



Scheme for Certification of Design
(Building Structures)

Procedures for Auditing the Activities of Approved Bodies and Approved Certifiers

March 2022

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Amendment Record

Current Version	Approved for issue	Comments
February 2008	General release	Incorporates further minor amendments
November 2011	General release	Incorporates further amendments and additions
October 2016	General release	Major review and revision
March 2022	General release	Major review and revision

1.0 Aims and Objectives of the Audit Programme

The audit programme has been established by Structural Engineers Registration Ltd. (SER) in order to audit the manner in which Approved Bodies and Approved Certifiers who have been accepted as members of the Scheme undertake their duties and discharge their responsibilities. Audits will be conducted for the following purposes:

- a) To ensure that members of the Scheme uphold the standards of the scheme and adhere to its requirements
- b) To ensure that standards of performance are consistent amongst members of the Scheme
- c) To ensure that the requirements of the Building Standards (Scotland) Regulations are understood by members of the Scheme and are being applied in the certification of projects
- d) To identify areas where there are inconsistencies in interpretation in order to recognise the need for training or guidance
- e) To identify procedures which members of the Scheme find difficult to apply
- f) To establish public confidence in the robustness of the Certification Scheme as a means of protecting public safety
- g) To fulfil an undertaking to Scottish Ministers to provide an audited scheme

Audits are aimed at assessing the performance, arrangements, and procedures of members of the scheme (Approved Bodies and Approved Certifiers) and are not intended for the purpose of checking structural designs or specification for individual building projects.

While the audit will not go out of its way to seek design errors, if it is clear that the requirements of Standards 1.1 or 1.2 are not being met then action will be taken as described in section 6.4 *Deficiencies in the certification process*.

2.0 Audit Initiation

2.1 Timing of audits

SER may initiate an audit of an Approved Body or an Approved Certifier at any time. The timing will depend on several factors, including:

- a) Outcome of previous audit
- b) Number of certificates signed since the previous audit, or since joining the scheme
- c) Risk classifications of projects certified since the previous audit, or since joining the scheme
- d) Period without an audit since joining the scheme

Approved Bodies will be audited at the same time as the audit of any Approved Certifier generating certificates for them.

Where an Approved Certifier certifies for, or has certified for, more than one Approved Body then they will be audited at each of those Bodies.

An audit may also be initiated:

- a) Following a decision by the SER Board to investigate, for example, the discovery of, or complaints of, poor practice
- b) At the request of the Scottish government's Building Standards Division

Therefore, the actual period between audits may vary significantly from that stated in the outcome notification from the previous audit.

2.2 Charges for audits

There will be charges for certain audits as set out below. The charge, which is agreed with the Building Standards Division of the Scottish Government (BSD), is a contribution towards the cost of conducting the audit. The details of the charge will be set out in the audit notification.

- a) There will NOT be a charge for a first audit or for any audit where the previous audit outcome notification for the Approved Body or for any Approved Certifier states a maximum of 2 years or more.
- b) A charge will be payable by the Approved Body where the interval stated in the previous two audit outcome notifications for either the Approved Body or for any Approved Certifier is 1 year or less.
- c) A charge will be payable by the Approved Body for any audit for either the Approved Body or for any Approved Certifier following mentoring and suspension.
- d) A charge will be payable by the Approved Body for the first audit of any Approved Body and/or Approved Certifier who has been allowed to re-join the Scheme having previously been removed from it for poor performance.

If the Approved Body fails to pay the charge at least 10 working days prior to the agreed date for the audit, without having provided good reason for the non-payment, the matter will be brought to the attention of the SER Board who will consider what action should be taken, including the suspension of the Approved Body from the scheme until the payment is made.

3.0 Roles and Responsibilities

3.1 SER Board

The SER Board is responsible for overseeing the general conduct of the audit process. The Board will:

- a) Select and appoint individuals to the Scottish Registration Board (SRB) and the pool of Auditors
- b) Make arrangements for the training of Auditors
- c) Agree audit programmes
- d) From time to time, arrange for a Director of SER to attend an audit to observe whether or not the audit is being carried out in accordance with these procedures
- e) Consider the recommendations of the SRB following their consideration of findings of an audit and decide on any action, including suspension or withdrawal of membership of the Scheme, that may be necessary arising out of the audit
- f) Consider reports from the Chairman of the SRB regarding general issues or trends identified by the audit process that require to be addressed by technical guidance to members, or alterations to the Scheme

3.2 Head of Certification

The Head of Certification is responsible for the overall management of the audit programme. The Head of Certification will:

- a) Prepare audit programmes for consideration by the SER Board
- b) Select Approved Bodies and Approved Certifiers for audit in line with the principles set down by the SER Board
- c) Assign Auditors from the SRB and the pool of Auditors to conduct individual audits
- d) Advise the Approved Body if a Director of SER is to attend the audit
- e) Present the recommendations of the SRB for consideration by the Board of SER
- f) Advise Approved Bodies and Approved Certifiers of the outcomes of their audits and findings by SER arising from the audit
- g) Administer the mentoring, suspension, and termination processes
- h) Administer the representations and appeals processes

3.3 SER Administration Team

The SER Administration Team are responsible to the Board of SER for the administration of the audit process. They will:

- a) Issue notifications to Approved Bodies and Approved Certifiers advising them of the projects and Certifiers that have been selected for audit
- b) Monitor the audit implementation and initiate action against Approved Bodies (or Approved Certifiers) that have failed to arrange audits within the prescribed timescale
- c) Provide advice and information to Approved Bodies and Approved Certifiers concerning the audit process
- d) Provide audit teams with information held by SER necessary to conduct the audit
- e) Collate Auditors' reports and recommendations for consideration by the SRB

- f) Collate corrective action responses from audited Approved Bodies and Approved Certifiers and present these for consideration by the SRB
- g) Record the recommendations of the SRB
- h) Maintain the IT systems necessary to administer the scheme

3.4 Scottish Registration Board

The Scottish Registration Board (SRB) is responsible to the Board of SER for the technical conduct of the audits. The SRB will:

- a) Supply audit teams from a pool of Auditors appointed by the Board of SER
- b) Review, discuss and agree or amend audit reports, to maximise consistency of the audit process, and make recommendations regarding any corrective action arising from the audits
- c) Make recommendations regarding general issues or trends identified by the audit process that require to be addressed by technical guidance to members or alterations to the Scheme

3.5 Audit Pool

The Audit Pool members assist SRB members with the conduct of audits.

3.6 Approved Bodies

Approved Bodies are responsible for the administrative arrangements necessary for conducting the audit. This includes the presentation of suitable records and project information as requested in the audit notification in a suitable format to permit the audit to take place and notifying each of their Approved Certifiers who is involved in the audit. They are also responsible for all of their internal costs and for the costs associated with the attendance of their Approved Certifiers; however, there are generally no audit fees or costs payable to SER (except as described in Section 2.2).

Approved Bodies are required to:

- a) Ensure, wherever possible, the availability of their Certification Coordinator(s) and all Approved Certifiers who are to be audited
- b) Where the audit is to be carried out on location, provide a work area within their premises suitable for the audit team to carry out the audit
- c) Ensure that all information, including certification and project records, warrant plans and files necessary to carry out the audit, is readily available to the audit team.
- d) Where the audit is carried out on location, records of building warrant plans and summaries of ground investigation and existing building condition assessment reports are required to be made available in hard copy.
- e) Where required, make the information required for conducting the audit available digitally on an agreed sharing platform e.g. cloud services or a secure shared area on a private server
- f) Ensure the Health & Safety of the audit team while they are working within the premises of the Approved Body
- g) Ensure that all auditee responses to the audit report are completed within ten working days of the report being uploaded by the Auditors
- h) Identify and implement Corrective Actions arising from non-conformances identified by the audit

3.7 Approved Certifiers

Approved Certifiers must make themselves available to the audit team at a time and place agreed between SER and the Approved Body that employs them (or employed them at the time when the project being audited was certified). It is recognised that this may not always be possible where, for example, an Approved Certifier may have changed employer.

SER will endeavour, where it is reasonable to do so, to arrange audits covering projects certified during a current employment. Where this is not possible SER will encourage Approved Bodies who are members of the Scheme to accommodate these arrangements by allowing their Approved Certifiers the necessary time to attend the offices of a previous employer.

If the Approved Certifier cannot make themselves available, then the audit will take place in their absence and the reasons will be recorded in the audit report. In these circumstances Approved Certifiers may nominate an individual to witness the audit on their behalf. Approved Certifiers must however realise that not being available to assist Auditors may place them at a disadvantage and adversely affect the findings and outcome of the audit.

Approved Certifiers are also required to complete their auditee responses, including their proposed corrective actions where appropriate, within ten working days of the audit report being uploaded by the Auditors.

Approved Certifiers should be aware that if they produce certificates for more than one Approved Body then they are likely to be audited at each of the bodies where they have produced certificates.

3.8 Certification Coordinators

Certification Coordinators provide the principal point of contact between SER and the Approved Body. They will be contacted regarding the administrative arrangements for the audit. The Certification Coordinator, or a named substitute, must be available to attend the audit on behalf of the Approved Body.

