- Do you have a standard SOP template to document practices?
  - APWA does not provide a standard template for documenting Standard Operating Procedures (SOPs). However, applicant agencies are encouraged to utilize the Model Practices Library, which contains hundreds of documented examples from agencies across North America. These examples can serve as valuable references for structuring and formatting your procedures to meet accreditation requirements. If your agency has applied for accreditation or you work for an accredited agency and would like the link to the model practice library, please contact the Accreditation Team at accreditation@apwa.org.
- Can you reference a form by indicating where it can be found? Or does it need to be uploaded each time it is referred to?
  - For accreditation purposes, each referenced form must be uploaded into the system. Additionally, any applicable form fields should be completed. You may choose to upload a real version that your agency uses or create and complete an example form for the evaluators to review. Evaluators are comfortable reviewing either approach. Redaction of sensitive information is allowed.
- What if there are only five items we do in the entire chapter? Do we need to complete the full chapter or just those five items?
  - This depends on the total number of practices in the chapter. If your agency performs 50 percent or more of the practices within a given chapter, the chapter is considered applicable and should be addressed in your self-assessment. If your agency performs fewer than 50 percent of the practices, the chapter may not be applicable. For guidance specific to your agency's circumstances, we recommend contacting the Accreditation Team at accreditation@apwa.org.
- Does the department need its own strategic plan separate from the city's strategic plan?
  - If permitted within your organization, your department should develop its own strategic plan. For accreditation, you will need to demonstrate that the plan is shared with the appointed administrative officials (city manager, county executive, etc.) and/or elected bodies. If your department is not allowed to have its own standalone plan, then you should clearly show how your agency participates in and contributes to the larger organization's strategic planning efforts.
- What if the city does not have a strategic plan, but the department does?
  - That is perfectly acceptable. The accreditation evaluators will review your department's strategic plan. It is important, however, that your plan is actively shared with key stakeholders, such as internal administrative leadership or the elected body that governs your organization. This is covered in Chapter 1, Practice 7 titled: "Relationship of Agency's Strategic Plan to Government-Wide Planning Process." This shows that the plan is not only developed but also implemented.
- Will APWA assign a peer to us?
  - No, APWA will not assign a specific peer to your agency. However, when your agency is ready to engage in a peer review, APWA staff will provide you with a list of

potential peers in your region, including their contact information. It is then your agency's responsibility to reach out and initiate contact with those peers. This peer-to-peer approach encourages collaboration, long-term networking, and mutual support.

- When we upload documentation, do we label that compliance ourselves based on what we believe it to be?
    - Yes, during the self-assessment phase, your agency will assign compliance ratings based on your interpretation of how well your documentation meets the practice statement (the blue line in both the manual and software). This phase is designed to help you identify areas for improvement and determine where additional documentation may be necessary. Each agency's path will look different, depending on current documentation and organizational structure. Some agencies may respond to more applicable chapters than others based on their areas of responsibility.
- Do we need to provide both a policy and a procedure for each practice?
    - In many cases, yes. Some practices specifically require both a policy (the "what" and "why") and a procedure (the "how"). You may document these in a single, integrated document or in two separate documents, whichever aligns best with your agency's documentation format and internal processes. If you choose to incorporate the policy within the procedure, make sure the document follows your agency's process for formal policy approval, including sign-offs, approval dates, and effective/reviewed on dates. These requirements should be outlined in your agency's policy crafted for Chapter 1, Practice 4 titled: "Review Process."
- Once an agency begins the process (from software and manual purchase), how long does it typically take before evaluation?
    - The timeline can vary significantly depending on your agency's starting point. Factors such as how many policies and procedures are already in place, the size and availability of your team, cross-departmental collaboration, and leadership buy-in all influence your progress. Generally, it takes two to three years from the time of software and manual purchase to reach the evaluation phase.
- What is the estimated time needed to complete the full accreditation process?
    - After submitting an application, most agencies complete the accreditation process within 18 months to two years. This timeframe may include self-assessment, any necessary documentation development or updates, and the evaluation itself.
- Is it a good idea to complete our own self-assessment before officially applying for accreditation?
    - Conducting a preliminary self-assessment can be very helpful in gauging your agency's readiness. However, it is not a requirement before applying. If your agency chooses to apply first, you will gain access to valuable accreditation resources such as the Model Practices Library, which can accelerate your self-assessment progress and aid in the improvement phase.
- If we do not currently have a certain policy, should we create one before evaluation, or is it acceptable to note that we don't have one?
    - Before the evaluation, you will need to draft and implement a policy if the blue practice statement identifies that one is needed. Simply stating that a policy does not exist will not do. Evaluators will want to see that the policy exists in written form

and is actively in use within your department. Documentation should reflect not only the policy itself but also how it is being followed.

- We're preparing for reaccreditation and transitioning from an older manual to a newer edition. I've been reviewing each practice individually. Is there a place where changes between editions are summarized?
    - o Yes, there is a document prepared by APWA staff that outlines the changes between manual editions. This summary can help streamline your review process. To request a copy, please contact your APWA Accreditation Staff Liaison or email accreditation@apwa.org.
- Are there many changes in the 11th edition? What influenced these updates?
    - o The 11th edition of the *Public Works Management Practices Manual* includes various minor updates across several chapters. However, the most significant changes were made to Chapter 34–Traffic Operations. These updates were designed to align more closely with the *Manual on Uniform Traffic Control Devices* (MUTCD). Manual changes are guided by input from APWA evaluators, accredited agencies, and APWA national technical committee members to ensure the manual's practices are in keeping with current best practices in public works.
- Was this meeting recorded for future reference?
    - o Yes, the session was recorded. A copy of the recording, along with this Q&A summary, will be uploaded to the APWA Accreditation Resource Center for your reference.