

Standards Used to Assess Collegiate Alcohol Programs





The Network is the national organization that proactively addresses the issue of alcohol, other drugs, and violence in order to promote healthy campus environments through self-regulatory initiatives, information dissemination, and technical assistance. The Network serves as a liaison between the U.S. Department of Education and member institutions as well as other higher education professional organizations. Member institutions encourage and enhance local, state, regional, and national initiatives through a commitment to shared standards for policy development, educational strategies, enforcement, evaluation, and community collaboration.



Are You a Member of The Network?

- http://www.thenetwork.ws/dir ectory/search.php?ms=IL
- 96 institutions are indicated
- If your institution is a member, then a chief executive officer has agreed that you would meet these standards.



The Network Standards

- Policy
- Education & Student Assistance
- Assessment
- Campus/Community
 Collaboration



The Network Standards Policy

 Annually promulgate policy, consistent with applicable federal, state and local laws, using such means as the student and faculty handbooks, orientation programs, letters to students and parents, residence hall meetings, and faculty and staff meetings.



The Network Standards Policy

- Develop policy that addresses both individual behavior and group activities
- Define the jurisdiction of the policy carefully to guarantee the inclusion of a campus property. Define campus-based standards to off-campus events involving students.



The Network Standards Policy

- Stipulate guidelines on marketing and hosting off-campus sponsored events involving students, faculty, staff, and alumni at which alcoholic beverages are served.
- State institutional commitment to the education and development of students, faculty, and staff regarding AODV issues.



- Provide a system of accurate, current information exchange on the adverse consequences related to alcohol abuse and other drug use for students, faculty, and staff.
- Promote and support alcohol-free programming options.



• Provide, with peer involvement, a system of assessment, intervention, education, treatment, and /or referral services for students, faculty and staff utilizing collaborative relationships among and between community groups, agencies, and the institution.



- Include alcohol and other drug information for students and their family members in student orientation programs.
- Support and encourage faculty in incorporating alcohol and other drug education into the curriculum, where appropriate.



• Develop a coordinated effort across campus to offer a student assistance program encompassing alcohol, other drug, and related violence education, assessment, treatment and referral.



The Network Standards Enforcement

- Publicize all alcohol and other drug policies.
- Consistently enforce alcohol and other drug-related policies.



The Network Standards Enforcement

- Exercise appropriate sanctions for violent acts as harassment; verbal, physical and sexual abuse, as well as disruptive and destructive behavior
- Exercise appropriate sanctions for the illegal sale or distribution of alcohol and illicit drugs.



The Network Standards Assessment

- Assess the institutional environment as it contributes to or mitigates against alcohol and other drug problems and related violence.
- Assess campus awareness, attitudes, and behaviors regarding alcohol and other drug use and apply results to program development.



The Network Standards Assessment

- Collect and related AODV information from police or security reports to guide program development.
- Collect summary data regarding alcohol and other drug related disciplinary actions, including violent and other disruptive behavior and use it to guide program development.



The Network Standards Community Collaboration

- Establish and maintain effective working relationships with external agencies, groups, and individuals whose operations are relevant to our mission and goals.
- Address campus/community issues of alcohol and other drug access, availability, and enforcement at local, regional and state levels.



The Network Standards Community Collaboration

 Consider the inclusion of the following agencies and groups: law enforcement, judicial system, state liquor control license agency, hospitality industry (including retailers), local government, neighborhood associations, faith community, family/parents, school systems, area health care & treatment providers, & others as appropriate.



The Network Standards Community Collaboration

 Facilitate the development, implementation and evaluation of a strategic plan that addresses underage AODV issues in the community and state.





