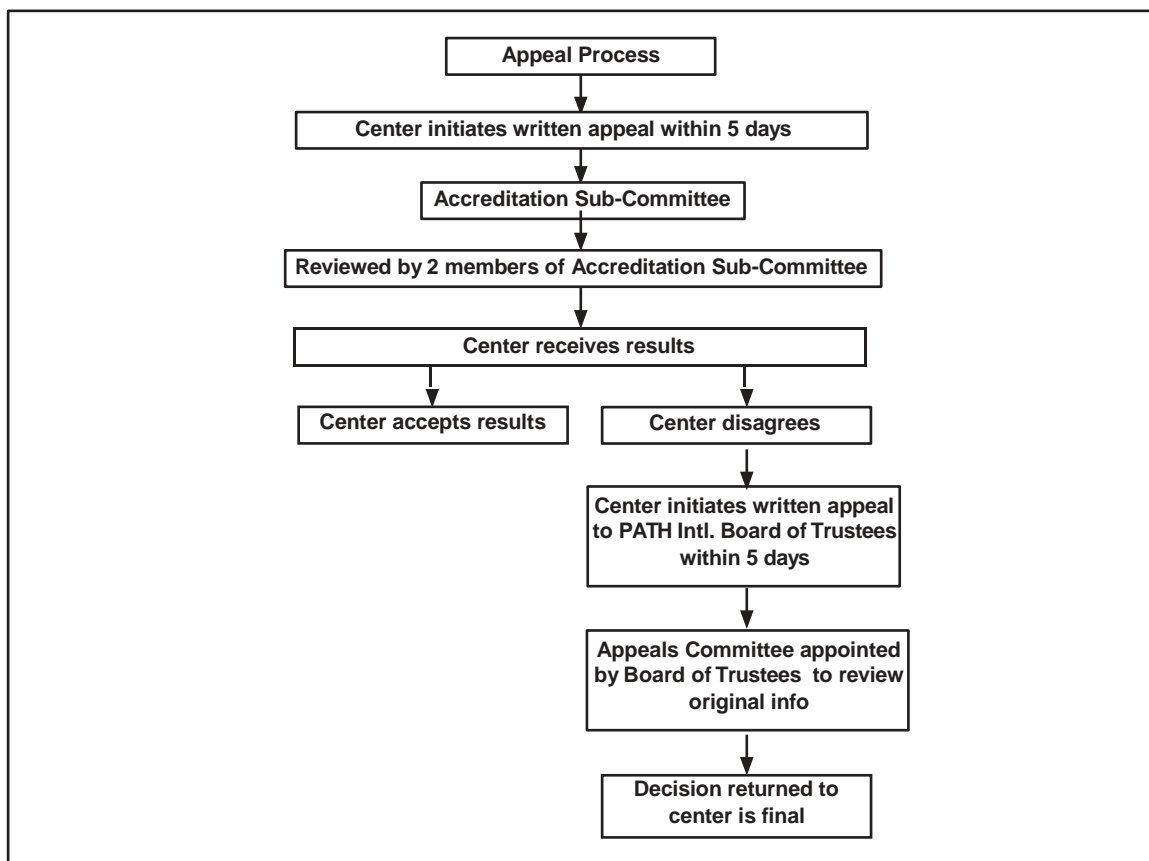
### **Step Two: Appealing to the PATH Intl. Board of Trustees**

- If the PATH Intl. Accreditation Sub-Committee affirms the non-passing score, the center may appeal in writing to the PATH Intl. Board of Trustees within five (5) working days of receipt of the written notification of the PATH Intl. Accreditation Sub-Committee decision.
- On receipt of the appeal notification, the PATH Intl. office notifies the PATH Intl. Board of Trustees.
- The PATH Intl. Board President will appoint an appeals committee to conduct a review of the original information from the visit. New or additional information will not be taken into consideration.
- The PATH Intl. Board of Trustees makes the final decision.
- After a decision is reached by the PATH Intl. Board of Trustees the center is notified.
- The decision of the PATH Intl. Board of Trustees is final.
- If the PATH Intl. Board of Trustees upholds the non-passing score, the center may choose to begin the accreditation process again. (See Accreditation Visit—Non-Passing Score Policy page 21)

## Section Summary

- The lead visitor will review with the center representative any mandatory standards that have been scored NO and complete the Immediate Corrective Action Notification of Non-Compliant Mandatory Standard form.
- Immediate corrective action must be completed and documentation, along with a letter of appeal, must be sent to the PATH Intl. office postmarked no later than five (5) working days from the date of the visit.
- Completion of this process in no way guarantees that PATH Intl. Premier Accredited Center status will be granted.

## Review of Appeal Process



## **How to Maintain Professional Association of Therapeutic Horsemanship International Premier Accredited Center Status for the Accreditation Period**

1. Renew membership annually. Centers will receive a membership renewal notification in October or November. Membership fees are due on December 31. Late fees accrue effective around January 16 (See membership renewal information for the exact date.)
2. PATH Intl. Premier Accredited Centers must submit a signed Annual Statement of Compliance.
3. If a PATH Intl. Premier Accredited Center loses its only PATH Intl. Certified Instructor, the center must submit written notification to the PATH Intl. office. The notification must state the center's immediate plans for obtaining a new PATH Intl. Certified Instructor. The notification will be reviewed and the center will be notified in writing of the timeline to obtain a new PATH Intl. Certified Instructor (maximum 6 months). When a new PATH Intl. Certified Instructor is obtained, written notification must be submitted to the PATH Intl. office including contact information.
4. PATH Intl. Premier Accredited Centers must submit a Premier Accredited Center Change Notification form to the PATH Intl. office within 30 days of a change of location or operations as described in the previous years' membership renewal packet.
5. In the fifth year of the five-year term, and in order to maintain status as a PATH Intl. Premier Accredited Center, a center must complete the reaccreditation process. The center representative must complete the Standards Course and exam online or in person prior to submitting an Application for Accreditation. The application must be submitted to the PATH Intl. office within 90 days of completion of the Standards Course and exam online or in person and no later than six months prior to the accreditation lapse date. The visit must take place prior to the center's lapse date at the end of the five-year term.
6. Centers that choose not to reaccredit prior to their lapse date and reaccredit at a later time will lose their original accreditation date.

### **Change Notifications**

When a center has a change in operation, such as:

- There is an addition of one or more specialties being offered (see Grace Period policy),
- The center relocates or adds a site location(s),
- The center loses its only certified instructor,  
the center completes and returns both a PATH Intl. Premier Accredited Center Change Notification form and self-assessment form for core and specialty standards as applicable to the program to the PATH Intl. Accreditation Sub-Committee. (A separate form is required for each site.)

### **Reevaluation of Premier Accredited Status**

Certain circumstances may warrant a review of a center's PATH Intl. Premier Accredited Center status. Examples of situations that the PATH Intl. Accreditation Sub-Committee or the PATH Intl. Program and Standards Oversight Committee may determine that a review is warranted are:

1. When a PATH Intl. Premier Accredited Center has completed the grace period for adding a

specialty program, the center must submit a PATH Intl. Premier Accredited Center Change Notification form. If any section of the self-assessment form receives a failing score a revisit may be required.

