



Ontario Public Library Guidelines  
Monitoring and Accreditation Council  
[www.ontariopubliclibraryguidelines.ca](http://www.ontariopubliclibraryguidelines.ca)

## OPLG Accreditation Process: Information for Libraries

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2021

Use of the **Ontario Public Library Guidelines** is voluntary. They may be used either for internal purposes only, for example, a library's administration or board may use the guidelines, in whole or in part, with a view to considering some or all aspects of the library's services or methods for change or upgrading. The Guidelines could also be used as part of a process that leads the library to accreditation under the Ontario Public Library Guidelines Monitoring and Accreditation Council ("OPLG Council") process. An accreditation is valid for a five-year period and those reaching that five-year point will be notified that a re-accreditation audit is required.

During an Accreditation Audit, an audit team will work with library staff to go through the Ontario Public Library Guidelines Checklist document to determine how the library fares against the Guidelines. In this process

1. each of the guideline statements within the Ontario Public Library Guidelines Assessment Tool requires a "yes" or "no" answer
2. the library is required to achieve all the mandatory guidelines (marked as M); and
3. the library system and at least one physical location must achieve a score of 90% in each of the seven sections.

In the past, the audit team would visit the library and all branches to complete this audit and observe the work undertaken at each branch. In early 2018, the OPLG Council began to explore the possibility of using technology to assist in streamlining the work of the OPLG Council to keep fees down. Two virtual test audits were performed, at the Fort Frances and the Blue Mountains Public Libraries. Both audit experiences revealed to the OPLG Council that a virtual platform would be efficient, economical and detailed to the degree the OPLG Council could say with certainty that scope, magnitude and integrity of the OPLG Guidelines process would be preserved. Following that pilot, the OPLG Council moved to this Virtual Accreditation Audit model in which the work of the audit team will be conducted electronically in two ways:

1. Uploading documentation from the library onto a specific Google Drive for review by the audit team prior to the virtual tour (for Sections 1 to 5 of the *OPLG Checklist*)
2. Conducting a virtual tour of the physical space (s) for observation by the audit team (for Sections 6 & 7). Where a library system has five or more physical locations, this observation section of the audit may be conducted in person and would be considered a "hybrid" audit.

It turns out that, with the pandemic, the virtual method was the only way to visit libraries wishing to go through the accreditation process. This document describes preparing for an audit and the accreditation audit process from start to finish.

## Preparing for an audit

### 1. Version of the **Ontario Public Library Guidelines** Checklist

In preparing for an audit, please ensure that you are working with the latest version of the *OPLG Checklist* as posted on the Council website at <http://www.ontariopubliclibraryguidelines.ca/>.

*Note: Starting in 2020, the OPLG Council will be performing an “Annual Update” on the OPLG Checklist. As a rule, your preparation should be based on the version of the OPLG Checklist which is posted at the time that the Request form is approved. However, we realize that you may have worked for several months to prepare for the audit using the version of the Guidelines which was posted at that time. When the audit is confirmed, we will check with you as to the version you have been using, and will allow you to use the previous version if that is the one that you have used.*

### 2. Request the audit:

To start the process, you will need to request an audit using the ‘Request Form’ posted on the *Ontario Public Library Guidelines* website. Any public library in Ontario may request an audit. Audits may be carried out in English or French, as requested.

- As the OPLG Council begins to use virtual audit processes, the timing of your intention to accredit or re-accredit your public library becomes more important. We ask that you provide a minimum of eight (8) weeks’ notice of your intended date. This will allow us to set up the Google Drive folder for your library and give you time to prepare and upload the necessary documents. It will also give us time to appoint an audit team, set a date and review the technological logistics for virtual/live streamed portions of the audit. For this reason, we would like all requests for audits by September 15<sup>th</sup> in a calendar year.