American College Health Association Standards of Practice for Health Promotion in Higher Education, Revised 2004

ACHA Guidelines

Standards of Practice for Health Promotion in Higher Education

Second Edition, August 2004

Introduction and Guiding Principles

Student learning is at the core of the higher education academic mission. Health promotion serves this mission by supporting students and creating healthy learning environments. A wide range of professionals work to enhance health, both on the campus and individual level. It is common to find health educators, nurses, physicians, counselors, faculty, and staff from residence life, student activities, campus recreation and other Student Affairs departments leading or collaborating on health promotion initiatives that advance student learning and the mission of higher education. Programs and policies surrounding issues such as alcohol and other drug use, sexual misconduct, and mental health are increasingly viewed as campuswide concerns that affect student health and academic progress.

In 1996, the American College Health Association (ACHA) appointed the Task Force on Health Promotion in Higher Education to study the scope and practice of health promotion in colleges and universities (Zimme, et al., 2003). The goal of the task force was to develop standards of practice to enhance the equality of health promotion in higher education, recognizing the multilisciplinary background of professionals who work to advance the health of students and campus communities. In 2001, ACHA published the culmination of that research is the first edition of Sandards of Practice for Handrich Promotion to Higher Education (Sandards) (ACHA, 2001).

Following three years of feedback from professionals who practice health promotion on college

campuses, ACHA's Committee on Standards of Practice for Health Promotion in Higher Education presents the second edition of the Seen day's. Like the first edition, the 2004 edition of the Sundards provides measurable guidelines for enhancing the quality of health promotion programs in colleges and universities. For the individual practitioner, the Seawferds are designed to guide daily efforts, assess individual skills and capacities, and assist in decisions to improve practice through professional development. The Sauvánnis also delineate a set of indicators to evaluate comprehensive health promotion programs and guide recognition of those programs. The aims of this second edition are to articulate the Sandards in simplified language with dear, measurable indicators and to disseminate them to the wide range of professionals who practice health promotion on college campuses.

The Sauviant's are guided by several premises about the mission and scope of practice of health promotion in higher education as well ashealth itself. These assumptions include the following:

- In the broadest sense, health encompasses the capacity of individuals and communities to reach their potential.
- Health tanscends individual factors and includes cultural, institutional, socioeconomic, and political influences.
- Health is not solely a biomedical quality measured through clinical indicators, a view that prevails in today's society.

2 / Standards of Practice for Health Promotion in Higher Education

The mission of health promotion in colleges and universities is to advance the health of students and to contribute to the creation of healthy and socially just campus commant its. Thus, health promotion practitioners at the lex

- Reduce risk for individual illness and injury.
- Enhance health as a strategy to support student learning.
- Advocate for safety, social justice, economic opportunity, and human dignity.
- Health and so dail justice are in estricably connected. Therefore, health promotion practitioners strive to:
- Identify and address the complex social, cultural, economic, and political factors that may contribute to or compromise the health of individuals or communities.

The scope of practice of health promotion on college campuses includes both individual and environmental approaches. Thus, health promotion constitutions.

- Reduce the risk of individual illness and injury, as well as build individual capacity.
- Address larger institutional issues, community factors, and public policies that affect the health of students.

Health promotion and the academic mission of higher education are natural allies. Health promotion practitioners in colleges and universities:

- Support the academic mission of student learning by assisting students in leading healthier lives.
- Engage individuals who will become political, social and economic decision makers, thereby

Introduction that welcomes multidisciplinary practitioners and delineates the premises that guide the *Standards*

Zimmer CG, Hill MH, Somná, SR. (2009). Ascope-of-practice survey leading to the development of Securioris of Practice for Health Protection in Higher Education, Journal of American College Health, 20(8), 247-454.

American College Health Association (ACHA) (2001). Sunderds of practic for health promotion to higher adsession. Baltimore, MD: American College Health Task Force on Health Promotion in Higher Education.



ACHA SPHPHE

for alcoho

Standard 1. Integration with the Learning Mission of Higher Education

Effective practice of health promotion in higher education requires practitioners to incorporate individual and community health promotion in littatives into the learning mission of higher education.

- Develop health-related programs and policies that support student learning,
- 1.2 Incorporate health promotion initiatives into academic research, courses, and programs.
- 1.3 Disseminate research that demonstrates the effect of individual health behaviors and environmental factors on student learning.