2. When a PATH Intl. Premier Accredited Center relocates or adds a center location, a PAC Change Notification form is submitted as well as a self-assessment form. If any section of the self-assessment form receives a failing score a revisit may be required.
3. If a center adds one or more specialties within two (2) years of its accreditation site visit date the PATH Intl. Accreditation Sub-Committee reviews the center's file to evaluate previous visits and changes to the center facility and operations that merit consideration to safety and performance. A site revisit may be required if the addition of programs is not a natural progression of center growth.
4. A PATH Intl. Premier Accredited Center may be asked to submit to a revisit at the discretion of the PATH Intl. Accreditation Sub-Committee if:
  - There are circumstances or documentation (anonymous reports are unacceptable) that suggest a gross safety issue to participants, equines or volunteers.
  - The center shows an inability to meet the standards as outlined in the standards manual for any core or specialty services offered.
  - There is an issue of gross misrepresentation of the center's program relating to its status as a PATH Intl. Premier Accredited Center in good standing.
  - A center willfully submits false information to PATH Intl. regarding the center.

If the review of a center's Premier Accredited status is warranted, the process of reevaluating a center's accredited status is as follows:

1. The PATH Intl. Accreditation Sub-Committee assigns one, or if applicable two, member(s) of the committee to complete interviews with the center representative and if applicable the center's executive director to help the committee better understand the situation.
2. The PATH Intl. Accreditation Sub-Committee reviews all information presented. Relevant past performance may determine that additional follow-up meetings/calls with the center and possibly a revisit if necessary.

When a revisit is deemed necessary the responsibility for the expense of the revisit is determined by the PATH Intl. CEO. Depending on the circumstances, PATH Intl. or the center will underwrite the expense of the revisit. The center will be notified in writing of the final decision.

### **Removal of Accreditation**

Accreditation may be removed anytime within the five-year period by the PATH Intl. Board of Trustees. The Accreditation Sub-Committee may recommend removal of accreditation from a center to the PATH Intl. Board of Trustees under the following circumstances:

1. The center refuses to schedule a revisit when the Accreditation Sub-Committee and/or the PATH Intl. Board of Trustees determines that it is necessary.
2. The center fails to achieve a passing score during the revisit.
3. The center fails to sign the Annual Statement of Compliance.
4. The center knowingly provides false information to the site visitors, the Accreditation Sub-

Committee, the PATH Intl. Board of Trustees or its representatives.

5. The center fails to be in compliance with mandatory standards.
6. The center fails to adhere to the PATH Intl. Code of Ethics.
7. At the discretion of the PATH Intl. Board of Trustees, following a review process.

The center has the right to appeal in writing to the PATH Intl. Board of Trustees after 15 days of being notified of the removal of accreditation. The board's decision is final (see Step 2 of the Appeal Process). Centers that have their accreditation removed are no longer permitted to use the PATH Intl. Premier Accredited Center logo.

### **Section Summary**

- To maintain accredited status a center must renew center membership annually, submit change notifications as needed and reaccredited prior to accreditation lapse date.
- Failure to reaccredit prior to the accreditation lapse date may result in loss of original accreditation date.
- Certain circumstances may warrant a review of a center's PATH Intl. Premier Accredited Center status.
- Accreditation may be removed anytime within the five-year period by the PATH Intl. Board of Trustees or by recommendations from the Accreditation Sub-Committee to the PATH Intl. Board of Trustees.

## Steps to Reaccredit

Premier accredited centers must be current center members in good standing to be eligible to begin the reaccreditation process. In order to ensure that a center does not lapse their accreditation, it is best to apply for reaccreditation at least six months prior to its accreditation lapse date. The PATH Intl. office will mail a reminder notification of reaccreditation one year prior to the lapse date and again six months prior to lapse date. A Center that let's their accreditation lapse will lose their original accreditation date.

1. The center representative must complete and pass the Standards Course and exam online or in person with a minimum score of 90%. If the center designates an alternate center representative, he/she must also complete a Standards Course and exam.
2. Upon completion of the Standards Course and exam, a PATH Intl. Application for Center Accreditation and a Center Accreditation Self-Assessment form will be handed out at the Standards Course and exam at PATH Intl. annual and regional conferences. The forms can also be downloaded at [www.pathintl.org](http://www.pathintl.org) or by contacting the PATH Intl. office.
3. The center must complete and submit a PATH Intl. Application for Center Accreditation within 90 day of completion of the Standards Course and exam.
4. The PATH Intl. office will review all applications to determine eligibility. Only complete applications will be accepted. Complete applications are those that are received within the center's 90-day time limit and include the following:
  1. Any supporting documentation as detailed on the application
  2. A \$150 application fee
5. Centers with complete applications qualify for a site visit and will be notified. Centers that submit incomplete applications will be notified as to what steps to take in order to complete the application process.
6. Accepted applications are assigned site visitors. The PATH Intl. office will notify the assigned site visitors of the required visit. The center will be notified that visitor assignments have been made. Site visits must occur before the accreditation lapse date. All center representatives must have taken the Standards course and exam within 12 months of a site visit.
7. The lead visitor will contact the center representative to schedule a mutually agreeable date and time for the visit.
8. The lead visitor and associate visitor will conduct a site visit.
9. Immediately following the visit, the site visit forms are mailed to the PATH Intl. office for calculation. Results are calculated by the PATH Intl. office. Centers will be notified of the results of the visit. If the center received a non-passing score, the review and appeal process may be initiated. In order to initiate the review and appeal process, the center must submit a letter requesting an appeal. (See page 10-11)
10. In order to receive a passing score, centers must be in 100% compliance with all mandatory standards. Centers must also receive 75% or better in each category, Administration and Business, Facility, Equine Welfare and Management, Driving (if applicable), Ground (if applicable) and Medical/Mental Health (if applicable), an 80% or better in its overall score and 50% or better in



Mounted, Interactive Vaulting and Equestrian Skills (as applicable). Mandatory standards are deemed significant in the assurance of safety precautions, certifications and liability.

11. All site visit documentation is reviewed by the Accreditation Sub-Committee. Following this review, the center's accreditation status is determined.
12. Those centers who again achieve Professional Association of Therapeutic Horsemanship International Premier Accredited Center status will be sent official written notification of their status. A new plaque denoting premier accreditation status is sent to each center.

### **Section Summary**

- Premier accredited centers must be current center members in good standing to be eligible to begin the reaccreditation process.
- The PATH Intl. office will mail a reminder notification of reaccreditation one year prior to the lapse date and again six months prior to lapse date.
- Centers must apply for reaccreditation at least six months prior to accreditation lapse date.
- The designated center representative must complete the Standards Course and exam online or in person prior to submitting an application.
- Centers must complete the reaccreditation process, including the site visit prior to their accreditation lapse date.
- Failure to reaccredit prior to the accreditation lapse date may result in loss of original accreditation date.

## Tips for a Successful Accreditation Site Visit

Create an accreditation notebook.

- One standard per section with supporting documentation following.
  - The core, activity and services sections of the manual with one standard per page can be downloaded from the PATH Intl. website, [www.pathintl.org](http://www.pathintl.org)
- Highlight mandatory standards in one color; highlight standards that require something in writing in another color.