3.9 Auditors

Auditors are responsible for gathering information in relation to conformance using a standard set of pre-determined criteria. Audits are generally carried out by two Auditors. Auditors are assigned via the database by SER Administration. An Auditor must decline an assignment in any circumstances where there is likely to be a conflict of interest or a perceived conflict of interest (see section 3.10 *Conflicts of Interest* below). They also have the opportunity to decline the assignment for any other reason, e.g. they are unavailable.

Auditors are required to exercise a degree of judgement as to whether or not the performance criteria have been met using the guidance set out in this document. They are not responsible for checking structural designs and should not seek to find errors in the design, although in reviewing design documents for compliance with the scheme requirements errors may become apparent and should be dealt with in accordance with the procedures in section 6.4: *Deficiencies in the certification process* of this document.

All information relating to projects audited which may have been downloaded by Auditors in the course of the auditing will be deleted once the audit has been concluded.

3.9.1 The **Lead Auditor** will be a member of the SRB and will be nominated by SER Administration. The Lead Auditor is responsible for managing the conduct of the audit and will:

- a) Select the projects for audit
- b) Confirm administrative arrangements with the Certification Coordinator of the Approved Body in advance of the audit
- c) Input the date of the audit on the SER IT system
- d) Chair the opening meeting
- e) Collate data gathered by members of the audit team
- f) Prepare audit reports and explain the need for auditees to submit meaningful auditee responses within ten working days of the audit report being uploaded by the Auditors
- g) Chair the closing meeting
- h) Upload audit data on the SER IT system
- i) Make recommendations to the SRB

3.9.2 The **Second Auditor** may be another member of the SRB or they may be a member of the Audit Pool. In exceptional circumstances the Second Auditor may deputise for the Lead in any of the above responsibilities.

3.10 Conflicts of Interest

3.10.1 An individual who is a member of the SRB and Audit Pool must decline to undertake an audit where they could be deemed to have, or it is perceived that they could have a conflict of interest. These include, but are not limited to, the following circumstances:

- a) Potential Auditor is a close friend of the Approved Certifier to be audited
- b) Potential Auditor is employed by or is a Director or Partner of the Approved Body to be audited
- c) Potential Auditor was employed by or was a Director or Partner of the Approved Body to be audited
- d) Potential Auditor was employed by or was a Director or Partner of a firm that employed the Approved Certifier to be audited and the latter left that firm under conflicting circumstances
- e) Potential Auditor is employed by or is a Director or Partner of a firm that could be considered to be a direct competitor of the Approved Body to be audited
- f) There are past events involving both the potential Auditor and the Approved Certifier to be audited that could affect the objectivity of the Auditor in relation to the audit.
- g) There are past events involving both the potential Auditor and the Approved Body to be audited that could affect the objectivity of the Auditor in relation to the audit.

If an Auditor is unsure as to whether something is a conflict of interest, they must contact the SER Admin Team for advice.

3.10.2 If an Approved Body or Approved Certifier considers that there may be a conflict of interest with an assigned Auditor, they should contact SER Admin immediately on receiving notice of the assignment with their concerns.

4.0 Audit Methodology

The audit procedures described in this document are based on the recommendations contained within *BS EN ISO 19011:2018 Guidelines for auditing management systems*.

4.1 Performance Criteria

Performance Criteria are lists of requirements against which the performance of the Approved Body and the Approved Certifier will be assessed and which, if met, should give confidence that the requirements of the Scheme and legislation are being met. Appendices A and B list these criteria and give some background information explaining the importance of the item and a description of the evidence which should be presented by the auditee at audit to demonstrate that the performance criteria have been met. Where the Auditors consider that the evidence presented is insufficient to demonstrate that any one of the performance criteria has been met a finding shall be recorded.

4.2 Audit findings

There are two types of audit findings, **Major Non-conformances** and **Improvement Issues**.

Major Non-conformances (MNC)	<p>These are serious failures to meet any particular performance criteria. Examples of findings that would be considered to be Major Non-conformances are listed in Appendices A and B.</p> <p>A Major Non-Conformance carries a score of 3</p>
Improvement Issues (II)	<p>These are less serious failures to fully meet any particular performance criteria. Examples of findings that would be considered to be Improvement Issues are listed in Appendices A and B.</p> <p>An Improvement Issue carries a score of 1</p>

Audit findings will be determined by the assessment of evidence presented by the Approved Body or Approved Certifier to demonstrate compliance with the published performance criteria. Audit teams are required to undertake the audits in a systematic and consistent manner using a standard reporting methodology. A failure to meet the required standard will result in one of the above findings being recorded.

Where a Major Non-conformance or Improvement Issue is noted the Approved Body or Approved Certifier is required to alter or improve their procedures in any future certification work. The number and type of any non-conformances identified by the audit process will influence any action taken by the Board arising from the audit, including the timescale to the next audit.