Standard 2. Collaborative Practice

Effective practice of health promotion in higher education requires practitioners to support campus and community partnerships to advance health promotion initiatives.

- Advocate for a shared vision that health promotion is the responsibility of all campus and community members.
- 2.2 Develop and participate in campus and community partnerships that advance health promotion initiatives.
- 2.3 Utilite campus and community resources to maximize the effectiveness of health promotion initiatives.
- 2.4 Achecate for campus, local, state, and national policies that address campus and community health issues.
- 25 Achocate for the institutionalization of health promotion initiatives through induston in campus strategic planning and resource allocation processes.

Standards of Practice for Health Promotion in Higher Education / 3

Standard 3. Cultural Competence

Effective practice of health promotion in higher education requires practitioners to demonstrate cultural competency and inclusiveness in advancing the health of individuals and communities.

- Identify the social, cultural, political, and economic disparities that influence the health of students.
- 3.2 Design health promotion initiatives that reflect the social, cultural, political, and economic diversity of students.
- 3.3 Develop health promotion mission statements, program policies, staff recruitment and retention practices, and professional development goals that reflect the social, cultural, political, and conomic diversity of the campus.
- 3.4 Provide leadership for campuswide understanding of the connection between culture, identity, social justice, and student health status.

Standard 4. Theory-Based Practice

Effective practice of health promotion in higher education requires practitioners to understand and apply professionally recognized and tested theoretical approaches that address individual and community health.

- 4.1 Fewtew health promotion research from interdisciplinary sources as a guide for the development of health promotion initiatives.
- 4.2 Apply professionally recognized methods and tested theories to the development of health promotion initiatives.
- 4.3 Articulate the theoretical frameworks used in health promotion decision-making to the campus community.

4/ Standards of Practice for Health Promotion in Higher Education

Standard 5. Evidence-Based Practice

Effective practice of health promotion in higher education requires practitioners to understand and apply evidence-based approaches to health promotion.

- Review data gathered from published research on campus, local, state, and national health priorities.
- Conduct population-based assessments of health status, needs, and assets of students.
- 5.3 Conduct environmental assessments of campuscommunity health needs and resources.
- 5.4 Develop measurable goals and objectives for health promotion initiatives.
- 5.5 Evaluate health promotion initiatives using valid and reliable quantitative and qualitative approaches.
- 5.6 Report evaluation data and research results to students, faculty, staff, and campus community.

Standard 6. Continuing Professional Development and Service

Effective practice of health promotion in higher education requires practitioners to engage in on-going professional development and service to the field.

- Apply ethical principles to the practice of health promotion.
- 6.2 Participate regularly in formal professional development.
- 6.3 Assist others in strengthening their health promotion skills.

- 6 Standards of Practice
- 24 Indicators

Achrowledgements

The 2003-2004 Standards of Practice for Henth Promotion in Higher Education Committee thanks provious task force nearbern 1993-2003 for their important contribution to the development of the Standards.

Written By

The 2003-2004 Standards of Practice for Heath Promotion in Higher Education Committee, Pairton Fabiano, PhD, and Sunn Remody, PhD, Co-Chaire. American College Health Association

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8/04

acha.org/info resources/SPHPHE statement.pdf

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ACHA SPHPHE

- Six Standards
 - Integrate with the Learning Mission of Higher Education
 - Collaborative Practice
 - Cultural Competence
 - Theory-Based Practice
 - Evidence-Based Practice
 - Continuing Professional Development and Service



Integrate with the Learning Mission of Higher Education

• Effective practice of health promotion in higher education requires professionals to incorporate individual and community health promotion initiatives into the learning mission of higher education



Integrate with the Learning Mission of Higher Education

- Develop health-related programs and policies that support student learning
- Incorporate health promotion initiatives into academic research, courses, and programs
- Disseminate research that demonstates the effect of individual health behaviors & environmental factors on student learning



Collaborative Practice

• Effective practice of health promotion in higher education requires professionals to support campus and community partnerships to advance health promotion initiatives.