### 3. Upon receiving a request for an audit:

- a peer audit team will be appointed through the Ontario Library Service (Jesse Roberts – [jroberts@olservice.ca](mailto:jroberts@olservice.ca) or Peggy Malcolm – [pmalcolm@olservice.ca](mailto:pmalcolm@olservice.ca)). The audit team will include a staff person from the Ontario Library Service and a Librarian member of the Council or staff person from an accredited library.
- OLS staff will provide the link to the electronic platform to prepare for the virtual audit.
- the OLS staff will arrange the time for a virtual observation time or an in-person visit for those who qualify for a “hybrid” audit.

#### 4. Fees for audits:

Ontario Library Service provides bookkeeping services for the Council, and is responsible for collecting the fees, and paying audit team expenses. As the audit is organized, libraries will be sent an invoice for the fee of \$200, payable to the OLS. This fee is inclusive, and no additional charges will be levied for transportation costs, accommodation, meals, honoraria or any other costs. An **additional fee** of \$75 per day will be charged for any additional days which might be required as a result of the library's not having properly prepared itself for the audit, or for a hybrid audit where there is considerable amount of travel between locations.

## Process

### Step 1 – Explore the Google Drive

As part of the preparation work, OLS staff will provide you with a link to a Google Drive that has been set up just for your library accreditation work.

- You should find a copy of the latest version of the *Ontario Public Library Guidelines Checklist* (also called an “Assessment” Tool).
- You will see the location where you will upload the necessary documentation (the evidence) using the instructions provided below.
- You should also see a folder which includes examples of documents used in previous audit uploads.

### Step 2 - Annotate the OPLG Checklist

The expectation of the OPLG Council remains that any public library seeking accreditation or re-accreditation be prepared to provide clear and concise supporting information in their pursuit of the OPLG Guidelines. To accomplish this, we ask that the library staff work their way through the *OPLG Checklist* to annotate guidelines – providing information on the library's ability to fulfill that specific guideline. Some notes are shown in the example below

For this reason, we have also provided a copy of the *OPLG Checklist*. This would be the file where you could include any notes about a guideline or links pertaining to the guideline, using the space provided.

**Please note** that if you have already annotated your own copy of the *OPLG Checklist*, you do not need to transfer your data to this new file – and may simply upload your existing annotated *OPLG Checklist*.

## Process (continued)

### Step 2 – Annotate the *OPLG Checklist* (continued)

Auditors understand that by the very nature of the process, some policies, procedures or documentation may account for one or more guideline when similar topics, themes or concepts are related. For example, in the *Checklist* itself, the library noted that the policy related to Harassment – and therefore needed as evidence to support 12.4 Harassment is included under 12.3. When the audit team does not find anything under 12.4 Harassment in the folder for Area 3, then the team can go back to the annotated *Checklist* to find a note. In other words, the audit team will be relying on your notes to find evidence and should not have to search through pages and pages of policies to find to applicable document or section. At another point, the audit team also can see that while they can find the policy for 12.1 on Safety etc. within the Google Drive folder, it is also posted on the library website. If it is helpful in finding the exact section, you could add a note in the annotated *OPLG Checklist* to “see” a section or specific page within the document.

		Status (Y/N) whether you have the item or not		G-Drive Evidence	Online Evidence
<b>Section 12: Safety Security &amp; Emergencies</b>					
12.1	<b>Safety, Security and Emergencies Policy</b> - The library board is responsible for providing a safe and secure environment for library staff as they carry out their duties and for members of the public who use public library services. The library has established and adopted a policy to deal with safety, security and emergency issues.	Y	Y	12.1 H&S	<a href="http://www.thebluemountainslibrary.ca/policy.cfm">http://www.thebluemountainslibrary.ca/policy.cfm</a>
12.2	<b>Working Alone</b> - The Library has established and adopted a policy pertaining to staff and volunteers who working alone in the library or other designated sites.	Y	Y	12.2 Work Alone	
12.3	<b>Workplace Violence</b> - The library has established and adopted a policy in place that adheres to relevant provincial and/or federal legislation on workplace violence and sexual violence.	Y	Y	12.3 Respectful Workplace	
12.4	<b>Harassment</b> - The library has established and adopted a policy in place that adheres to relevant provincial and/or federal legislation on harassment and sexual harassment.	Y	Y	See 12.3 Respectful	

We realize that the annotation of the OPLG Checklist will continue as you work to upload the various pieces of documentation. For this reason, you may not want to upload the final version of the checklist onto your library’s Google Drive until you have gone through the entire process.

