The attached accreditation criteria has been issued to provide all interested parties with guidelines on implementing performance features of the applicable standards referenced herein. The criteria was developed and adopted following public hearings conducted by the International Accreditation Service, Inc. (IAS), Accreditation Committee and is effective on the date shown above. All accreditations issued or reissued on or after the effective date must comply with this criteria. If the criteria is an updated version from a previous edition, solid vertical lines (|) in the outer margin within the criteria indicate a technical change or addition from the previous edition. Deletion indicators (→) are provided in the outer margins where a paragraph or item has been deleted if the deletion resulted from a technical change. This criteria may be further revised as the need dictates.

IAS may consider alternate criteria provided the proponent submits substantiating data demonstrating that the alternate criteria are at least equivalent to the attached criteria and otherwise meet applicable accreditation requirements.

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ACCREDITATION CRITERIA FOR CURRICULUM DEVELOPMENT FOR WORK FORCE QUALIFICATION PROGRAMS

1.0 INTRODUCTION

1.1 Scope: These criteria set forth requirements for obtaining and maintaining International Accreditation Service, Inc. (IAS), accreditation for curriculum development for work force qualification programs. The scope of these criteria does not extend to users of approved curricula (training schools).

1.2 References: Publications listed below refer to current editions (unless otherwise stated), current editions of related construction codes published by the International Code Council or codes duly adopted by the relevant jurisdiction.

1.2.1 Conformity Assessment

- ISO/IEC 9000, Quality management systems – Fundamentals and vocabulary.
- ISO/IEC 17024, Conformity assessment – General requirements for bodies operating certification of persons.
- ISO/IEC 17000, Conformity assessment – Vocabulary and general principles.
- ISO/IEC 9001, Quality management systems – Requirements.
- AERA/APA/NCME, Standards for Educational and Psychological Testing.
- IAS Policy on Accreditation Certificate Validity.

1.2.2 Curriculum Development: Accredited agencies shall provide evidence that the accepted program(s) comply with recognized and published professional standards of practice.

1.2.3 Document: Guideline or support provided to the user of the approved programs in any media or form as prescribed by the quality management system.

1.2.4 Management: Individuals who are responsible for administration of the accredited agency.

1.2.5 Nonconforming Product or Service: Any products or services which may be provided by accredited agencies which are outside of the scope of accreditation as defined by IAS.

1.2.6 Process: All activities which contribute to delivery of an approved service.

1.2.7 Reassessment: Follow-up assessment of an accredited agency in accordance with the applicable IAS Rules of Procedure.

1.2.8 Supplier: Approved external suppliers of services which are within the scope of accreditation.

2.0 DEFINITIONS

2.1 Accreditation: Formal third-party recognition that a body fulfills specified requirements and is competent to carry out specific tasks.

2.2 Accreditation Committee: A committee of experts appointed by the IAS Board of Directors who represent governmental entities which regulate public safety laws.

2.3 Applicant: A legal entity which is applying for IAS accreditation as a curriculum development and/or instructor training agency.

2.4 Approved Curriculum: A curriculum which is developed or reviewed by an IAS-accredited agency using a curriculum development or curriculum review process approved by IAS.

2.5 Approved Trainer: An instructor who has completed training by an IAS-accredited agency using an approved instructor-training process.

2.6 Assessment: On-site evaluation conducted by IAS-trained assessors and technical experts.

2.7 Contract Staff: A third-party individual or entity hired by the accredited agency to perform services which are within the scope of accreditation.

2.8 Customer: Authorized providers of training who use approved curricula, and all those who benefit from this training.

2.9 Document: Guideline or support provided to the user of the approved programs in any media or form as prescribed by the quality management system.

2.10 Management: Individuals who are responsible for administration of the accredited agency.

2.11 Nonconforming Product or Service: Any products or services which may be provided by accredited agencies which are outside of the scope of accreditation as defined by IAS.

2.12 Process: All activities which contribute to delivery of an approved service.

2.13 Reassessment: Follow-up assessment of an accredited agency in accordance with the applicable IAS Rules of Procedure.

2.14 Record: Any evidence of an activity or process.

2.15 Requirement: External legal, contractual and professional obligations of the accredited agency related to approved curricula and instructor training.

2.16 Supplier: Approved external suppliers of services which are within the scope of accreditation.

3.0 ADMINISTRATION

The applicant shall provide information on the following:

3.1 Corporate: Documentation that the agency is a legal entity. Copies of organizational charts, and descriptive information on the corporate structure. Copy of the vision and mission statement of the organization.

3.2 Facilities: The applicant agency shall have adequate facilities to fully support the activities being accredited. Detailed description of the physical plant and infrastructure shall be submitted.

3.3 Financial: The agency shall have the financial resources necessary to administer curriculum development programs in accordance with the requirements of this accreditation criteria, and to cover associated liabilities and commitments.

3.4 Staffing

3.4.1 Organizational chart providing employee names and titles for all full- and part-time staff positions. Person(s) who are responsible for maintenance of the quality management system shall be identified. They shall

IAS/QP/007
June 7, 2013
Revised September 2, 2014
have access to top management and shall have appropriate authority to implement and maintain the requirements of this accreditation criteria.

3.4.2 Job descriptions of staff positions, including information on minimum qualifications, education and experience.

3.4.3 Issues pertaining to human resources: hiring, mentoring, monitoring, and training shall be identified.

3.4.4 Maintenance of staff qualifications and competence.

3.5 Target Market: A description of the market(s) for which the curriculum program is designed.

3.6 Procurement: A listing of services which are outsourced, and a copy of the service contracts which includes the approval and quality-assurance process.