4.3 Comments

A Comment will be recorded where the Auditors have taken the view that the performance criteria has not been fully met however the matter is not sufficiently serious to attract one of the above findings.

A Comment will also be recorded where the Auditors wish to confirm advice given during the Audit.

Comments are intended to assist the auditee improve some aspect of their procedures but do not constitute a significant departure from acceptable practice.

Comments do not attract scores.

4.4 Audit Checklists

Audit checklists require Auditors to record information in a standard format against each of the audit sub-classifications in the audit criteria list. Auditors should use these checklists to record:

- a) Whether the item was audited and/or, in the case of projects, whether the item applied
- b) Whether the item fully complied with the requirements of the audit criteria
- c) Whether any findings were identified and whether these were Major Non-conformances, Improvement Issues or Comments
- d) Details of any findings

In the case of an audit of an Approved Certifier the above information should be recorded separately for each project audited:

4.5 Audit score

In the case of an audit of an Approved Body, the audit score will be based on the sum of the scores calculated from the number of findings.

In the case of an audit of an Approved Certifier the sum of the scores will be calculated separately for each project audited and the mean of the scores and the maximum score will be determined.

4.6 Audit outcomes

Audit outcomes are notified to Approved Bodies and Approved Certifiers as one of the following:

- Re-audit within 5 years
- Re-audit within 4 years
- Re-audit within 3 years
- Re-audit within 2 years
- Re-audit within 1 years
- Account requires mentoring
- Account to be suspended
- Account to be terminated

In addition, the Approved Body and/or Approved Certifier will be notified of any corrective actions required.

Note that the actual period between audits may vary significantly from that stated in the outcome notification from the previous audit. See section 2.1 *Timing of audits* for details.

4.7 Approved Body Audit outcome

4.7.1 The outcome of an Approved Body Audit will be determined following a review by the SRB of the following:

- a) The initial audit score
- b) The severity of the audit findings (i.e. proportion of MNC's and II's)
- c) A review of the Approved Body's proposals for corrective actions
- d) Previous audit history
- e) Repeat findings from previous audits including whether any corrective actions from a previous audit have been satisfactorily implemented
- f) Results of the audits of Approved Certifiers certifying for the Approved Body conducted at the same time
- g) Any reason which results in a lack of confidence that Standards 1.1 and 1.2 are being met
- h) Previous poor outcomes. These are defined as:
 - Grades C, D, D1, D2 or E
 - Re-audit with 1 year, Account requires mentoring or Account to be suspended
 - Further monitoring (from a Monitoring review)

Where the Approved Body has previously received one instance of any of these outcomes, an outcome of Account requires mentoring will also be considered; where an Approved Body has previously received two instances of any of these outcomes, an outcome of Account to be suspended will also be considered. A further instance of any of these outcomes following previous suspension may lead to an outcome of withdrawal ("termination") of membership.

- i) If the Approved Body has shown a disregard for the legislative and scheme requirements, an outcome of Account to be suspended will also be considered.

4.7.2 Following their review, the SRB recommend a decision to the SER Board, which reviews and confirms the outcome. The outcome of the Approved Body Audit will be one of the following:

- a) No corrective actions required, next audit to coincide with next Approved Certifier audit
- b) The Approved Body to implement corrective action(s) and period to next audit specified in outcome notification
- c) The Approved Body requires mentoring (see the *SER Procedures for mentoring and suspension with mentoring* for details of this process)
- d) The Approved Body will be suspended (see the *SER Procedures for mentoring and suspension with mentoring* for details of this process)
- e) The Approved Body's membership of the Scheme will be withdrawn("terminated")

4.7.3 In addition, Approved Body outcome emails may also include notification that there are concerns that the requirements of Standards 1.1 and 1.2 are not being met, and any actions required in respect of this. See section 8.5 *Requests for Information following an Audit* for details of this process.

