

Quidos

Excellence in Efficiency

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Non-Domestic Assessment Quality Assurance

Overview

As an Accreditation Scheme, we are responsible for ensuring that the quality of work carried out by our members is of a consistently good standard. In a relatively new sector, such as that of EPCs and ACRs, it is important that high standards are established and maintained throughout every strand of the industry. This will help maintain the credibility of the EPC as an important document for both cutting carbon emissions, and reducing energy consumption in households and businesses within the UK. It is vital that these high standards are implemented; both by us as an Accreditation Scheme, and you as an Energy Assessor.

Quality Assurance Requests

QA requests should not be seen as a burden, or be perceived as a punishment. For those assessors who maintain high standards in their work, QA can be an opportunity to demonstrate this, or even to develop better practice. By regularly auditing all of our members, we aim to ensure that all assessors can prove themselves capable of providing the best service to the customer and the industry.

As a general rule, the following minimum QA requirements are in place:

- At least 2% of all reports lodged through the scheme are audited;
- Every active member is audited at least once every half-year;
- Members are audited on at least 1% of their lodged reports;
- Each new member is audited within 30 days of joining the scheme, or if not, their first available lodgement.

There are other circumstances which would require QA checks:

- Excessive use of the Quidos help desk;
- Customer complaints;
- High lodgement rates (in excess of 25 lodgements a month);
- Stock image checks on at least 2% of audited reports.

QA checking is processed in the following manner:

1. Landmark and EST lodgement processed at the start of the month;
2. Based on selection criteria, EAs requiring QA checking will be selected, and a randomly selected RRN nominated;
3. Assessors will be given the RRN number/s of the reports required for audit, and be expected to submit full and complete data from the survey within 15-working days;
4. Once your audit evidence has been uploaded, the assigned auditor (also chosen randomly) will then review your report and evidence. Feedback will be given within 15-working days. FULL TIMESCALES AVAILABLE IN APPENDIX D.

Minimum Requirements

As a practicing member of the Qidos Accreditation Scheme you are expected to keep detailed records of all reports lodged. These records must be of a professional standard, and enable us to adequately audit the submitted work. The fundamental underlying principle of Quality Assurance is this: the scheme should be able to reproduce the report solely from the evidence provided by the assessor.

When uploading your files, the QA team would hope you ask yourself:

“Would another assessor be able to recreate the report fully from this evidence?”

If *you* wouldn't be able to, the auditor almost certainly wouldn't either.

Where you do not provide evidence for a given element, the auditor will proceed and complete the audit as though the particular element is not present, which will often result in an audit failure. Evidence provided following audit feedback will only be considered to determine if the report is not defective, but will not change the audit result.

It's really important that EAs double- and triple-check all files before pressing the '*Notify QA Controller*' button. Once you press this button, you are confirming that all of the evidence you have uploaded are sufficient for the auditor to complete the survey. If this is not the case, it is likely that your audit will fail.

The full details of the minimum evidence which must be provided for Quality Assurance check can be found in the following appendices:

Appendix A1 – NDEA EPC (Level 3/4);

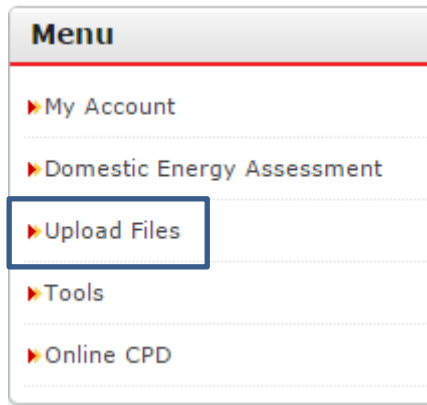
Appendix B1 – Display Energy Certificates;

Appendix C1 – Air-Conditioning Reports (Level 3/4).

Evidence Uploading

All evidence **MUST** be uploaded through iQ-Energy, and **cannot** be submitted by email or Dropbox to the QA Team. This preserves the audit trail between assessors and auditors, and makes the EA solely responsible for management of their data.

Your audit RRN will appear in your Control Panel in iQ-Energy stating when it is due, as well as a link to upload. However, targeted audits will need to be uploaded manually using the '*Upload Files*' button in the Control Panel menu. Just search for the requested RRN and upload your files.