3.7 Contract Staff: A listing of persons or agencies which are contracted to perform services which are pertinent to accreditation.

3.8 Product Promotion: A description of public promotional literature related to approved programs, to include brochures, catalogues, websites, and advertisements.

3.9 Quality Management System: The accredited agency shall provide written Standard Operating Procedures (SOP) describing the following:

3.9.1 Internal Audits: Planning, frequency, auditor training and reporting.

3.9.2 Management Review: Areas for improvement, effectiveness of systems, monitoring of process measures, review of quality policy, and results of internal audit.

3.9.3 Human Resources: Policy and procedures for recruiting, hiring, training, mentoring and monitoring performance of staff and vendors.

3.9.4 Complaints: Registration and processing of complaints, and responses to complaints.

3.9.5 Customer Satisfaction: A method of surveying and documenting the satisfaction levels of customers, and actions taken to resolve identified weaknesses.

3.9.6 Appeals: Documented due-process for handling appeals from users of approved curricula.

3.9.7 Process Monitoring: Written description of the measures for monitoring the processes and product quality.

3.9.8 Document and Data Control: List of documents, with information on review and approvals, issue and distribution controls, and information security. Documents shall be legible and readily identifiable. Controls on obsolete documents need to be defined.

3.9.9 Records Control: List of controls on record storage, protection, retrieval, retention time, and disposition. Records shall be legible and readily identifiable.

3.9.10 Corrective and Preventive Action: Description of the process by which identified weaknesses are resolved, root causes are identified, and preventive measures are implemented.

3.9.11 Benchmarking: Description of “best practices” for the scope of service, identifying the minimum quality standards which are practiced by the accredited agency for approved programs.

3.9.12 Library Management: A library of quality and technical standards which may be referenced by the accredited agency for approved programs.

4.0 TECHNICAL STANDARDS

The applicant shall provide information on the following:

4.1 Organizational Structure: Documents related to structure and assigned responsibilities, structural relationships with training agencies, oversight committee(s) (structure, roles, responsibilities and actions), staffing and workload.

4.2 Subcontracting: Policies and procedures related to subcontract work.

4.3 Product Development and Maintenance: Policies, procedures and documents related to the following:

4.3.1 Analysis of Data: Job analysis research, needs analysis, and instructional objectives.

4.3.2 Program Design: Instructional group size, student prerequisites, instructional format, instructional strategies, training environment, media selection and lesson planning.

4.3.3 Product Development: Written media, audio-visual media, use of application examples/non-examples, and evaluation instruments.

4.3.4 Program Implementation: Marketing, instructor training, formative student evaluations, revisions for individual student needs, and implementation of training.

4.3.5 Product Evaluation: Student evaluations, cumulative evaluation, effectiveness evaluation report, and training follow-up.

4.4 Confidentiality: Policy on confidentiality. Maintenance of confidentiality statements. Conflict of interest statements for staff, volunteers and vendors.

4.5 Security: Office access, access to electronic and paper documents, subcontractor adherence to security policy, and protection of trademark and copyright on the product.

4.6 Assessment of Student Learning: Development and validation of pre- and post-training student assessments.

4.7 Surveillance: Procedures to monitor application of curricula by authorized users.

4.8 Product Recalls and Updates: Policy and procedures for recall or replacement of defective products and for release of updates to products, to assure that the current curriculum protects worker and public safety, and reflects current “best practices.”

IAS/QP/007
June 7, 2013
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4.9 Use of Logos and Marks: Policy and procedures defining appropriate use of logograms and trademarks.

5.0 ON-SITE ASSESSMENTS AND ACCREDITATION

On-site assessments are required to determine the degree of compliance with the accreditation criteria. A team of trained assessors and subject matter experts shall visit each applicant organization to conduct a thorough review of the organization and its practices.

5.1 Preassessment: Prior to scheduling the full on-site assessment, IAS may require a two-day visit to the applicant agency by the lead assessor and a subject matter expert, to review and comment on its degree of compliance with the accreditation criteria.

5.2 Full Assessment: In consultation with the applicant, the team leader schedules the full on-site assessment to verify compliance with the accreditation criteria.

Upon conclusion of the on-site visit, the team leader provides the applicant agency with verbal feedback, with specific information on major nonconformances, if any. Within 30 days of the assessment, a formal report is submitted to IAS by the team leader for transmission to the applicant agency.

5.3 Follow-up Assessment: In some cases, the team leader may recommend to IAS that a follow-up assessment take place to verify implementation of corrective measures taken by the applicant agency in response to the full assessment. Typically, follow-up assessments include the team leader and another member for one or two days on-site.

5.4 Full Accreditation: If the final report submitted by the IAS team leader indicates full compliance with requirements, the applicant agency is placed on a list for final review by IAS for issuance of the formal accreditation certificate. Accredited agencies will be subject to an on-site surveillance assessment at the conclusion of the initial year of accreditation.

5.5 Reassessment: IAS will conduct an on-site reassessment of accredited agencies at a minimum of once every two years following the date of the surveillance assessment, for verification of continued compliance with IAS accreditation requirements.

6.0 REPORT ON CHANGES

To maintain accredited status, the accredited agency must, at all times, be in compliance with the rules of procedure and the accreditation criteria. Annual reports addressing changes in key staff, changes in facilities or operating procedures, or any problems that could potentially impact the entity’s accredited status must be prepared by the accredited agency and submitted to IAS.