Collaborative Practice

- Advocate for a shared vision that health promotion is the responsibility of all campus and community members
- Develop and participate in campus and community partnerships that advance health promotion initiatives
- Utilize campus and community resources to maximize the effectiveness of health promotion initiatives



Collaborative Practice

- Advocate for campus, local, state and national policies that address campus and community health issues
- Advocate for the institutionalization of health promotion initiatives through inclusion in campus strategic planning and resource allocation processes



Cultural Competence

• Effective practice of health promotion in higher education requires professionals to demonstrate cultural competency and inclusiveness in advancing the health of individuals and communities



Cultural Competence

- Identify the social, cultural, political, and economic disparities that influence the health of students.
- Design health promotion initiatives that reflect the social, cultural, political, and economic diversity of students.



Cultural Competence

- Develop health promotion mission statements, program policies, staff recruitment, retention practices and professional development goals that reflect thesocial, cultural, political, and economic diversity of the campus.
- Provide leadership for campus wide understanding of the connection between culture, identity, social justice, and student health status.



Theory-Based Practice

 Effective practice of health promotion in higher education requires professionals to understand and apply professionally recognized and tested theoretical approaches that address individual and community health



Theory-Based Practice

- Review health promotion research from interdisciplinary sources as a guide for the development of health promotion initiatives.
- Apply professionally recognized methods and tested theories to the development of health promotion initiatives
- Articulate the theoretical frameworks used in health promotion decision making to the campus community



Evidence-Based Practice

 Effective practice of health promotion in higher education requires professionals to understand and apply evidencebased approaches to health promotion



Evidence-Based Practice

- Review data gathered from published research on campus, local, state, and national health priorities.
- Conduct population-based assessments of health status, needs, and assets of students.
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Evidence-Based Practice

- Develop measurable goals and objectives for health promotion initiatives
- Evaluate health promotion initiatives using valid and reliable quantitative and qualitative approaches
- Report evaluation data and results to students, faculty, staff, and campus community.



Continuing Professional Development and Service

 Effective practice of health promotion in higher education requires professionals to engage in on-going professional development and service to the field.



Continuing Professional Development and Service

- Apply ethical principles to the practice of health promotion
- Participate regularly in formal professional development
- Assist others in strengthening their health promotion skills.



ACHA SPHPHE

- 24 Indicators
- Vision Into Action
 - Health Promotion Program Development Guidebook
 - Individual Professional Development Assessment Tool
 - Program Development Assessment Tool



Council for the Advancement of Standards (CAS)

ACHA Guidelines

Standards of Practice for Health Promotion in Higher Education

Second Edition, August 2004

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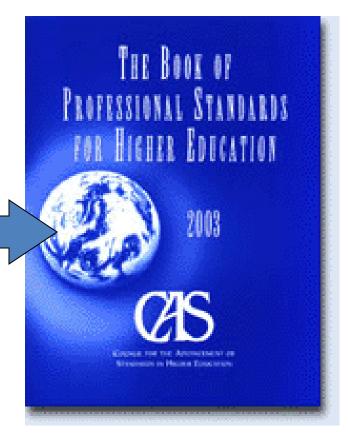
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SPHPHE will be used as the functional area, Health Promotion CAS standards, like the College Health Services and ATOD standards functional areas.