Using your resources

- Complete the Center Accreditation Self-Assessment form
- Delegate a section or specific standards to staff for review
- Find a mentor center
- Use PATH Intl. online education

### Typical Reasons a Center May Receive a No on a Standard

- A4: Some of the persons/personnel listed on the Organizational Chart were not covered in the job descriptions. All positions on the Organizational chart must have written job descriptions for this standard.
- A7: Center did not address ALL subparts and does not address both parts of the standard.
- A8: No written contract for leasing or borrowing a horse
- A11: No place for “Caregiver” information (if applicable) on a form.
- \*A14: Not all participants had a signed written liability form.
- A17: Not all participants had a signed physician’s statement.
- A23: Center did not update participant and volunteer information annually.
- A25: Centers (personnel, volunteers, and participants) did not rehearse emergency procedures
- \*A32: Participants were not wearing ASTM/SEI helmets (documented by label in helmet or printed certificate from ASTM-SEI website)
- \*F18: No emergency information posted adjacent to the phone. Take care when using a cell phone as the emergency phone – information still needs to be posted adjacent to that phone, placed in a designated location, and with signal and charged battery.  
*(suggestion might be to place it on a table or hook with emergency information posted next to it)*
- F20: First aid kits did not have written documentation of maintenance.
- F21: The equine emergency information was not placed in the equine first aid container.
- F31: The arena was not clear of objects that might injure equines, participants and personnel
- EQM1: No written evidence of an introductory screening process for prospective horses
- Signatures and/or dates missing; take care when using double sided forms – sometimes people forget to turn them over to complete.

## **Policies**

### **Policy on Disclosure and Confidentiality**

In keeping with its responsibility to centers and the public, the Professional Association of Therapeutic Horsemanship International Accreditation Sub-Committee has clearly delineated policies regarding confidentiality and disclosure.

### **Statement on Confidentiality**

The PATH Intl. Accreditation Sub-Committee maintains the confidentiality of information collected during the accreditation process. Accreditation materials are considered confidential. Accreditation Sub-Committee members and all visitors are required to sign a confidentiality statement.

During discussions related to review and evaluation of specific centers, strict safeguards of confidentiality are maintained. These meetings are closed and the minutes are kept confidential. Meetings may be open during discussion of general accreditation procedures. During open meetings, committee members avoid references to specific centers by name or through elaborate descriptions.

Statistical summaries that do not specifically reveal information about individual centers may be disclosed.

The Accreditation Sub-Committee shall not be responsible for attempts to use general information disclosed by the committee to identify specific centers.

### **Statement on Disclosure**

Information regarding the Accreditation Sub-Committee as described in official PATH Intl. documents is available to the membership and the public. Relevant policies and procedures are disseminated to centers on a regular basis.

PATH Intl. continuously updates a list of all Premier Accredited Centers.

If inquiries, written or verbal, are received regarding the accreditation status of a member center, the inquirer is told whether the center is accredited.

## Premier Accredited Center Reinstatement Policy

A PATH Intl. Premier Accredited Center within the center’s five year accreditation term that does not renew its center membership before the end of the 90-day membership grace period (per the Membership Grace Period Policy available on the PATH Intl. website) and thus has an expired membership must:

1. Rejoin the association
2. Follow a reinstatement process for accreditation

<b>Time Past Membership Expiration</b>	<b>Reinstatement Fee (as of 7/1/2011)</b>	<b>Reinstate Accreditation Status</b>
90 days to 6 months	\$50 + outstanding accreditation invoices	<ul style="list-style-type: none"> <li>• Complete the PATH Intl. Accreditation Self-Study form</li> <li>• Complete the Standards course and successfully complete the exam</li> </ul>
6 months to 1 years	\$100 + outstanding accreditation invoices	<ul style="list-style-type: none"> <li>• Complete the PATH Intl. Accreditation Self-Study form</li> <li>• Complete the Standards course and successfully complete the exam</li> <li>• Visit by site visitors. Site visitors travel expenses to be reimbursed by the center. Site visitors submit observations and recommendations to Accreditation Subcommittee. Accreditation Subcommittee makes final recommendation for reinstatement.*</li> </ul>

Centers that rejoin after one year will join as a PATH Intl. Center Member. Centers that wish to accredit after the change in status need to be a center member in good standing for one year after rejoining before applying for accreditation and must also pay any outstanding accreditation balances from their previous Premier Accredited Center status. Centers that do not reinstate may lose their original accreditation date.

\*The Accreditation Subcommittee will be informed of a pattern of grievance submitted to PATH Intl. (although not the specific grievances) as it considers a center reinstatement.

### Date

Reviewed by Programs & Standards Oversight Committee: June 2011  
 Forwarded to Membership Oversight Committee Region Reps for feedback: June 2011  
 Forwarded to Education Oversight Committee for feedback: June 2001  
 Reviewed and Recommended by Accreditation Subcommittee with suggested edits: January 2017  
 Approved by PATH Intl. Board of Trustees: November 2011

## **Accreditation Visit–Non-passing Score**

**Policy Proposed: 3/15/2012**

**Approved by CEO: 3/20/2012**

**Accepted by PATH Intl. Board: 3/26/2012**

1. Centers receiving a non-passing score on their accreditation and an unsuccessful appeal may submit for a revisit that will be scheduled no earlier than six months and no later than one year from notification of non-passing appeal.
2. Written request for another site visit will require the center's method of education and/or self-study to better understand the PATH Intl accreditation process and standards to ensure success. Examples may include enlisting a mentor, working with a Premier Accredited Center, change of center representative, having multiple center/program personnel attend accreditation training in person, arranging for a mock visit with a qualified visitor, or through other recognized arrangements.
3. The center will be required to pay the expenses of the revisit. Any PATH Intl. pre-accreditation training fees will be waived.
4. The site visitors from previous visit(s) will not be assigned to any revisit(s).

Recommended by Strategic Initiatives Review Committee: 3/20/2012

# APPLICATION FOR CENTER ACCREDITATION

## Center's Information:

Name of Center: \_\_\_\_\_ Center ID # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Center's three preferred dates for visit: \_\_\_\_\_

Name of Center Representative: \_\_\_\_\_ Center Rep. Member # \_\_\_\_\_

## Center Representative's Information:

Day Phone: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_\_) \_\_\_\_\_

Best time(s) to be reached by phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Complete the checklist below. All supporting materials submitted must be typed.**

- \_\_\_\_\_ completed a PATH Intl. Standards Course and exam on-line or the PATH Intl. Standards Course in-person and will be present the day our site visit takes place.  
Standards Course Completed:  Region Conference and date and location: \_\_\_\_\_  
 On-line Course and date completed: \_\_\_\_\_
- This application is being submitted within 90 days of completion of the Standards Course and exam.
- I have included the application fee in the amount of \$150 in an enclosed check made payable to PATH Intl.
- I have attached a list of all instructors (and therapists, if applicable) for each location that offers equine activities and therapies for our center. This list indicates each instructor's level of PATH Intl. Certification.
- I understand that my center must have at least one PATH Intl. Certified Instructor in order to be eligible for accreditation.
- I have attached a separate sheet listing each location at which our centers offers equine assisted activities. List each location(s) name, full street address and daytime phone number.
- I have attached typed directions (maps alone are not acceptable) to each location at which this center offers equine activities.
- I understand that each location listed will be scored on the PATH Intl. Core (Administrative and Business, Facility and Equine Welfare and Management) Standards, Activity (Mounted, Driving, Interactive Vaulting and Ground) Standards and Service (Equestrian Skills and Medical/Mental Health) Standards specific to the activities conducted at each location.
- This center offers the following activities and services and understands that we will be scored on these during our accreditation visit. (*Field Test Standards will not be applied to final score*)  
**Check all activities that apply:**  
 Mounted       Driving       Interactive Vaulting       Ground  
**Check all services that apply:**  
 Equestrian Skills       Medical/Mental Health
- I understand that we will be scored on the Standards current at the time of our site visit and that the Standards current at the time of my visit may be different than those studied during the CAT Course or Standards Course.
- I understand that the site visit should be completed in one day. If a second day is required, our center will incur the additional food and lodging expenses of the site visitors for the additional day.
- I understand that by submission of application and supporting materials I have indicated that our center is currently in full compliance with all Mandatory Standards and is prepared for an Accreditation site visit to take place.**