4.8 Approved Certifier Audit outcome

- 4.8.1 The outcome of an Approved Certifier Audit will be determined following a review by the SRB of the following:
- a) The individual scores for each project, together with the mean and the maximum scores
 - b) The proportion of auditable items that resulted in audit findings
 - c) The severity of the audit findings (i.e. proportion of MNC's and II's)
 - d) The types of projects audited
 - e) A review of the Approved Certifier's proposals for future corrective actions
 - f) Previous audit history
 - g) Repeat findings from previous audits including whether or not any corrective actions from an earlier audit have been satisfactorily implemented
 - h) An assessment of CPD undertaken over the last three years
 - i) Any reason which results in a lack of confidence that Standards 1.1 and 1.2 are being met
 - j) Previous poor outcomes. These are defined as:
 - Grades C, D, D1, D2 or E
 - Re-audit with 1 year, Account requires mentoring or Account to be suspended
 - Further monitoring (from a Monitoring review)Where the Approved Certifier has previously received one instance of any of these outcomes, an outcome of Account requires mentoring will also be considered; where an Approved Certifier has previously received two instances of any of these outcomes, an outcome of Account to be suspended will also be considered. A further instance of any of these outcomes following previous suspension may lead to an outcome of withdrawal ("termination") of membership.
 - k) If the Approved Certifier has shown a disregard for the legislative and scheme requirements, an outcome of Account to be suspended will also be considered.
- 4.8.2 Following their review, the SRB recommend a decision to the SER Board, which reviews and confirms the outcome. The outcome of the Approved Certifier Audit will be one of the following:
- a) No corrective actions required; the likely period to the next audit is specified in the audit outcome notification
 - b) The Approved Certifier is to implement any corrective action(s) and period to next audit specified in outcome notification
 - c) The Approved Certifier requires mentoring (see the *SER Procedures for mentoring and suspension with mentoring* for details of this process)
 - d) The Approved Certifier will be suspended (see the *SER Procedures for mentoring and suspension with mentoring* for details of this process)
 - e) The Approved Certifier's membership of the Scheme will be withdrawn ("terminated").
- 4.8.3 In addition, where the assessment of the Approved Certifier's Continuing Professional Development (CPD) shows that the scheme requirements have not been met, monitoring of CPD for a period of up to 3 years may be imposed. See section 8.6 *CPD Monitoring* for details of this process.

5.0 Arranging the Audit

5.1 General

The general procedure for arranging the audit programme is as follows. See section 3.0 *Roles and Responsibilities* for more detail on roles and responsibilities.

In advance of the audit the administration team will supply the audit team with the contact details of the Approved Body and the Approved Certifiers who are to be audited. The information required to conduct the audit will be accessible to the audit team via the website.

5.2 Notification of audit

5.2.1 The SER Administration Team will contact the Certification Coordinator at the Approved Body via the website and notify them that an audit is required to be undertaken, the composition of the audit team, the Approved Certifiers to be audited and whether or not there is a charge to be paid for the audit. (See section 2.2 *Charges for audits* for details of charges)

5.2.2 The Lead Auditor will contact the Certification Coordinator and agree:

- a) Whether or not the audit is to be conducted on location, remotely or as a hybrid audit.
- b) The location of the audit, if not undertaken remotely
- c) Date for the initial meeting
- d) The platform to be used for remote meetings, e.g. Zoom, Teams, etc

5.3 Timing of audit

5.3.1 The audit should normally be undertaken within a maximum of eight weeks of the Approved Body receiving notification, except in circumstances where the Approved Certifier might be unavailable, such as:

- a) Maternity/paternity/adoption/shared parental leave
- b) Parental leave
- c) Bereavement/compassionate leave
- d) Extended leave due to ill health
- e) Jury service or other civic duties
- f) Sabbatical/extended leave

If the period away from certification duties is less than a calendar month, the audit may be postponed until the Approved Certifier returns; if it is likely to be more than a calendar month, the audit will be cancelled and rearranged when the Approved Certifier returns to certification duties.

5.3.2 Failure of the Approved Body to agree a date within the above timeframe may be brought to the attention of the SER Board, who will consider what action should be taken, including the possible suspension of the Body and its Approved Certifiers from the Scheme until an audit has been conducted.

5.4 Selection of projects for audit

- 5.4.1 The Lead Auditor will select the projects to be audited from a list of projects certified for the Approved Body since the date of the last audit outcome notification (or, in the case of a first audit, since membership of the Scheme was granted).
- 5.4.2 The number of projects selected for possible audit will be determined by the Lead Auditor who will take into consideration the number, types, values, and risk classifications of projects certified and the declared experience of the Approved Certifier.

If the Approved Certifier has certified a significant number of projects since their last audit or since joining the scheme, it is likely that more projects will initially be selected for audit.

- 5.4.3 A maximum of five projects from those selected for possible audit will be audited for each Approved Certifier.

The difference between the number of projects selected for possible audit and that audited helps with situations where, on inspection at an audit, it is apparent that a project is not suitable for auditing for reasons that were not apparent when the choice of projects was made. This contingency helps to prevent an audit not being able to be completed because an insufficient number of suitable projects have been notified to the auditee in advance of the audit.

- 5.4.4 The certification activities associated with all of the certificates (stages and amendments) issued on each project will be audited, except where earlier stages or amendments were reviewed as part of a previous audit, in which case the associated certification and project records will be examined for information only.