The evidence you provide should be clear, concise, and of a high enough standard to enable the auditor to review your work accurately.

Photographic evidence is of particular importance, ensuring that they are clear and in context for the purposes required. All photographic evidence must include a date-stamp within the image, and retain the associated metadata created by the camera when taking the photograph. You should ensure that, if using an image resizing program to aid in image uploading for audit, the metadata (EXIF) is maintained. We request that photographic evidence be uploaded as separate files, and not pasted into a single document. This enables the auditors to check each image thoroughly.

If the photographic evidence is deemed to be of underwhelming quality, the assessor will be warned that more care is required in future. If it is deemed that the evidence provided is not of sufficient quality to allow accurate auditing, the report cannot be audited, resulting in an audit failure, with the EA requiring further targeted QA.

As detailed in your membership agreement, it is essential that assessors keep the records of each report both secure and readily accessible. We will not accept excuses related to missing QA information.

APPENDIX A: Audit Process for NDEA EPCs (Level 3/4)

From the date of an audit request, an EA has 15-working days in which to make the necessary uploads to iQ-Energy.

If an assessor has a legitimate reason for an auditing deadline being missed, they must inform the Scheme, who will be able to provide an extension to the audit request of up to five working days from the assessor's return to work.

Once the submission deadline has elapsed, if an assessor has failed to upload evidence, they shall be immediately suspended. This suspension will only be lifted once the files have been uploaded and the EA can make a reasonable and compelling case as to why the information was not available. Should an upload be made without any comment from an EA, the suspension shall remain until it has been established why the audit was returned late.

Following the lifting of a suspension, EAs will be required to undertake 'targeted auditing'.

Random EPC Auditing

Once the evidence has been submitted, it will be audited by a member of our Quality Assurance Auditing team. The auditor will review the work and establish whether or not the EPC is acceptable or defective; providing the assessor with a feedback report for the audit upon completion.

An EPC will be considered defective if it fulfils any of the following criteria:

1. The sum of the absolute errors between the energy assessor's and QAA's BER rating exceeds the required accuracy requirement (10%);
2. The sum of the absolute errors between the energy assessor's and QAA's EPC rating exceeds the required accuracy requirement (5%);
3. If recommendations have been incorrectly added or removed;
4. If errors in the building's description would result in a change in the recommendations made;
5. If the building's description is sufficiently inaccurate such that it brings into question the accuracy of the rating by the seller. 'Sufficiently inaccurate' is taken to mean information on the EPC which is demonstrably incorrect subject to an ability to change the description in the software to account for what the assessor has seen;
6. If the evidence provided to justify the EPC is deemed insufficient or of underwhelming quality – this is specifically related to the use of defaults. Evidence quality could be due to blurred images, lack of context, or unfit for purpose.

In the event that the report is declared defective, it will need to be cancelled and re-lodged within the correct information in place within 10-working days. The onus is on the assessor themselves to do this, using the audit feedback summary as guidance. If you provide further evidence which would prove the EPC correct, you will not have to re-lodge the report, however it would still be classified as an audit failure.

From the date of failure, EAs will also have 10-working days within which to appeal against the audit decision. After this has elapsed, the EA will be identified as requiring 'targeted auditing'.

Targeted Auditing

Targeted auditing is a way for Qidos to carry out further checks on an EA's competence in their role. The most common reason for requiring targeted auditing is following an auditing failure.

Any assessor who fails a QA check, or does not provide enough information required for the auditor to accurately assess an EPC, will require additional monitoring. This will consist of the auditing of a further two EPCs lodged within the 30 day period both prior to, and following, the audit failure, or two reports lodged in the 30 days following the feedback. If this is not possible then the next two EPCs lodged by the EA should be selected.

Targeted auditing following QA failure has a much stricter upload timescale than for random audits. Assessors have only 5-working days from receipt of the targeted request to upload their evidence, or risk suspension.