### Step 3 – Uploading documentation

Using the annotated *OPLG Checklist* as your framework, you will need to provide “evidence” for some of the elements. In some cases, the “evidence” will be on the library website, and this location would be marked in your annotated checklist. In other cases, you might provide a written explanation within your annotated checklist. For some elements, however, we want to see the actual evidence (e.g. documents, photos, videos or other appropriate proofs). For the purposes of a virtual accreditation audit, staff from the accrediting library will need to upload local library documentation to the OPLG Google Drive.

**Process** (continued)

**Step 3 – Uploading documentation** (continued)

To help the audit team to sort through materials, we need the documentation to be organized on the Google Drive using the numbering convention in the *OPLG Checklist*. These are the areas, sections and the number of statements in each area:

Area #	Section #	Number of questions or statements in this area
#1 Governance & Administration	Sections 1 to 6	24
#2 Planning Documents & Process	Sections 7 to 11	27
#3 Policy	Sections 12 to 15	24
#4 Personnel & Human Resources	Sections 16 to 18	23
#5 General	Sections 19 to 23	25
#6 Collections & Services	Sections 24 to 26	33
#7 Physical & Facilities	Sections 27 to 30	30

The accrediting library must provide all documentation for Areas 1 to 5 (System-wide guidelines) but is encouraged to also submit any photographic evidence which may be more difficult to experience on a virtual tour for the on-site observation areas of Section 6 and 7. Examples, could be parking lots where Wi-Fi may not be strong enough for a virtual tour or directional signs which are not onsite.

A. **Naming Convention on the Google Drive** - Each guideline is numbered for the section – 1.1., 1.2, etc. For the purposes of this audit any document, photo, video or other evidence provided to support any of the OPLG Guidelines should be appropriately labelled for easy review and retrieval by the audit team. The names should include reference to the **actual OPLG Guideline number** and the name of the local file. For example:

- 14.5 TrilliumPublicLibraryprogrammingpolicy.pdf
- 27.4 TrilliumPublicLibraryRoadSignWestEnd.jpg

B. **General files** - We know that there are some items which provide supplementary evidence to support several guidelines. In this case, these can be uploaded using this naming convention. The audit team will “find” these files through the annotated *OPLG Checklist*.

- General A – Trillium Public Library Brochures
- Board By-law – Trillium Public Library Board By-laws
- General B – Trillium Public Library Event Posters
- Guidelines #'s – Trillium Public Library Social Media Posts

Process (continued)

## **Step 4 – Review of materials**

The audit team will review the annotated OPLG Checklist and the other documentation that was uploaded onto the Google Drive against the requirements of the OPLG Guidelines to determine whether the specific guideline was met.

The Library can expect to receive documentation feedback after the upload deadline and no less than two weeks prior to the Observation step (Virtual or In-person). This has been done to allow ample time for the Library staff to determine if additional documents, supports or information is needed to support the evidence of the guideline. Additionally, if policy, plans or other evidence needs to be developed by the CEO or the Library Board, this gives time to start the process.

## **Step 5 - Observation Sections of *OPLG Checklist***

For Sections 6 and 7 of the OPLG Guidelines, the audit team will observe each of the library branches. It may be in the form of a virtual audit or, where there are more than 5 branches, it may be an on-site observation by one or more of the audit team.

### **A. Hybrid Audit: On-site observation Method**

Where on-site observation is conducted, the audit team will visit the main facilities and all the branches within the system. If there are staff at the other locations, it is not necessary that the library CEO accompany the team on its tour of the facilities. The team will review the Guidelines within Sections 6 and 7 of the OPLG Checklist at each location to determine if that specific location can achieve a score of 90% (to pass the accreditation). The system sections (Sections 1 to 5) will be conducted via online method (using the Google Drive) at least two weeks prior to the onsite visit.