6.0 Conducting the Audit

6.1 General

- 6.1.1 It is the responsibility of the Lead Auditor to conduct the audit. Normally, the Lead Auditor will chair the opening and closing meetings with the auditee, upload the audit findings, oversee the preparation of the audit report, and present it to a subsequent meeting of the SRB.
- 6.1.2 Audits may be conducted remotely or in-person, or via a combination of the two methods. In general, the format will be agreed between the Auditor and the Approved Body and Approved Certifier(s) to be audited. There may be circumstances where SER considers that the audit should be conducted either remotely or in-person, in which case the Approved Body and Approved Certifier(s) will be informed of this at the time of the audit assignment.
- 6.1.3 Observers may be present at the audit with approval from the Auditors and Auditees. An Auditee may from time to time wish to invite a colleague to join the audit. They should not influence or interfere with the conduct of the audit. If this cannot be assured, the Lead Auditor may deny observers from being present during certain audit activities.

6.2 Procedure for conducting the audit

- 6.2.1 The Lead Auditor will arrange an initial meeting with the Certification Coordinator and the Approved Certifier(s) who are to be audited. This will be conducted remotely and will confirm arrangements for the audit including whether it is to be conducted fully remotely, as a hybrid or in person, as well as an explanation of the objectives of the audit, the scope, and the criteria. It is likely that the following points will be covered at this meeting as appropriate:
- a) Introduction of the participants and an explanation of roles
 - b) Explanation of the objectives of the audit, the scope, and the criteria
 - c) The method and procedures to be employed including an explanation of how performance will be measured and recorded
 - d) An explanation of how non-conformances are determined and their importance to establishing the audit outcome of the Approved Body or Approved Certifier
 - e) Whether or not the Approved Certifiers wish to be present during their project audit
 - f) Agree on the attendance of any observers at the audit
 - g) The platform to be used for the sharing of data, e.g. cloud services or a secure shared area on a private server
 - h) The information that is to be made available on the sharing platform and that which is to be provided at the audit, including any information that should be provided as hard copy
 - i) Confirmation that the resources and facilities required by the audit team are available
 - j) Confirmation of work safety and security measures relevant to the audit team
 - k) Arrangements for breaks/refreshments
 - l) Timescale for the audit especially the latest practicable finishing time
 - m) Arrangements for the closing meeting
 - n) Date(s) for subsequent meetings
- 6.2.2 The Approved Body and Approved Certifier(s) will be advised of the projects selected for possible audit at least ten working days prior to the audit date as stated on the SER Website.

- 6.2.3 At least five working days prior to the audit date stated on the SER website, the Approved Body shall ensure that initial records for each of the projects selected for possible audit are uploaded to the agreed sharing platform. The initial upload should include as a minimum:
- a) a scoping and planning document
 - b) any drawings relied upon for the purposes of certification as indicated on the certificates
 - c) any records indicating how compliance with the standards was established
- 6.2.4 The Approved Body and Approved Certifiers will be advised of the projects to be audited on the morning of the audit date as stated on the SER website. The Approved Body must then ensure that on that date the full certification and project records for those projects selected for audit are made available to the Auditors in the format agreed at the initial meeting. Sufficient information must be provided to enable a meaningful assessment of the projects to be audited.
- 6.2.5 The Auditors will examine the certification and project records that have been provided to them, either on location or via the agreed sharing platform, and will determine whether or not the certification performance criteria have been met and whether or not there are findings which are to be recorded in the audit report. Auditees will be given the opportunity to answer any queries and discuss potential findings.
- 6.2.6 On completion of the review of the records by the Auditors, each Approved Certifier will be invited to review and agree any findings and to discuss the reasons for those findings and any corrective actions which will form part of their responses. See section 6.5 *Closing/Final Meeting*.

6.3 Lack of project records

- 6.3.1 Where, on the day of the audit, there is a significant lack of records for a particular project, the matter will be recorded within the audit report for the Approved Body, along with any explanation given by the Approved Body. This will be taken into account when determining the outcome of the audit. Depending on the size and nature of the project and the explanation given for the lack of records this may result in a recommendation for suspension of the Approved Body from the scheme.
- 6.3.2 Where records for any particular project are incomplete the audit should proceed with appropriate findings raised against the Approved Body and the Approved Certifier. Where there is a credible explanation for this it should be recorded in the audit report, and it will be taken into account when determining the audit outcome.
- 6.3.3 Where no explanation is given for a lack of records relating to the design and/or detailing of any particular element, the Approved Body may be required to provide a report and design information for the element(s) concerned, to demonstrate that the building complies with Standards 1.1 and 1.2 of the Building Regulations or outlining the measures that will be taken to see that the building complies with these Standards.

6.4 Deficiencies in the certification process

- 6.4.1 The purpose of the audit is not to check the design, but to ensure that there are certification procedures in place and being followed that give confidence that the design meets the standards required by the building regulations.