The following principles apply:

- If both audits are passed, the assessor will return to normal QA checking;
- If just one of the two audits fail, the Scheme will make a judgement as to what remedial action is required, depending on the severity of the errors made;
- If both audits are failed, the assessor is automatically suspended from the Scheme, until remedial action is undertaken. An appeal will not necessarily remove a suspension following the failure of both targeted audits;
- Where an EA is identified as requiring remedial training, Qidos will identify the requirements and ensure that the remedial training is undertaken. We aim to complete any remedial action within 5-10 working days;
- Upon return to the scheme, escalation procedures are implemented that will see the assessor audited on 10% of EPCs lodged for the following six months. If the assessor does not undertake the required remedial action, then they may be expelled from the scheme.

Scheme Auditing – Not due to QA Failure

As an accreditation scheme, we have an obligation to undertake additional audits for the following scenarios:

- High lodgements (more than 25 in a month);
- Over-use of telephone helpdesk or Support Log;
- Customer complaints.

Whilst complaints will generally result in the questioned EPC being requested for audit, the other two scenarios require two EPCs to be audited. These types of auditing request have a 5-working day upload time limit.

High lodgement auditing is usually a photographic audit. Only the photographic evidence for two, randomly selected, EPCs is required to be uploaded.

Appeals

If you genuinely believe that your EPC has been incorrectly assessed, you have the opportunity of lodging an appeal against the decision. Within the 'Upload for QA' section, you will see an **Appeal** button. By giving your reasons for appeal, we can review the auditor's decision and make a judgement. Audit appeals are not decided by the auditor in question, but from the QA team; this ensures that the EA's opinions are considered independently.

We would strongly advise assessors to make appeals within 10-working days of the audit feedback. This is within the window required for EPC re-lodgement and ensures that you are not unduly suspended and subject to unwarranted targeted audits. Appeals made after this time will not necessarily remove an account suspension.

Moving forward

In applying these Quality Assurance requirements, we are helping to ensure that quality is considered paramount in the Energy Performance industry. Energy Assessors should take pride in the quality of their work, and know that the higher the quality of Certificate they produce, the more they are contributing to helping cut the UK's carbon emissions and non-domestic energy usage. The better the standard of product that is produced, the more respectable and professional our industry will become.

We understand that this extra level of administration will add to the workload of an Energy Assessor, but we are confident that all will appreciate the benefits of a quality product.

Audit/EPC Help and Advice

The QA and Tech Support team is always available to aid EAs with any queries they might have about the auditing process.

The best way to contact the QA team is through the Qidos Support Log. This can be found by logging onto <http://support.quidos.co.uk>; alternatively, you can send an email which will log a support ticket to support@quidos.co.uk.

The telephone helpdesk service should only be used for URGENT telephone queries, such as an assessor on-site with a complex query which requires resolving.

As previously noted, whilst we appreciate that Energy Assessors have a right to contact the technical support team if they have a query, the over-use of these support channels will result in targeted auditing to confirm your confidence in completing EPCs.

APPENDIX A1: NDEA EPC Minimum Evidencing Requirements

Required Evidence	Notes
EPC	<i>A copy of the lodged EPC to be provided</i>
Software data file	<i>E.g NCT file from iSBEM showing all data inputs to produce report</i>
Floor plan	<i>Plan view, elevations, section, building logbook etc which allowed EPC to be calculated, endorsed/confirmed 3rd-party drawings</i>
Site notes	<i>Written notes of anything that would support your decision-making, use of default values, amendments to recommendations, etc.</i>
Evidencing of zoning	<i>Annotated drawing of the building identifying zones. In buildings with many zones, photographic evidence to be provided to support zone classification</i>
Supplementary calculations	<i>E.g. Over-shading, common values, CoP/SEER/EER, SFP, extraction rates, mechanical ventilation</i>
Ventilation rates	<i>Evidence required even when default selected</i>
Specific Fan Power	<i>Follow conventions</i>
Recommendations report	<i>If no recommendations have been eliminated, the QAA shall check that recommendations don't relate to a technology that does not exist within the building or is no appropriate</i>
Additional features	<i>Any other evidence required to justify the suppression or inclusion of additional recommendations</i>
	<i>Evidence that inspection of a particular element is impractical, using site note to explain any lack of photographic evidence</i>
	<i>Accredited details – only used with existing buildings is evidenced that they were accepted at the time of design is provided</i>
Photographic Requirements:	<i>All images must be date-stamped within the image and metadata retained</i>
Aerial view of building	<i>From Google Maps or similar</i>
All external elevations	<i>Front, rear, sides (if applicable)</i>
Construction types	<i>Include demonstration of presence of insulation</i>
Glazing types	<i>Information to support site notes, g-value, etc</i>
Shading types	
Roof construction	<i>Include roof-lights if applicable</i>
Full range of HVAC systems	<i>Including but not limited to make/model, SEER, EER, Chiller/generator type, Heat recovery, Fuel type, controls within zones/areas, heat emitters/cooling units, DHW, Mechanical Ventilation (SFP).</i>
Full range of lighting systems	<i>Including but not limited lamp types, lighting schedule, controls, sensors, lux measurements/calculations</i>
As-Built Checks:	<i>New build – ensure to include evidence from above as well</i>
Evidence that building has been built as per the design	<i>Statement from developer, or equivalent to provide a professional judgement, that building has been constructed in line with design</i>
	<i>Pressure test certificate and/or Building Compliance confirmation</i>
	<i>Accredited Construction Details (ACD) certificate</i>