Signature of Center Representative: \_\_\_\_\_

Date: \_\_\_\_\_

**This form must be completed, signed and sent to PATH Intl. with supporting materials within 90 days of completion of the Center Accreditation Training Course. Make a copy of the application for your records. Please send original to the PATH Intl. Office: PATH Intl. • P.O. Box 33150 • Denver, CO 80233**

# Professional Association of Therapeutic Horsemanship International

## CENTER ACCREDITATION SELF ASSESMENT FORM

Center Name	City	State
Location (if satellite)		
Center Representative	Signature	Date
Lead Visitor	Signature	Date
Associate Visitor	Signature	Date

The following standards were scored during the visit:

- Core (A, Facility, EQM)     
 Activity:    Mounted    Driving    Interactive Vaulting    Ground  
Service:    Medical/Mental Health    Equestrian Skills

### Administration & Business Standards

Standard #	Yes	No	DNA
A1	<input type="checkbox"/>	<input type="checkbox"/>	
A2	<input type="checkbox"/>	<input type="checkbox"/>	
A3	<input type="checkbox"/>	<input type="checkbox"/>	
A4	<input type="checkbox"/>	<input type="checkbox"/>	
A5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A6	<input type="checkbox"/>	<input type="checkbox"/>	
A7	<input type="checkbox"/>	<input type="checkbox"/>	
A8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A9	<input type="checkbox"/>	<input type="checkbox"/>	
A10	<input type="checkbox"/>	<input type="checkbox"/>	
A11	<input type="checkbox"/>	<input type="checkbox"/>	
A12	<input type="checkbox"/>	<input type="checkbox"/>	
A13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*A14	<input type="checkbox"/>	<input type="checkbox"/>	
A15	<input type="checkbox"/>	<input type="checkbox"/>	
A16	<input type="checkbox"/>	<input type="checkbox"/>	
A17	<input type="checkbox"/>	<input type="checkbox"/>	
A18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A21	<input type="checkbox"/>	<input type="checkbox"/>	
A22	<input type="checkbox"/>	<input type="checkbox"/>	
A23	<input type="checkbox"/>	<input type="checkbox"/>	
A24	<input type="checkbox"/>	<input type="checkbox"/>	
A25	<input type="checkbox"/>	<input type="checkbox"/>	
A26	<input type="checkbox"/>	<input type="checkbox"/>	
A27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A31	<input type="checkbox"/>	<input type="checkbox"/>	
*A32	<input type="checkbox"/>	<input type="checkbox"/>	
A33	<input type="checkbox"/>	<input type="checkbox"/>	

### Admin & Business Standards (Continued)

Standard #	Yes	No	DNA
A34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A35	<input type="checkbox"/>	<input type="checkbox"/>	
A36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities Standards			
Standard #	Yes	No	DNA
F1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F4	<input type="checkbox"/>	<input type="checkbox"/>	
F5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F7	<input type="checkbox"/>	<input type="checkbox"/>	
F8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F9	<input type="checkbox"/>	<input type="checkbox"/>	
*F10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F15	<input type="checkbox"/>	<input type="checkbox"/>	
F16	<input type="checkbox"/>	<input type="checkbox"/>	
F17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*F18	<input type="checkbox"/>	<input type="checkbox"/>	
F19	<input type="checkbox"/>	<input type="checkbox"/>	
F20	<input type="checkbox"/>	<input type="checkbox"/>	
F21	<input type="checkbox"/>	<input type="checkbox"/>	
*F22	<input type="checkbox"/>	<input type="checkbox"/>	
F23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F24	<input type="checkbox"/>	<input type="checkbox"/>	
F25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*F26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Facilities Standards (Continued)

Standard #	Yes	No	DNA
F27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F33	<input type="checkbox"/>	<input type="checkbox"/>	
F34	<input type="checkbox"/>	<input type="checkbox"/>	
F35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Equine Welfare and Management Standards

Standards #	Yes	No	DNA
EQM1	<input type="checkbox"/>	<input type="checkbox"/>	
EQM2	<input type="checkbox"/>	<input type="checkbox"/>	
EQM3	<input type="checkbox"/>	<input type="checkbox"/>	
*EQM4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM5	<input type="checkbox"/>	<input type="checkbox"/>	
*EQM6	<input type="checkbox"/>	<input type="checkbox"/>	
EQM7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM9	<input type="checkbox"/>	<input type="checkbox"/>	
EQM10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Professional Association of Therapeutic Horsemanship International

## CENTER ACCREDITATION SELF ASSESSMENT FORM

Center Name	City	State
Location (if satellite)		
Center Representative	Signature	Date
Lead Visitor	Signature	Date
Associate Visitor	Signature	Date

The following standards were scored during the visit:

Core (A, Facility, EQM)

Activity:    Mounted    Driving    Interactive Vaulting    Ground  
Service:    Medical/Mental Health    Equestrian Skills

**Mounted Standards\*\***

Standard #	Yes	No	DNA
*MA1	<input type="checkbox"/>	<input type="checkbox"/>	
MA2	<input type="checkbox"/>	<input type="checkbox"/>	
*MA3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MA4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MA5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*MA6	<input type="checkbox"/>	<input type="checkbox"/>	

**Ground Standards**

Standard #	Yes	No	DNA
*GA1	<input type="checkbox"/>	<input type="checkbox"/>	

**Medical/Mental Health Standards Standard #**

Standard #	Yes	No	DNA
* MMH1	<input type="checkbox"/>	<input type="checkbox"/>	
* MMH2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH3	<input type="checkbox"/>	<input type="checkbox"/>	
* MMH4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH8	<input type="checkbox"/>	<input type="checkbox"/>	
MMH9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH17	<input type="checkbox"/>	<input type="checkbox"/>	
*MMH18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*MMH19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Driving Standards**