- 6.4.2 It is possible that, while inspecting the project records, the Auditors will find errors or omissions that suggest deficiencies in the certification process, which may indicate that the requirements of Standards 1.1 and 1.2 are not being met.
- 6.4.3 In normal circumstances the Auditors will bring these errors or omissions to the attention of the Approved Body and the Approved Certifier at the closing or final meeting. However, there may be circumstances where the Auditors decide following the closing meeting that there are errors or omissions to be addressed.
- 6.4.4 All errors and omissions found will be recorded in the General Comment section of the audit report for the Approved Body. Deficiencies in certification procedures will be recorded in the report for the Approved Certifier in the normal way. The Approved Body should then record in their auditee responses what action they propose to take to demonstrate that the requirements of Standards 1.1 and 1.2 are being met.
- 6.4.5 In some situations, the SRB may determine that there are matters of concern that have not been recorded within the Audit Report and these will be raised with the Approved Body by SER Admin following the audit. See section 8.5 *Requests for Information following an Audit* for details of this process.

6.5 Closing/Final Meeting

A closing or final meeting should be held to present the audit findings and conclusions in such a manner that they are understood and acknowledged by the auditee. Matters to be covered during this meeting include:

- a) Any circumstances encountered during the audit that may decrease reliance on the audit findings.
- b) The nature of any findings found by the audit team and whether or not they are agreed by the auditee.
- c) That the findings may change in either category or severity as a result of review by the Auditors following the day of the audit, or of review of the audit report by the SRB or the SER Board (see (e) below).
- d) The Lead Auditor should advise the auditees that they will be notified when the audit report is available on the SER website and that it is important that they should provide details of the corrective actions to be implemented when making their responses. Any responses to findings raised should be comprehensive, indicating a clear understanding of the issues raised and offering a clear proposal for ensuring that the issues do not recur. Where the auditee disagrees with a non-conformance, they should set out why they disagree with the finding, bearing in mind that it is the auditee's responsibility to demonstrate compliance with the performance criteria. See sections 8.1 *Action by an Approved Body* and 8.2 *Action by an Approved Certifier* for further information on this process. Auditees should be advised that evidence made available to the Auditors after the day of the audit will not normally invalidate a non-conformance.
- e) The Lead Auditor should advise the auditees of SRB's role in reviewing the audit report, and the auditees' proposals for corrective actions, and that this, together with a review by the SER Board will determine the final outcome of the audit.
- f) Any design related issues that were noted by the audit team while conducting the project audits should be discussed with the Approved Certifier and the Certification Coordinator.

7.0 Reports and Recommendations

7.1 Content of report

The Lead Auditor is responsible for uploading the audit information into the SER website. This will generate separate reports covering the audits of the Approved Body and each of the Approved Certifiers. Reports should contain the following information:

- a) Type of audit (Approved Body or Approved Certifier)
 - b) Name and SER reference number of auditee
 - c) Date of audit
 - d) Composition of audit team
 - e) General comment on audit findings
 - f) For Approved Body audits:
 - Details of any findings
 - Audit score
- For Approved Certifier audits:
- Applicability of performance criteria to the project and whether or not the criteria were met
 - Details of any findings for each project
 - The maximum and average scores across the range of projects audited

7.2 Checklists

Standard checklists, based on the performance criteria in Appendices A and B are available to assist the audit team to make notes of items audited and findings as the audit proceeds. The audit checklist should be completed during the course of the audit either by hand or electronically on a standard proforma or online if the Auditor prefers and web access is available. The checklist should be retained by the Lead Auditor for reference at the SRB meeting.

7.3 Timescales

The audit information will normally be uploaded by the Lead Auditor and agreement of the final report by the Auditors should normally be reached within 10 working days of the completion of the audit.

8.0 Actions Arising from the Audit

8.1 Action by an Approved Body

- 8.1.1 The Approved Body will be notified by email as soon as the audit information has been uploaded and agreed by both Auditors as correct. Within 10 working days of the audit report being uploaded the Certification Coordinator shall provide, via the SER website, responses to each of the findings raised. Responses should demonstrate an understanding of why the various issues were raised and describe what corrective actions will be taken to ensure that they are addressed in any future certification together with any other comments. These will be considered by the SRB when it makes recommendations to the SER Board on the outcome of the audit.
- 8.1.2 If the Approved Body has not responded within a further 10 working days (or a valid reason for the failure to respond is not given) the Approved Body will be suspended from the Scheme pending receipt of suitable responses.
- 8.1.3 The corrective actions provided will be reviewed by the Lead Auditor and if not considered sufficiently detailed the Approved Body will be notified by email that more detailed responses are required with an indication of the areas which merit review and resubmission. If more detailed responses are not submitted within 10 working days, it will be assumed that the Approved Body wishes their original responses to stand.