APPENDIX B: Audit Process for Display Energy Certificates

From the date of an audit request, an EA has 15-working days in which to make the necessary uploads to iQ-Energy.

If an assessor has a legitimate reason for an auditing deadline being missed, they must inform the Scheme, who will be able to provide an extension to the audit request of up to five working days from the assessor's return to work.

Once the submission deadline has elapsed, if an assessor has failed to upload evidence, they shall be immediately suspended. This suspension will only be lifted once the files have been uploaded and the EA can make a reasonable and compelling case as to why the information was not available. Should an upload be made without any comment from an EA, the suspension shall remain until it has been established why the audit was returned late.

Following the lifting of a suspension, EAs will be required to undertake 'targeted auditing'.

Random DEC Auditing

Once the evidence has been submitted, it will be audited by a member of our Quality Assurance Auditing team. The auditor will review the work and establish whether or not the DEC is acceptable or defective; providing the assessor with a feedback report for the audit upon completion.

A DEC will be considered defective if it fulfils any of the following criteria:

1. The sum of the absolute errors between the DEC Assessor's and QAA's OR rating is more than 5%;
2. The DEC Assessor has selected an incorrect benchmark, measurement or assessment period (without adequate justification);
3. The DEC Assessor has made inaccurate assumptions about or failed to justify the separable energy use;
4. The DEC Assessor has inaccurately represented the Total Usable Floor Area or the Energy Consumption;
5. The DEC Assessor has failed to use the appropriate CIP;
6. If errors in the building's description/survey for the Advisory Report would result in a change in the recommendations made;
7. The building's description is sufficiently inaccurate that it brings into question the accuracy of the OR or the Advisory Report by the customer. 'Sufficiently inaccurate' is taken to mean information on the DEC or Advisory Report which is demonstrably incorrect subject to an ability to change the description in the software to account for what the assessor has seen;
8. The standard of English reached within the Advisory Report is unacceptable;
9. If the evidence provided to justify the DEC or Advisory Report is deemed insufficient (i.e. would not allow the DEC or Advisory Report to be recreated by the QA Assessor). This would include justification for the use of default values and the amendment of or addition to software generated recommendations. Should this situation arise the Addendum stipulates the enhanced QA sampling rate CLG would expect to see implemented;

10. In the case of an Asset Rating DEC, if the period of occupation is greater than 15 months from the 1st day of occupation to the nominated date;
11. In the case of a Year 2 DEC, if the assessor has not visited the site but cannot provide evidence that they created the 1st year DEC **and** that nothing has changed in the period since this was created. The same principle applies in subsequent years;
12. In the case of a default DEC if the assessor has not provided sufficient evidence that this is an appropriate rating;
13. If the evidence provided to justify the DEC is deemed insufficient or of underwhelming quality – this is specifically related to the use of defaults. Evidence quality could be due to blurred images, lack of context, or unfit for purpose.

In the event that the report is declared defective, it will need to be cancelled and re-lodged within the correct information in place within 10-working days. The onus is on the assessor themselves to do this, using the audit feedback summary as guidance. If you provide further evidence which would prove the DEC correct, you will not have to re-lodge the report, however it would still be classified as an audit failure.

From the date of failure, EAs will also have 10-working days within which to appeal against the audit decision. After this has elapsed, the EA will be identified as requiring 'targeted auditing'.