Standard #	Yes	No	DNA
*DA1	<input type="checkbox"/>	<input type="checkbox"/>	
*DA2	<input type="checkbox"/>	<input type="checkbox"/>	
DA3	<input type="checkbox"/>	<input type="checkbox"/>	
*DA4	<input type="checkbox"/>	<input type="checkbox"/>	
*DA5	<input type="checkbox"/>	<input type="checkbox"/>	
*DA6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*DA8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*DA9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA10	<input type="checkbox"/>	<input type="checkbox"/>	
*DA11	<input type="checkbox"/>	<input type="checkbox"/>	
*DA12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA13	<input type="checkbox"/>	<input type="checkbox"/>	
DA14	<input type="checkbox"/>	<input type="checkbox"/>	
DA15	<input type="checkbox"/>	<input type="checkbox"/>	
DA16	<input type="checkbox"/>	<input type="checkbox"/>	
*DA16	<input type="checkbox"/>	<input type="checkbox"/>	
*DA17	<input type="checkbox"/>	<input type="checkbox"/>	

**Equestrian Skills Standards\*\***

Standard #	Yes	No	DNA
ESK1	<input type="checkbox"/>	<input type="checkbox"/>	
ESK2	<input type="checkbox"/>	<input type="checkbox"/>	

\*Designates a mandatory standard

**Interactive Vaulting Standards\*\***

Standard#	Yes	No	DNA
*VA1	<input type="checkbox"/>	<input type="checkbox"/>	
VA2	<input type="checkbox"/>	<input type="checkbox"/>	
*VA3	<input type="checkbox"/>	<input type="checkbox"/>	
VA4	<input type="checkbox"/>	<input type="checkbox"/>	
*VA5	<input type="checkbox"/>	<input type="checkbox"/>	
*VA6	<input type="checkbox"/>	<input type="checkbox"/>	

**\*\*Mounted, Interactive Vaulting and Equestrian Skill Standards are required to meet all mandatory standards and score a 50% or higher in order to pass that section. This applies to these three sections ONLY.**



# Site Visit Score Calculation Form

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

Number: \_\_\_\_\_

## CORE STANDARDS

### **Administration and Business Standards**

1. Enter # of standards answered "yes": \_\_\_\_\_

2. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 2 is 1 or greater, the center scores 0% for Administration and Business Standards. Enter "0" on line 6.

3. Enter # of standards answered "DNA": \_\_\_\_\_

4. Subtract # on line 3 from "37": \_\_\_\_\_

5. Divide # on line 4 by # on line 1: \_\_\_\_\_

6. Multiply # on 5 by "100": \_\_\_\_\_ % Overall score for **Administration and Business Standards**

### **Facility Standards**

7. Enter # of standards answered "yes": \_\_\_\_\_

8. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 8 is 1 or greater, the center scores 0% for Facility Standards. Enter "0" on line 12.

9. Enter # of standards answered "DNA": \_\_\_\_\_

10. Subtract # on line 9 from "42": \_\_\_\_\_

11. Divide # on line 7 by # on line 10: \_\_\_\_\_

12. Multiply # on 11 by "100": \_\_\_\_\_ % Overall score for **Facility Standards**

### **Equine Welfare and Management Standards**

13. Enter # of standards answered "yes": \_\_\_\_\_

14. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 13 is 1 or greater, the center scores 0% for Equine Welfare and Management Standards. Enter "0" on line 18.

15. Enter # of standards answered "DNA": \_\_\_\_\_

16. Subtract # on line 15 from "10": \_\_\_\_\_

17. Divide # on line 13 by # on line 16: \_\_\_\_\_

18. Multiply # on line 17 by "100": \_\_\_\_\_ % Overall score for **Equine Welfare and Management Standards**

## ACTIVITY STANDARDS

### **Mounted Standards\*\***

19. Enter # of standards answered "yes": \_\_\_\_\_

20. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 19 is 1 or greater, the center scores 0% for Mounted Standards. Enter "0" on line 24.

21. Enter # of standards answered "DNA": \_\_\_\_\_

22. Subtract # on line 21 from "6": \_\_\_\_\_

23. Divide # on line 19 by # on line 22: \_\_\_\_\_

24. Multiply # on line 23 by "100": \_\_\_\_\_ % Overall score for **Mounted Standards**

### **Driving Standards**

25. Enter # of standards answered "yes": \_\_\_\_\_

26. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 25 is 1 or greater, the center scores 0% for Driving Standards. Enter "0" on line 30.

27. Enter # of standards answered "DNA": \_\_\_\_\_

28. Subtract # on line 27 from "17": \_\_\_\_\_

29. Divide # on line 25 by # on line 28: \_\_\_\_\_

30. Multiply # on line 29 by "100": \_\_\_\_\_ % Overall score for **Driving Standards**

## Site Visit Score Calculation Form

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

Number: \_\_\_\_\_

### **Interactive Vaulting Standards\*\***

31. Enter # of standards answered "yes". \_\_\_\_\_

32. Enter # of **mandatory** standards answered "no". \_\_\_\_\_

If the number entered on line 29 is 1 or greater, the center scores 0% for Interactive Vaulting Standards. Enter "0" on line 34.

33. Divide # on line 31 by "6": \_\_\_\_\_

34. Multiply # on line 33 by "100". \_\_\_\_\_ % Overall score for **Interactive Vaulting Standards**

### **Ground Standard**

35. Enter # of standards answered "yes". \_\_\_\_\_

36. Enter # of **mandatory** standards answered "no". \_\_\_\_\_

If the number entered on line 35 is 1 or greater, the center scores 0% for Ground Standards. Enter "0" on line 38.

37. Divide # on line 35 from "1" : \_\_\_\_\_

38. Multiply # on line 37 by "100". \_\_\_\_\_ % Overall score for **Ground Standards**

### **SERVICE STANDARDS**

#### **Equestrian Skills Standards\*\***

39. Enter # of standards answered "yes". \_\_\_\_\_

40. Divide # on line 39 from "2": \_\_\_\_\_

42. Multiply # on line 40 by "100". \_\_\_\_\_ % Overall score for **Equestrian Skills Standards**

#### **Medical/Mental Health Standards**

43. Enter # of standards answered "yes": \_\_\_\_\_

44. Enter # of **mandatory** standards answered "no": \_\_\_\_\_

If the number entered on line 43 is 1 or greater, the center scores 0% for Medical/Mental Health Standards. Enter "0" on line 30.

45. Enter # of standards answered "DNA": \_\_\_\_\_

46. Subtract # on line 45 from "19": \_\_\_\_\_

47. Divide # on line 46 by # on line 43: \_\_\_\_\_

48. Multiply # on line 47 by "100": \_\_\_\_\_ % Overall score for **Medical/Mental Health Standards**

In order to become accredited, the center must be in 100% compliance with all applicable mandatory standards; the center must receive 75% or better in each category with the exception that Mounted, Interactive Vaulting and Equestrian Skills categories must receive a 50% or better; and 80% or better in its overall score.

### **Total Score**

Add scores entered on lines:

6 \_\_\_\_\_

12 \_\_\_\_\_

18 \_\_\_\_\_

and applicable scores on lines:

24 \_\_\_\_\_

30 \_\_\_\_\_

34 \_\_\_\_\_

38 \_\_\_\_\_

42 \_\_\_\_\_

48 \_\_\_\_\_

**49. Total** \_\_\_\_\_

50. Divide # on line 49 by how many categories of standards were scored: \_\_\_\_\_ % Overall score for **Site Visit**

# **Professional Association of Therapeutic Horsemanship International Center Accreditation Site Visit Procedures**

Please find enclosed the forms necessary to conduct an accreditation site visit. An Accreditation Site Visit Confirmation form is included for each center you are being asked to visit. The form has been partially completed by the PATH International office to inform you of the associate visitor and the center representative's contact information. Once you confirm the date of the visit a mail, fax or email a copy of the form to the PATH International office.