### **B. Virtual Tour Method**

When the audit team takes a “virtual” tour of your public library space, the date and time will be set by the audit team, in consultation with the library. It is the expectation of the OPLG Council that the members of the audit team will be shown all areas of the public library required for the purposes of a virtual audit. Special care should be taken to demonstrate and guide the audit team through all public library spaces virtually, to address each of the guideline elements found in Sections 6 and 7.

This portion must be done in real time and not submitted to council in recorded video format. The OPLG Council, in trust, will assume the public library system being audited will not purposefully or knowingly hide or obstruct any areas of the library for viewing during a virtual audit for any reason.

## Process (continued)

For the “virtual” tour of the library space, it is the OPLG’s recommendation that a mobile device (e.g. smart phone, tablet) be used by the library to conduct the tour. We will be using ZOOM, a version of virtual conferencing software. It allows multi-site virtual connections and the ability to share and review documents collaboratively. At the library, it would be best if a team of two staff members or volunteers be available to provide the tour. That way, one person can be a “camera/device person” allowing the CEO to recount and provide the necessary evidence and information for each guideline in Sections 6 and 7. For multi-branch locations, the Library CEO may choose to remain at the first branch, while other staff give those online the tour. In this way, travel is mitigated.

## Step 6 - Audit Reports

After the audit, the audit team will provide an audit report, as outlined here.

1. The audit team will provide the library with a general report indicating the results, both overall and in specific areas. This report will go to the library immediately following the audit (assuming some time to complete the written report) and **before** the report goes to the Council for consideration.
2. In the written report, the audit team will provide the library with a statement as to whether the library is to be recommended to the Council for accreditation or not, as per the following scoring standards for accreditation:
  - a. Each question in the Guidelines shall be scored 1 point for successful achievement.
  - b. In order to be recommended for accreditation a library must achieve no less than a 90% score of total possible points and must achieve no less than a 90% score in any of the major areas of the Guidelines. In addition, a library must meet any guidelines the Council designates as mandatory.
  - c. Should the library being audited demonstrate to the audit team’s satisfaction that any particular question is not relevant to the library’s local situation because of the presence of a local institution, organization or service, this question may be omitted from the total number of questions and not used in calculating the above percentage.
3. If the library does not **quite** meet the required standard, but is substantially in compliance with the guidelines, the report **may** indicate which items require attention and set down a timetable within which these items may be upgraded to the appropriate standard without there being a need for another full peer audit. For example, a library with a total score of 88% (below the required minimum of 90% overall), could be given the opportunity to address enough outstanding items to meet the required minimum. Similarly, a library which fails to meet one or more guidelines designated as mandatory will be given an opportunity to correct the situation.

**Process** (continued)

### **Step 6 – Audit Reports** (continued)

4. If the library is **not** to be recommended for accreditation, information is provided to the library as to where the library may get assistance in helping it to meet the Guidelines in future.

After time for a review, the library must confirm with the audit team that they agree with the findings of the team. Once this confirmation is received, then a copy of the report is forwarded to the Ontario Library Service representative on Council. This report to the Guidelines Council will include a recommendation that the library be accredited, or if the library is not to be accredited, an explanation of same. Details of the audit report to Council are to remain confidential to the members of the Council.

### **Step 7 - Accreditation Review by Council**

1. Once the Council has an Audit Report which recommends accreditation or reaccreditation, the Council will review the report at their next meeting and may approve the recommendation.
2. Where Council approves an audit team's recommendation, Council will formally recognize the library as an Accredited Ontario Public Library.
3. An Accredited Ontario Public Library will receive an accreditation certificate and such promotional items as Council may make available (e.g. Window Clings). The Minister of Heritage, Sport, Tourism and Culture Industries will be invited to sign the certificate. The certificate will be co-signed by the Chair of the OPLG Council and presented at the Super Conference Awards Gala or other appropriate function.

#### **Questions:**

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