Targeted Auditing

Targeted auditing is a way for Quidos to carry out further checks on an EA's competence in their role. The most common reason for requiring targeted auditing is following an auditing failure.

Any assessor who fails a QA check, or does not provide enough information required for the auditor to accurately assess the DEC, will require additional monitoring. This will consist of the auditing of a further two DEC's lodged within the 30 day period both prior to, and following, the audit failure, or two reports lodged in the 30 days following the feedback. If this is not possible then the next two DEC's lodged by the EA should be selected.

Targeted auditing following QA failure has a much stricter upload timescale than for random audits. Assessors have only 5-working days from receipt of the targeted request to upload their evidence, or risk suspension.

The following principles apply:

- If both audits are passed, the assessor will return to normal QA checking;
- If just one of the two audits fail, the Scheme will make a judgement as to what remedial action is required, depending on the severity of the errors made;
- If both audits are failed, the assessor is automatically suspended from the Scheme, until remedial action is undertaken. An appeal will not necessarily remove a suspension following the failure of both targeted audits;

- Where an EA is identified as requiring remedial training, Qidos will identify the requirements and ensure that the remedial training is undertaken. We aim to complete any remedial action within 5-10 working days;
- Upon return to the scheme, escalation procedures are implemented that will see the assessor audited on 10% of DEC's lodged for the following six months. If the assessor does not undertake the required remedial action, then they may be expelled from the scheme.

Scheme Auditing – Not due to QA Failure

As an accreditation scheme, we have an obligation to undertake additional audits for the following scenarios:

- High lodgements (in excess of 25 Combined DEC or more than 100 renewal DEC lodgements a month);
- Over-use of telephone helpdesk or Support Log;
- Customer complaints.

Whilst complaints will generally result in the questioned DEC being requested for audit, the other two scenarios require two DEC's to be audited. These types of auditing request have a 5-working day upload time limit.

High lodgement auditing is usually a photographic audit. Only the photographic evidence for two, randomly selected, DEC's is required to be uploaded.

Appeals

If you genuinely believe that your DEC has been incorrectly assessed, you have the opportunity of lodging an appeal against the decision. Within the '*Upload for QA*' section, you will see an **Appeal** button. By giving your reasons for appeal, we can review the auditor's decision and make a judgement. Audit appeals are not decided by the auditor in question, but from the QA team; this ensures that the EA's opinions are considered independently.

We would strongly advise assessors to make appeals within 10-working days of the audit feedback. This is within the window required for DEC re-lodgement and ensures that you are not unduly suspended and subject to unwarranted targeted audits. Appeals made after this time will not necessarily remove an account suspension.

Moving forward

In applying these Quality Assurance requirements, we are helping to ensure that quality is considered paramount in the Energy Performance industry. Energy Assessors should take pride in the quality of their work, and know that the higher the quality of Certificate they produce, the more they are contributing to helping cut the UK's carbon emissions and non-domestic energy usage. The better the standard of product that is produced, the more respectable and professional our industry will become.

We understand that this extra level of administration will add to the workload of an Energy Assessor, but we are confident that all will appreciate the benefits of a quality product.

Audit/EPC Help and Advice

The QA and Tech Support team is always available to aid EAs with any queries they might have about the auditing process.

The best way to contact the QA team is through the Qidos Support Log. This can be found by logging onto <http://support.quidos.co.uk>; alternatively, you can send an email which will log a support ticket to support@quidos.co.uk.

The telephone helpdesk service should only be used for URGENT telephone queries, such as an assessor on-site with a complex query which requires resolving.

As previously noted, whilst we appreciate that Energy Assessors have a right to contact the technical support team if they have a query, the over-use of these support channels will result in targeted auditing to confirm your confidence in completing DEC's.