## **Each assignment envelope contains the following:**

- Site Visit Assignment letter
- Site Visit Confirmation form
- Copy of center's accreditation application
- A copy of the directions to each location for the center
- Lead Visitor Pre-Visit Questionnaire form
- Core Standards Score form for each location listed on the application
- Comment Sheet for each location listed on the application
- Core and Specialty Standards Feedback form
- Immediate Corrective Action Notification form for each location listed on the application
- Field Test Standard Score form for any specialty and core standards checked on center's application
- Field Test Standard Comment Sheet for any specialty and core standards checked on center's application
- Field Test Standard Feedback form
- Accreditation Site Visit Evaluation form
- Accreditation Visitor Evaluation forms
- Reimbursement form/ Travel and Reimbursement Policies & Procedures
- Associate Visitor Training Course Application

## **Also included for centers that offer hippotherapy, driving, interactive vaulting or equine-facilitated psychotherapy:**

- Specialty Standards Score Form for each location listed on the application
- Comment Sheet for each location listed on the application

Please check to make sure all the forms you need are included. If additional forms are needed they can be downloaded from the PATH Intl. website, [www.pathintl.org](http://www.pathintl.org), under the committee section on your personal account.

Please contact the PATH Intl. office with any questions, 1-800-369-7433.

## PRE-VISIT PROCEDURES

You must schedule a mutually agreed upon date for the visit. If you have difficulty contacting the individuals at the phone numbers listed or the email, please contact the PATH Intl. office. It is critical that visits be scheduled promptly as some centers may only operate during specific months.

1. Contact the associate visitor first to see if they are available. Establish any dates that are not feasible before you contact the center representative. If your assigned associate visitor is unable to conduct the visit, please contact the PATH Intl. office and another associate visitor will be assigned to you.
2. Contact the center representative and schedule the visit to take place prior to twelve months from the completion date of the Standards Course or if applicable, the center's accreditation lapse date. Remember that the visit date must be mutually agreed upon all parties. If the center has satellite locations, more than one day may be required to conduct the visit. This information can be found on the application form for the center.
3. Once the date has been established, complete the blank portions of the Site Visit Confirmation form. Please print clearly in ink, so that the multiple copies will be clear and easy to read.
4. You are to mail, email or fax copies of the completed Site Visit Confirmation form to the appropriate people indicated on the bottom of the form within the time limit noted. This will ensure that all parties involved have the same information regarding the visit.
5. Verify the enclosed directions and obtain information from the center for any overnight accommodations that may be needed.

## POST-VISIT PROCEDURES

Following the conclusion of the visit, you are required to mail the site visit materials back to PATH Intl. on the day the visit occurs. Do not give the envelope to the center representative or associate visitor for them to mail for you; it is the lead visitor's responsibility to put it in a mailbox immediately following the visit. Failure to send the forms in a timely manner will result in your reimbursement check being held until the forms are received. Make two (2) copies of each form; the original is mailed to PATH Intl., keep one copy for your records and give one to the center.

1. Gather site visit materials and mail to PATH Intl. PO Box:
  - Original of all score form(s) and site visit comment sheets(s) completed for each location listed on the center's application.
  - Field Test Standard Score form(s) and comment sheet(s) completed for each location listed on the center's application.
  - Center's application for accreditation.
  - All completed feedback forms, evaluations, and unused forms.
2. Distribute remaining copies of above listed forms to appropriate parties according to the notation at the bottom of each form.
3. Upon receipt of the envelope by PATH Intl., the score form(s) will be graded. If the center receives a passing score, they will be notified of their accreditation status immediately.
4. If the center receives a failing score, the lead visitor will notify the center representative of the steps to follow. (The center will need to mail to the PATH Intl. office the Immediate Corrective Action form and written letter requesting an appeal within five (5) business days.)



**PROFESSIONAL ASSOCIATION OF THERAPEUTIC HORSEMANSHIP  
INTERNATIONAL ACCREDITATION PRE-VISIT QUESTIONNAIRE**



Center Name \_\_\_\_\_

Center Representative \_\_\_\_\_

Alternate \_\_\_\_\_

1. Total number of
  - a. Riders \_\_\_\_\_
  - b. Horses \_\_\_\_\_
  - c. Instructors \_\_\_\_\_
2. Is the facility  Owned  Leased
3. Are the horses  Owned  Leased  Borrowed
4. Total number of locations to visit \_\_\_\_\_ (Note: Each locations is scored on core standards and applicable activity and service standards)
  - a. Activity/service demonstration available at each location?  Yes  No
  - b. Mechanical lift demonstration scheduled?  Yes  No
5. Activity standards that will be scored during the visit  
 Mounted  Driving  Interactive Vaulting  Ground
6. Service standards that will be scored during the visit  
 Equestrian Skills  Medical/Mental Health
7. Field test standards to be scored during the visit  
 Core  Activity  Service
8. Center's licensed/credentialed practitioners and/or medical professionals:  
 OT  PT  SLP  Credentialed Mental Health Professional  
Other \_\_\_\_\_
10. Licensed/credentials practitioner will be available the day of the visit  Yes  No
11. Is your medical professional able to share their records  Yes  No
12. Confirmed manual edition to be used for scoring \_\_\_\_\_ (year)  Yes  No
13. Center representative will be conducting the visit  Yes  No
14. WiFi available at your center  Yes  No
15. Printer/copy machine available for use  Yes  No
16. Reviewed and confirmed directions to the center  Yes  No
17. Identified nearest hotel/motel to the center  Yes  No
18. Obtained directions from the hotel/motel to the center  Yes  No
20. Discussed alternate plans in the event of inclement weather  Yes  No
21. Evening telephone number to contact center representative the night before the visit:  
( ) \_\_\_\_\_



# PATHINTERNATIONAL

## CENTER ACCREDITATION SITE VISIT CONFIRMATION FORM

To be completed by the Lead Visitor and sent to appropriate parties (according to schedule below) no less than 3 (three) weeks prior to date on which the site visit is scheduled to occur.

Name of Center: \_\_\_\_\_

Center's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Center Representative: \_\_\_\_\_

Day Phone: (      ) \_\_\_\_\_ Evening Phone: (      ) \_\_\_\_\_

Fax Number: (      ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Lead Visitor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Day Phone: (      ) \_\_\_\_\_ Evening Phone: (      ) \_\_\_\_\_

Fax Number: (      ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Associate Visitor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Day Phone: (      ) \_\_\_\_\_ Evening Phone: (      ) \_\_\_\_\_

Fax Number: (      ) \_\_\_\_\_ Email Address: \_\_\_\_\_

**Visit Information:**

<input type="checkbox"/>	Scheduled day and date for site visit: _____
<input type="checkbox"/>	Anticipated time of arrival for visit: _____
<input type="checkbox"/>	Anticipated day and date of departure for visit: _____

If overnight lodging is needed please complete the following information so that you can be reached in case of an emergency.