Overview of CAS

- Founded in 1979 in response to efforts to establish specialized accreditation for student affairs preparation programs
- CAS is a consortium of 34 professional associations
- Twenty-nine standards and guidelines have been promulgated (and sometimes revised) by fall 2001



CAS Functional Areas include:

- 1. Academic Advising (2002)
- 2. Admission Programs (2002)
- 3. Alcohol, Tobacco and Other Drug Programs (2003)
- 4. Campus Activities (2002)
- 5. Campus Information and Visitor Services (2002)
- 6. Career Services (2002)
- 7. College Health Programs (2002)
- 8. College Unions (2002)
- 9. Commuter Student Programs (2002)
- 10. Conference and Events Programs (2002)
- 11. Counseling Services (2002)
- 12. Disability Support Services (2003)
- 13. Educational Services for Distance Learners (2002)
- 14. Financial Aid Programs (2002)
- 15. Fraternity & Sorority Advising (2002)
- 16. Housing & Residential Life Programs (2002)
- 17. International Student Programs & Services (2002)
- 18. Judicial Programs (2002)
- 19. Learning Assistance Programs (2002)
- 20. Lesbian, Gay, Bisexual, & Transgender Programs (2002)
- 21. Minority Student Programs (2002)
- 22. Outcomes Assessment & Program Evaluation (2002)
- 23. Recreational Sports Programs (2002)
- 24. Registrar Programs & Services (2002)
- 25. Religious Programs (2002)
- 26. Student Leadership Programs (2002
- 27. Student Orientation Programs (2002)
- 28. TRIO and other Educational Opportunity Programs (2002)
- 29. Women Student Programs & Services (2002)
- 30. Masters Level Student Affairs Administration Preparation Programs (2002)



CAS Member Associations

American Association for Collegiate Independent Study (AACIS)

American Association for Employment in Education (AAEE)

American College Counseling Association (ACCA)

American College Health Association (ACHA)

American College Personnel Association (ACPA)

American Counseling Association (ACA)

Association of College and University Housing Officers -- International (ACUHO-I)

Association of College Unions International (ACUI)

Association of Collegiate Conference & Events Directors-Int'l (ACCED-I)

Association of Fraternity Advisors (AFA)

Association for Student Judicial Affairs (ASJA)

Association on Higher Education and Disability (AHEAD)

Canadian Association of College and University Student Services (CACUSS)

College Reading and Learning Association (CRLA)

Collegiate Information and Visitor Services Association (CIVSA)

Council for Opportunity in Education (COE)

NAFSA -- Association of International Educators (NAFSA-AIE)

National Academic Advising Association (NACADA)

National Association for Campus Activities (NACA)

National Association for College Admission Counseling (NACAC)

National Association for Developmental Education (NADE)

National Association of College Auxiliary Services (NACAS)

National Association of Colleges and Employers (NACE)

National Association of Student Financial Aid Administrators (NASFAA)

National Association of Student Personnel Administrators (NASPA)

National Clearinghouse for Commuter Programs (NCCP)

National Consortium of Lesbian, Gay, Bisexual, and Transgender Resources in Higher Education

National Council on Student Development (NCSD)

National Intramural and Recreational Sports Association (NIRSA)

National Orientation Directors Association (NODA)

National Society for Experiential Education (NSEE)

The Network: Addressing Collegiate Alcohol and Other Drug Issues (The Network)

Southern Association for College Student Affairs (SACSA) -- Associate Member



CAS Mission

- Promulgate standards and guidelines for practice and preparation
- Promote assessment in educational practice
- Promote the use of standards in practice
- Promote quality assurance within higher education



The CAS Approach to: Self-Regulation & Self Assessment

The essential elements of self-regulation include:

- Institutional culture that values involvement of all its members in decision making
- Quality indicators that are determined by the institution
- Use of standards and guidelines in quality assurance



The CAS Approach to Self-Regulation & Self-Assessment

- Collection and analysis of data on institutional performance
- Commitment to continuing improvement that presupposes freedom to explore and develop alternative directions for the future



Other Uses of CAS Standards

- Program establishment
- Staff development
- Academic preparation
- Credibility



What is the difference between a CAS standard and a CAS guideline?

A CAS Standard, which is printed in **BOLD TYPE**, is considered to be essential to successful professional practice and uses the auxiliary verbs "must" and "shall." Compliance with the CAS standards indicates that a program meets essential criteria as described in each standard statement and that there is tangible evidence available to support that fact.