APPENDIX B1: DEC Minimum Evidencing Requirements

Required Evidence	Notes
DEC	<i>A copy of the lodged DEC/AR to be provided</i>
Software date file	<i>OR file used to calculate the DEC Must be provided whether site visited or not.</i>
Floor plan	<i>Plan view, elevations, section, building logbook etc which allowed DEC to be calculated, endorsed/confirmed 3rd-party drawings, identification of conditioned/unconditioned areas</i>
Site notes	<i>Written notes of anything that would support your decision-making, use of default values, amendments to recommendations, etc. ** MUST BE SIGNED AND DATED **</i>
Energy information from client	<i>Include signed and authenticated by client or suitably-qualified person (paper copies or spreadsheets), source of energy data, units used etc. Must be provided whether site visited or not.</i>
Occupancy hours	<i>To demonstrate extended occupancy hours; should be evidenced in a manner similar to site notes, e.g. photo of "opening hours", and validated by client or suitably-qualified person; evidence of no changes if no visit required Must be provided whether site visited or not.</i>
Separable energy use	<i>E.g. photograph of activity associated with separable energy use, and documentation associated with energy use in this area; evidence of no changes if no visit required Must be provided whether site visited or not.</i>
Benchmarking evidence	<i>Provided through combination of photographs and site notes</i>
Supplementary calculations undertaken outside of DEC software	<i>Can form part of site notes</i>
Additional features	<i>Evidence that inspection of a particular element is impractical, using site note to explain any lack of photographic evidence When no site visit required: Written evidence from client or suitably-qualified person to confirm that no changes to the building since last visit. Proof that the EA visited the building previously. This shall include requesting information associated with the DEC where the EA claimed to have visited the building</i>
Photographic Requirements:	<i>All images must be date-stamped within the image and metadata retained</i>
Aerial view of building	<i>From Google Maps or similar</i>
All external elevations	<i>Front, rear, sides (if applicable)</i>
Advisory Report:	
Evidence associated with building and services	<i>Site schematic, site notes detailing key system. Photographs as necessary</i>
Any other evidence required to justify the suppression or inclusion of additional recommendations	
Evidence of site visits	<i>Signed and dated site notes. Photographs of building and services</i>

APPENDIX C: Audit Process for Air-Conditioning Inspection Reports

Firstly, it is important to note that each Air-Conditioning Level (3 and 4) is assessed individually. This means that inspectors accredited to both streams will be audited to the prescribed level on each stream independently.

From the date of an audit request, an EA has 15-working days in which to make the necessary uploads to iQ-Energy.

If an inspector has a legitimate reason for an auditing deadline being missed, they must inform the Scheme, who will be able to provide an extension to the audit request of up to five working days from the inspector's return to work.

Once the submission deadline has elapsed, if an inspector has failed to upload evidence, they shall be immediately suspended. This suspension will only be lifted once the files have been uploaded and the ACI can make a reasonable and compelling case as to why the information was not available. Should an upload be made without any comment from an ACI, the suspension shall remain until it has been established why the audit was returned late.

Following the lifting of a suspension, ACIs will be required to undertake 'targeted auditing'.

Random ACIR Auditing

Once the evidence has been submitted, it will be audited by a member of our Quality Assurance Auditing team. The auditor will review the work and establish whether or not the ACR is acceptable or defective; providing the assessor with a feedback report for the audit upon completion.

An ACR will be considered defective based on the following checks:

TABLE 1: Desk-based ACR Audit Checks			
Ref	Area	Specific Check	Notes
1	Level of Check – L3 or L4 AC System	QAA review of evidence provided by ACI against TM44 and Conventions	QAA judgement
2	TM44 & Conventions followed in preparing report	Use agreed Conventions	QAA judgement
2.1	Comprehensibility of report – can a typical client be expected to understand recommendations	QAA to review report – are areas covered under the appropriate headings? Are the recommendations clear?	
3	Evidence required of ACI is provided and meets Scheme requirements in terms of content, quality & context	Minimum evidence requirements satisfied? Evidence support ACR? All key recommendations supported by evidence?	ACIs will review the evidence requirements of Appendix C1.
4	ACI-supervised work of others collecting information associated with the ACR	Number of lodgements over a periods of dates, times of visits and building location	

TABLE 2: Specific checks to demonstrate TM44 requirements

TM44 Requirement	Specific Check	Evidence Required	Comment
Comprehensibility of recommendations	Can a typical client understand the recommendations	Final report. Any client complaints.	Minor errors may result in a pass but feedback to the ACI shall be provided. Table 3 outlines errors.
Recommendations	Sense check the recommendations	Photos, site notes, etc	