Lodging Location: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: (      ) \_\_\_\_\_



# PATH INTERNATIONAL CENTER ACCREDITATION SCORE FORM

**Manual Release Date: January, 2018**

Center Name	City	State
Location (if satellite)		
Center Representative	Signature	Date
Lead Visitor	Signature	Date
Associate Visitor	Signature	Date

The following standards were scored during the visit:

- Core (A, Facility, EQM)     
 Activity:    Mounted    Driving    Interactive Vaulting    Ground  
Service:    Medical/Mental Health    Equestrian Skills

**Administration & Business Standards**

Standard #	Yes	No	DNA
A1	<input type="checkbox"/>	<input type="checkbox"/>	
A2	<input type="checkbox"/>	<input type="checkbox"/>	
A3	<input type="checkbox"/>	<input type="checkbox"/>	
A4	<input type="checkbox"/>	<input type="checkbox"/>	
A5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A6	<input type="checkbox"/>	<input type="checkbox"/>	
A7	<input type="checkbox"/>	<input type="checkbox"/>	
A8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A9	<input type="checkbox"/>	<input type="checkbox"/>	
A10	<input type="checkbox"/>	<input type="checkbox"/>	
A11	<input type="checkbox"/>	<input type="checkbox"/>	
A12	<input type="checkbox"/>	<input type="checkbox"/>	
A13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*A14	<input type="checkbox"/>	<input type="checkbox"/>	
A15	<input type="checkbox"/>	<input type="checkbox"/>	
A16	<input type="checkbox"/>	<input type="checkbox"/>	
A17	<input type="checkbox"/>	<input type="checkbox"/>	
A18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A21	<input type="checkbox"/>	<input type="checkbox"/>	
A22	<input type="checkbox"/>	<input type="checkbox"/>	
A23	<input type="checkbox"/>	<input type="checkbox"/>	
A24	<input type="checkbox"/>	<input type="checkbox"/>	
A25	<input type="checkbox"/>	<input type="checkbox"/>	
A26	<input type="checkbox"/>	<input type="checkbox"/>	
A27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A31	<input type="checkbox"/>	<input type="checkbox"/>	
*A32	<input type="checkbox"/>	<input type="checkbox"/>	
A33	<input type="checkbox"/>	<input type="checkbox"/>	

**Admin & Business Standards (Continued)**

Standard #	Yes	No	DNA
A34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A35	<input type="checkbox"/>	<input type="checkbox"/>	
A36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities Standards			
Standard #	Yes	No	DNA
F1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F4	<input type="checkbox"/>	<input type="checkbox"/>	
F5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F7	<input type="checkbox"/>	<input type="checkbox"/>	
F8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F9	<input type="checkbox"/>	<input type="checkbox"/>	
*F10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F15	<input type="checkbox"/>	<input type="checkbox"/>	
F16	<input type="checkbox"/>	<input type="checkbox"/>	
F17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*F18	<input type="checkbox"/>	<input type="checkbox"/>	
F19	<input type="checkbox"/>	<input type="checkbox"/>	
F20	<input type="checkbox"/>	<input type="checkbox"/>	
F21	<input type="checkbox"/>	<input type="checkbox"/>	
*F22	<input type="checkbox"/>	<input type="checkbox"/>	
F23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F24	<input type="checkbox"/>	<input type="checkbox"/>	
F25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*F26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Facilities Standards (Continued)**

Standard #	Yes	No	DNA
F27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F33	<input type="checkbox"/>	<input type="checkbox"/>	
F34	<input type="checkbox"/>	<input type="checkbox"/>	
F35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Equine Welfare and Management Standards**

Standards #	Yes	No	DNA
EQM1	<input type="checkbox"/>	<input type="checkbox"/>	
EQM2	<input type="checkbox"/>	<input type="checkbox"/>	
EQM3	<input type="checkbox"/>	<input type="checkbox"/>	
*EQM4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM5	<input type="checkbox"/>	<input type="checkbox"/>	
*EQM6	<input type="checkbox"/>	<input type="checkbox"/>	
EQM7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQM9	<input type="checkbox"/>	<input type="checkbox"/>	
EQM10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





# PATH INTERNATIONAL CENTER ACCREDITATION SCORE FORM

**Manual Release Date: January, 2018**

Center Name	City	State
Location (if satellite)		
Center Representative	Signature	Date
Lead Visitor	Signature	Date
Associate Visitor	Signature	Date

The following standards were scored during the visit:

- Core (A, Facility, EQM)     
 Activity:     Mounted     Driving     Interactive Vaulting     Ground  
Service:     Medical/Mental Health     Equestrian Skills

**Mounted Standards\*\***

Standard #	Yes	No	DNA
*MA1	<input type="checkbox"/>	<input type="checkbox"/>	
MA2	<input type="checkbox"/>	<input type="checkbox"/>	
*MA3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MA4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MA5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*MA6	<input type="checkbox"/>	<input type="checkbox"/>	

**Ground Standards**

Standard #	Yes	No	DNA
*GA1	<input type="checkbox"/>	<input type="checkbox"/>	

**Medical/Mental Health Standards Standard #**

Standard #	Yes	No	DNA
* MMH1	<input type="checkbox"/>	<input type="checkbox"/>	
* MMH2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH3	<input type="checkbox"/>	<input type="checkbox"/>	
* MMH4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH8	<input type="checkbox"/>	<input type="checkbox"/>	
MMH9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* MMH11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MMH17	<input type="checkbox"/>	<input type="checkbox"/>	
*MMH18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*MMH19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Driving Standards**

Standard #	Yes	No	DNA
*DA1	<input type="checkbox"/>	<input type="checkbox"/>	
*DA2	<input type="checkbox"/>	<input type="checkbox"/>	
DA3	<input type="checkbox"/>	<input type="checkbox"/>	
*DA4	<input type="checkbox"/>	<input type="checkbox"/>	
*DA5	<input type="checkbox"/>	<input type="checkbox"/>	
*DA6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*DA8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*DA9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA10	<input type="checkbox"/>	<input type="checkbox"/>	
*DA11	<input type="checkbox"/>	<input type="checkbox"/>	
*DA12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DA13	<input type="checkbox"/>	<input type="checkbox"/>	
DA14	<input type="checkbox"/>	<input type="checkbox"/>	
DA15	<input type="checkbox"/>	<input type="checkbox"/>	
DA16	<input type="checkbox"/>	<input type="checkbox"/>	
*DA16	<input type="checkbox"/>	<input type="checkbox"/>	
*DA17	<input type="checkbox"/>	<input type="checkbox"/>	

**Equestrian Skills Standards\*\***

Standard #	Yes	No	DNA
ESK1	<input type="checkbox"/>	<input type="checkbox"/>	
ESK2	<input type="checkbox"/>	<input type="checkbox"/>	

**\*Designates a mandatory standard**

**Interactive Vaulting Standards\*\***

Standard#	Yes	No	DNA
*VA1	<input type="checkbox"/>	<input type="checkbox"/>	
VA2	<input type="checkbox"/>	<input type="checkbox"/>	
*VA3	<input type="checkbox"/>	<input type="checkbox"/>	
VA4	<input type="checkbox"/>	<input type="checkbox"/>	
*VA5	<input type="checkbox"/>	<input type="checkbox"/>	
*VA6	<input type="checkbox"/>	<input type="checkbox"/>	

**\*\*Mounted, Interactive Vaulting and Equestrian Skill Standards are required to meet all mandatory standards and score a 50% or higher in order to pass that section. This applies to these three sections ONLY. Updated 01/18**



**Professional Association of Therapeutic Horsemanship  
International**

**CENTER ACCREDITATION SCORE FORM- FIELD TEST  
STANDARDS**

**Manual Release Date: January, 2018**

---

Center Name City State

---

Location (if satellite)

---

Center Representative Signature Date

---

Lead Visitor Signature Date

---

Associate Visitor Signature Date

Standard #	Yes	No	DNA
FTS1	<input type="checkbox"/>	<input type="checkbox"/>	

**\*Designates a mandatory standard**

**Completion of this form will have no bearing on final accreditation score or status.**

**PROFESSIONAL ASSOCIATION OF THERAPEUTIC HORSEMANSHIP  
INTERNATIONAL CORE, ACTIVITY AND SERVICE STANDARDS  
FEEDBACK FORM**



This form is **optional** and intended for additional feedback on standards or the accreditation process.