A CAS Guideline, printed in LIGHT FACE TYPE, is a statement that clarifies or amplifies a CAS standard. CAS guidelines use the auxiliary verbs "should" and "may."



Alcohol, Tobacco, and Other Drug Program CAS Standards & Guidelines

- For the purpose of this document the term "alcohol, tobacco and other drug use or abuse" includes:
- 1. The illegal use of alcohol, tobacco, prescription medications and other drugs.
- 2. The high-risk use and/or abuse of alcohol, tobacco, prescription medications, over-the-counter medications and nutritional supplements.



CAS Standards & Guidelines

Part 1. Mission

Part 2. Program

Part 3. Leadership

Part 4. Organization & Management

Part 5. Human Resources

Part 6. Financial Resources

Part 7. Facility, Technology & Equipment



CAS Standards & Guidelines

Part 8. Legal Responsibilities

Part 9. Equity & Access

Part 10. Campus & External Relations

Part 11. Diversity

Part 12. Ethics

Part 13. Assessment & Evaluation



Part 1. Mission

- The alcohol, tobacco, and other drugs program (ATOD) must incorporate student learning and student development in its mission.
- The program must enhance overall educational experiences.
- The program must develop, record, disseminate, implement and regularly review its mission and goals.
- Mission statements must be consistent with the mission and goals of the institution and with the standards in this document.
- The program must operate as an integral part of the institution's overall mission.



Part 2. Program

Desirable Student Learning & Development Outcomes

- Intellectual growth
- Effective communication
- Enhanced self-esteem
- Realistic self-appraisal
- Values clarification
- Career choices clarification
- Leadership development
- Healthy behavior

- Meaningful interpersonal relationships
- Independence
- Collaboration
- Social responsibility
- Satisfying & productive lifestyles
- Appreciating diversity
- Spiritual awareness



CAS Standards & Guidelines

Part 2. Program

The ATODP must include:

- Environmental management strategies
- Institutional policies
- Enforcement strategies
- Biennial review
- Community collaboration
- Training & education
- Assistance & referral
- Student leadership



Part 2 - Program

- ATODP staff must serve as positive role models for ethical and healthy behaviors.
- ATODP must develop and provide education on policies, laws, prevention, intervention and treatment resources, and training for students, including student organizations.



Part 2 - Program

 ATODP must provide access to support services for students with alcohol or other drug-related concerns.



Part 3

- articulate a vision and mission for their programs and services
- set goals and objectives based on the needs of the population served and desired student learning and development outcomes
- advocate for their programs and services
- promote campus environments that provide meaningful opportunities for student learning, development, and integration



Part 3

- identify and find means to address individual, organizational, or environmental conditions that foster or inhibit mission achievement
- advocate for representation in strategic planning initiatives at appropriate divisional and institutional levels



Part 3

- initiate collaborative interactions with stakeholders who have legitimate concerns and interests in the functional area
- apply effective practices to educational and administrative processes
- prescribe and model ethical behavior
- communicate effectively



Part 3 - Leadership

- manage financial resources, including planning, allocation, monitoring, and analysis
- incorporate sustainability practices in the management and design of programs, services, and facilities
- manage human resource processes including recruitment, selection, development, supervision, performance planning, and evaluation



Part 3- Leadership

- empower professional, support, and student staff to accept leadership opportunities
- encourage and support scholarly contribution to the profession
- be informed about and integrate appropriate technologies into programs and services



Part 3 - Leadership

 be knowledgeable about federal, state/provincial, and local laws relevant to the programs and services and ensure that staff members understand their responsibilities by receiving appropriate training



Part 3 - Leadership

- develop and continuously improve programs and services in response to the changing needs of students and other populations served and the evolving institutional priorities
- recognize environmental conditions that may negatively influence the safety of staff and students and propose interventions that mitigate such conditions



Part 4 – Human Resources

 must establish procedures for staff selection, training, and evaluation; set expectations for supervision; and provide appropriate professional development opportunities to improve the leadership ability, competence, and skills of all employees.