TABLE 3: Examples of ACI omission and appropriate QAA response

Ref	Description
1	<p>MINOR OMISSION</p> <p>Where a single error, or fewer than 4 single errors of similar magnitude, shall lead to the ACIR audit being marked as a “pass”. For each error the EA shall be given feedback including what they need to do to ensure that the errors do not reoccur in future. Examples:</p> <ul style="list-style-type: none"> a) Omission of ONE item of required additional evidence (these will be listed later); b) Additional evidence incomplete (eg photos provided but not labelled); c) Essential basic inspection information not compiled adequately either before or on completion of the inspection; d) Essential basic inspection information does not justify selection of components for sampling; e) The number of components inspected meets the minimum sampling number but a larger sample would have given a more representative sample; f) Naming convention is used in an unusual manner which is not clearly explained; g) On average 1 to 2 queries on the use of technical language per 10 pages of report; h) On average less than 20 blank “Findings” or “Notes and Recommendations” per 10 pages of report.
2	<p>SIGNIFICANT OMISSION</p> <p>Where a single error, or fewer than 2 single errors of similar magnitude, shall lead to the ACR audit being marked as a “pass” only where the ACI has not previously received feedback in the previous year regarding each error. In other instances the ACR audit shall be marked as a “fail”. For each error the ACI shall be given feedback including what they need to do to ensure that the errors do not reoccur in future. Examples:</p> <ul style="list-style-type: none"> a) Failure to follow the guidance in the current version of TM44; b) Omission of TWO or more items of required additional evidence; c) Executive Summary omits a required piece of information (ie building description, use and description of each AC sub system); d) The number of components inspected is below the number required to meet the minimum Sampling requirements; e) The naming convention is used incorrectly; f) The cooling assessment calculation is incorrect in a way which affects the conclusion drawn; g) The SFP calculation is incorrect in a way which affects the conclusion drawn.
3	<p>MAJOR OMISSION</p> <p>Where a single error shall result in the ACIR audit being marked as a fail. Examples:</p> <ul style="list-style-type: none"> a) Essential advice and information is not provided e.g. advice regarding R22 is not given even though it is present in some components;

- | |
|--|
| <ul style="list-style-type: none">b) Omits basic energy saving advice relating to the sub systems inspected;c) Provides incorrect energy saving advice relating to the sub system inspected;d) Fails to advise on significant issues identified during inspection e.g. refrigerant leaks, Legionella risk, unsafe equipment etc. |
|--|

In the event that the report is declared defective, it will need to be cancelled and re-lodged within the correct information in place within 10-working days. The onus is on the assessor themselves to do this, using the audit feedback summary as guidance. If you provide further evidence which would prove the ACR correct, you will not have to re-lodge the report, however it would still be classified as an audit failure.

From the date of failure, ACIs will also have 10-working days within which to appeal against the audit decision. After this has elapsed, the ACI will be identified as requiring 'targeted auditing'.

Targeted Auditing

Targeted auditing is a way for Quidos to carry out further checks on an ACI's competence in their role. The most common reason for requiring targeted auditing is following an auditing failure.

Any assessor who fails a QA check, or does not provide enough information required for the auditor to accurately assess the ACR, will require additional monitoring. This will consist of the auditing of a further two ACRs lodged within the 30 day period both prior to, and following, the audit failure, or two reports lodged in the 30 days following the feedback. If this is not possible then the next two ACRs lodged by the ACI should be selected.

Targeted auditing following QA failure has a much stricter upload timescale than for random audits. Inspectors have only 5-working days from receipt of the targeted request to upload their evidence, or risk suspension.

The following principles apply:

- If both audits are passed, the inspector will return to normal QA checking;
- If just one of the two audits fail, the Scheme will make a judgement as to what remedial action is required, depending on the severity of the errors made;
- If both audits are failed, the inspector is automatically suspended from the Scheme, until remedial action is undertaken. An appeal will not necessarily remove a suspension following the failure of both targeted audits;
- Where an ACI is identified as requiring remedial training, Quidos will identify the requirements and ensure that the remedial training is undertaken. We aim to complete any remedial action within 5-10 working days;
- Upon return to the scheme, escalation procedures are implemented that will see the inspector audited on 10% of ACRs lodged for the following six months. If the inspector does not undertake the required remedial action, they may be expelled from the scheme.