8.2 Action by an Approved Certifier

- 8.2.1 The Approved Certifier will be notified by email as soon as the audit information has been uploaded and agreed by both Auditors as correct. Within 10 working days of the audit report being uploaded the Approved Certifier shall provide, via the SER website, responses to each of the findings raised. Responses should demonstrate an understanding of why the various issues were raised and describe what corrective actions will be taken to ensure that they are addressed in any future certification together with any other comments. These will be considered by the SRB when it makes recommendations to the SER Board on the outcome of the audit.
- 8.2.2 If the Approved Certifier has not responded within a further 10 working days (or a valid reason for the failure to respond has not been given) the Approved Certifier will be suspended from the Scheme pending receipt of suitable responses.
- 8.2.3 The corrective actions provided will be reviewed by the Lead Auditor and if not considered sufficiently detailed the Approved Certifier will be notified by email that more detailed responses are required with an indication of the areas which merit review and resubmission. If more detailed responses are not submitted within 10 working days, it will be assumed that the Approved Certifier wishes their original responses to stand.

8.3 Action by SRB

- 8.3.1 The SRB will consider the audit report and any other relevant information before arriving at an audit outcome recommendation. Factors to be taken into account when considering what outcome should be recommended to the SER Board are given in *4.7 Approved Body Audit outcome* and *4.8 Approved Certifier Audit outcome*

8.3.2 Where non-conformances have been identified but no corrective action has been proposed by the auditee the SRB may consider recommending suspension from membership of the Scheme until such corrective action is proposed.

8.4 Action by the SER Board

The SER Board is responsible for confirming or amending the recommendations of the SRB. The Head of Certification will advise Approved Bodies and Approved Certifiers of the outcome of the audit and any action that has been decided by SER Board.

8.5 Requests for Information following an Audit

8.5.1 In situations where the SRB has determined that there are errors or omissions that suggest deficiencies in the certification process which may indicate that the requirements of Standards 1.1 and 1.2 are not being met that have not been recorded within the Audit Report, these will be raised with the Approved Body by SER Admin.

8.5.2 In all cases where supplementary information is required, the request will be formalised within the Audit Outcome Email to the Approved Body unless it is determined for reasons of expediency that the Approved Body should be emailed before the Audit Outcome Email is finalised.

8.5.3 The Approved Body and the Approved Certifier will be asked to review the design and provide a report, along with design information, that demonstrates that the building complies with the required standards, or which outlines the steps that will be taken to see that the building meets the required standards. This shall include confirmation that the Approved Certifier has reviewed any additional information that has been produced and shall include certification records from the Approved Certifier demonstrating how compliance was established. It is expected that this will include a scoping document and certification plan/record sheet.

8.5.4 The information shall be submitted to admin@ser-ltd.com in electronic form within one month of the request.

8.5.5 Once submitted, SER Admin will arrange for the information to be reviewed, usually by the Lead Auditor and another member of the SRB, to check if the deficiencies have been addressed and to confirm that there is now confidence that the requirements of Standards 1.1 and 1.2 are now being met.

8.5.6 The Approved Body should keep SER Admin advised regarding progress on assembling this information; if evidence of action is not forthcoming or if the matters are not satisfactorily resolved, SER will determine what further measures need to be taken to address the situation.

8.6 CPD Monitoring

8.6.1 Where monitoring of CPD undertaken by the Approved Certifier has been imposed as part of an audit outcome, the Approved Certifier will be required to record details of CPD activities in the CPD Activity Notepad as they are completed throughout the monitoring period.

8.6.2 The submitted records will be reviewed, normally by the Lead Auditor from the most recent audit, at intervals of approximately 4 months. The Approved Certifier may be contacted by the reviewer following each review. The reviewer will report to the SRB on the interim assessments made.

- 8.6.3 After a period of 12 months, the SRB will decide whether monitoring should cease or should continue until there is sufficient evidence that the scheme requirements are being met.
- 8.6.4 In circumstances where the monitoring exercise appears to be demonstrating that the Scheme requirements are not being met, the SRB may recommend to the SER Board that the Approved Certifier's membership of the scheme is suspended until the Approved Certifier has submitted acceptable proposals for achieving an acceptable level of CPD and has attended a formal interview to assess their understanding of the Scheme requirements regards to CPD.

9.0 Representations to the SER Board

Approved Bodies and Approved Certifiers may, after the issue of an audit outcome notification, make representations to the Board of SER regarding that outcome. See the *SER Complaints and Disciplinary Procedures* for details of this process and required timescales for submission.

10.0 Appeals

Appeals may only be lodged if a representation on the matter disputed has previously been made to the Board of SER. See the *SER Complaints and Disciplinary Procedures* for details of this process and required timescales for submission.