Part 4 – Human

Resources

- ATODP professional staff members must hold an earned graduate or professional degree in a field relevant to the position they hold or must possess an appropriate combination of educational credentials and related work experience.
- ATODP prevention specialists must hold a minimum of a bachelor's degree in a related field and have relevant training and experience.



Part 4 – Human Resources

- Intern Training
- Student Employees
- Training on Institutional Policies
- Adequate technical and support staff
- Training technology & records



Part 4 – Human Resources

- Training emergency procedures
- Salary & benefits commensurate with experience
- Maintained and updated position descriptions
- Regular performance planning and evaluation



Part 5 - Ethics

- New staff must be oriented to relevant ethical statements/standards
- Privacy and confidentiality must be ensured
- Be aware of and follow IRB/human subjects policies
- Staff must recognize and avoid conflicts of interest



Part 5 - Ethics

- Insure fair, objective and impartial treatment of all
- Handle funds in accordance of established and responsible procedures
- Promotional and descriptive information must be accurate and free of deception
- Staff must perform within the limits of their training, competence



Part 6 Legal Responsibilities

- Must have written policies on all relevant operations, transactions and tasks that may have legal implications
- No harassment or creaton of hostile/offensive environments
- Use reasonable and informed practices to limit institutional liability



Part 6 – Legal Responsibilties

- Institution must provide legal advice for ATODP staff members
- ATODP staff members must be aware of and seek advice from legal



Part 7 – Equity and Access

- Discrimination must be avoided
- Staff must take action to remedy significan imbalances in student participation and staffing patterns
- Ensure physical and program access for persons with disabilities
- Recognize the needs of distance learning students; provide appropriate services and assist in Id'ing and gaining access to services



Part 8 - Diversity

- Promote environments that are characterized by open and continuous communication that deepens understanding of identity, culture, heritage.
- Recognize, honor, respect commonalities and differences
- Address characteristics and needs of diverse populations while implementing policies and procedures



Part 9 – Organization and Management

- ATODP must be structured purposefully
- Must monitor websites used for distributing info to ensure accuracy
- Use of effective mgt including use of comprehensive and accurate info for decision making



Part 9 – Organization and Management

- ATODP director/coordinator must be placed within institution organizational structure to promote cooperative interaction; develop support of high-level admins.
- ATODP must collaborate in development of policies



Part 10 – Campus and External Relations

- ATODP must reach out to relevant others
- Must have procedures and guidelines for responding to threats and emergencies
- Policies for communicating with the media
- Gather and disseminate info on ATODP programs and topics



Part 11 – Financial Resources

- Must have adequate funding
- Must demonstrate fiscal responsibility



Part 12 - Technology

- Must have adequate technology
- Must maintain policies and procedures that address security and data back up
- When used for learning & development, technology must reflect current best practices
- Workstations must be accessible



Part 13 – Facilities and Equipment

- ATODP must have adequate, accessible, and suitably located facilities and equipment
- Well equipped work space, adequate in size.
- Must have work space to secure work adequately
- Facility design should guarantee record security and confidentiality



Part 14 – Assessment and Evaluation

- Must establish systematic plans and processes to meet accountability expectations
- Must evaluate regularly how they complement and enhance institutional mission
- Must assess ATOD attitudes, beliefs, and behaviors



Part 14 – Assessment and Evaluation

- Must assesses
 - ATOD related consequences
 - property damage
 - policy violations
 - counseling caseloads
 - Perceptions and social norms
 - Environmental scans



Putting the CAS Standards to Work

- Establish and prepare the selfstudy team
- Conduct the self-study
- Identify and summarize evidence
- Identify discrepancies
- Determine appropriate corrective action
- Recommend action for program enhancement
- Prepare an action plan



Process

- What standards are you using?
- Benefits of using these tools to assess?
- Disadvantages of using these tools?
- Roadblocks to using these tools?