Thank you for taking the time to complete this form. The membership's input on all standards is valued and increases the effectiveness of the accreditation process. As the standards process is intended to be industry/peer driven, your suggestions and/or comments are welcomed by the PATH Intl. Accreditation Sub-Committee. Please attach an extra sheet if needed.

Center Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Day Phone: (\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_  
Fax Number: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Standard	Feedback

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

**PROFESSIONAL ASSOCIATION OF THERAPEUTIC HORSEMANSHIP  
INTERNATIONAL SITE VISIT COMMENT SHEET CORE, ACTIVITY AND  
SERVICE STANDARDS**



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

Center Representative: \_\_\_\_\_

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

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

Location (if satellite): \_\_\_\_\_

Standard	Comments	Initials

\_\_\_\_\_  
Center Representative Date

\_\_\_\_\_  
Lead Visitor Date

\_\_\_\_\_  
Associate Visitor Date

**PROFESSIONAL ASSOCIATION OF THERAPEUTIC HORSEMANSHIP  
INTERNATIONAL SITE VISIT COMMENT SHEET FIELD TEST  
STANDARDS**



Center Name: \_\_\_\_\_  
 Center Representative: \_\_\_\_\_  
 Lead Visitor: \_\_\_\_\_  
 Associate Visitor: \_\_\_\_\_  
 Location (if satellite): \_\_\_\_\_

Standard	Comments	Initials

\_\_\_\_\_

Center Representative Date

\_\_\_\_\_

Lead Visitor Date

\_\_\_\_\_

Associate Visitor Date

**PATH INTERNATIONAL CENTER ACCREDITATION  
IMMEDIATE CORRECTIVE ACTION  
NOTIFICATION NON-COMPLIANT MANDATORY  
STANDARD(S)**



**PATH INTL. CENTER ACCREDITATION SITE VISIT**

The purpose of this notification is to encourage you to immediately bring your center into full compliance with all mandatory standards to better ensure safety at your center.

On this date \_\_\_\_\_ during the PATH Intl. center accreditation visit for:  
(date of visit)

\_\_\_\_\_  
(Center name)

\_\_\_\_\_  
(Date)

The visitor(s) noted non-compliance with the following mandatory standard(s): \_\_\_\_\_

As these standards are deemed to be significant in the assurance of safety precautions, certifications and liability, you are required to take immediate corrective action. The following are steps we as visitors feel should be taken immediately to come into compliance with the above state standard(s):

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

The corrective actions noted above must be completed immediately. Documentation of such action must be sent to the PATH Intl. office postmarked no later than five (5) working days from this notice along with a written request for appeal addressed to the PATH Intl. Accreditation Sub-Committee. Failure to do so will result in an automatic failing score.

I certify that the lead visitor has discussed the above situation with me and I fully understand that to be considered for Premier Accredited Center status based upon results of the site visit, I must respond to PATH Intl. in writing within the five (5) working day time limit. I understand that completion of this process in no way guarantees accreditation status will be granted, and my center must follow the review/appeal process to be considered for accreditation status.

\_\_\_\_\_  
Center Representative Signature

\_\_\_\_\_  
Date

I certify I have discussed the above situation with the center representative, he/she fully understands the situation and the actions that must be taken:

\_\_\_\_\_  
Lead Visitor Signature

\_\_\_\_\_  
Date

The immediate corrective action documentation, visit score form, and visit comment sheets will be submitted to the PATH Intl. Accreditation Sub-Committee for their review at their next meeting. The Accreditation Sub-Committee will determine the final accreditation status of the center.

Original paperwork to PATH Intl. office, one copy to PATH Intl. center, one copy to lead visitor

Return to: PATH Intl. PO Box 33150 Denver, CO 80233

Updated 01/18



**PATH INTERNATIONAL CENTER ACCREDITATION SITE VISITOR EVALUATION FORM**

**To be completed by the center representative. Please return to PATH Intl. office within one week of visit**

PATH Intl. Center: \_\_\_\_\_  
 Center Representative: \_\_\_\_\_  
 Lead Visitor: \_\_\_\_\_  
 Associate Visitor: \_\_\_\_\_

Please rate each site visitor in each category, using the following scale:  
 1= unsatisfactory    2=poor    3=satisfactory    4=good    5= excellent

Performance Area	Lead	Associate	Comments
Scheduling for the visit was made in a considerate & timely fashion		N/A	
The visitor arrived on time, completed introductions, reviewed the day's schedule & explained the visit process			
The visitor viewed all the activities			
The visitor interviewed personnel and participants			
The visitor viewed the required documentation			
The visitor encouraged use of the comment form for all "NO" scores		N/A	
The visitor refrained from expressing opinion, preference or advice			
The visitor conducted the visit in a professional & objective manner			
The visitor was courteous & friendly			
The visitor completed the entire score form prior to leaving	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
The visitor gave the center representative a completed score form and comment form	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	

Additional Comments: \_\_\_\_\_

Center Representative Signature: \_\_\_\_\_

Date of Visit: \_\_\_\_\_

Please return to: PATH Intl., PO Box 33150, Denver, CO 80233



**PATH INTERNATIONAL ACCREDITATION VISITOR EVALUATION FORM**

**To be completed by visitors following each visit. Return to PATH Intl. office within one week of visit**

The individual listed below conducted a visit with me as a:     Lead Visitor  Associate Visitor  
 Visitor's Name: \_\_\_\_\_ Site Visited: \_\_\_\_\_

Please rate the visitor in each category, using the following scale:  
 1= unsatisfactory    2=poor    3=satisfactory    4=good    5= excellent

For any "Unsatisfactory" or "poor" response, please provide a comment. Attach extra sheets if necessary.

<b>Performance Area</b>	<b>Lead</b>	<b>Associate</b>	<b>Comments</b>
Timeliness of communication to schedule visit			
Conducted interviews			
Accurate and thorough observation of operational practices and programs			
Compliance decisions and saying "no"			
Handling disagreements			
Accuracy in scoring		N/A	
Used comment forms		N/A	
Provided accurate information and positive support of PATH Intl.			
Refrained from expressing personal opinion, preference, and/or advice prior to sealing documents			
Exhibited professionalism in conduct and appearance			
General comments			

If the person being evaluated is an associate visitor do you recommend him/her for lead status?

Yes             No

Signature of Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Evaluator: \_\_\_\_\_