Scheme Auditing – Not due to QA Failure

As an accreditation scheme, we have an obligation to undertake additional audits for the following scenarios:

- High lodgements (in excess of 30 ACR lodgements a month);
- Over-use of telephone helpdesk or Support Log;
- Customer complaints.

Whilst complaints will generally result in the questioned ACR being requested for audit, the other two scenarios require two ACRs to be audited. These types of auditing request have a 5-working day upload time limit.

High lodgement auditing is usually a photographic audit. Only the photographic evidence for two, randomly selected, ACRs is required to be uploaded.

Appeals

If you genuinely believe that your ACR has been incorrectly assessed, you have the opportunity of lodging an appeal against the decision. Within the 'Upload for QA' section, you will see an **Appeal** button. By giving your reasons for appeal, we can review the auditor's decision and make a judgement. Audit appeals are not decided by the auditor in question, but from the QA team; this ensures that the ACI's opinions are considered independently.

We would strongly advise inspectors to make appeals within 10-working days of the audit feedback. This is within the window required for ACR re-lodgement and ensures that you are not unduly suspended and subject to unwarranted targeted audits. Appeals made after this time will not necessarily remove an account suspension.

Moving forward

In applying these Quality Assurance requirements, we are helping to ensure that quality is considered paramount in the Energy Performance industry. Energy Assessors should take pride in the quality of their work, and know that the higher the quality of Certificate they produce, the more they are contributing to helping cut the UK's carbon emissions and non-domestic energy usage. The better the standard of product that is produced, the more respectable and professional our industry will become.

We understand that this extra level of administration will add to the workload of an Energy Assessor, but we are confident that all will appreciate the benefits of a quality product.

Audit/ACR Help and Advice

The QA and Tech Support team is always available to aid ACIs with any queries they might have about the auditing process.

The best way to contact the QA team is through the Qidos Support Log. This can be found by logging onto <http://support.quidos.co.uk>; alternatively, you can send an email which will log a support ticket to support@quidos.co.uk.

The telephone helpdesk service should only be used for URGENT telephone queries, such as an assessor on-site with a complex query which requires resolving.

As previously noted, whilst we appreciate that inspectors have a right to contact the technical support team if they have a query, the over-use of these support channels will result in targeted auditing to confirm your confidence in completing ACRs.

APPENDIX C1: ACIR Minimum Evidencing Requirements

Required Evidence	Notes
Report & Certificate	<i>A copy of the lodged AC Report and Certificate MUST be provided</i>
Names of any individuals who assisted the ACI in the preparation of the report and their roles	<i>Confirmation that all were covered by appropriate insurance, risk assessment, and the ACI can produce evidence that they meet the relevant competence requirements</i>
Dates and times of Inspection	<i>ACI's site notes shall normally be sufficient for this, but where these notes are contradictory with other evidence submitted, the Scheme shall seek verification, including contacting the client to verify dates and times</i>
Signed and dated site notes	<p><i>Site notes shall be contemporaneous</i></p> <p><i>The EA shall provide within the site notes anything used in support of:</i></p> <ul style="list-style-type: none"> <i>○ Confirming data input or decision making that cannot be substantiated by other sources of evidence</i> <i>○ Reflective thought, hand calculations, or amendments to recommendations (identifying building age, construction, assessing primary heating system etc), which is not provided through other sources of evidence.</i> <i>○ Format of the Site Notes shall be in line with that of the appropriate template</i>
Design floor plan, elevations, sections which allow the ACR to be assessed	<i>Aerial view from Google Maps, or similar, that clearly identifies the building and site layout, or a hyperlink to the satellite view of the building. Inspectors must follow the terms and conditions attached to the use of such material</i>
ACI-produced schematics (Level 4 only)	<i>Contemporaneous schematics demonstrating AC systems in buildings. Can be representative so long as they are produced to cover the full range of systems in use in the building</i>
Evidence of sub-system zoning and schedule of what is in each zone	<p><i>Evidence of sub-system zoning shall be by way of an annotated drawing of the building identifying the zones.</i></p> <p><i>In buildings with many zones, photographic evidence shall be provided to support zone classification, and system types</i></p>
<p>Photographic evidence</p> <p><i>- All external elevations: front, rear and side(s) where practical and appropriate</i></p> <p><i>- Photos supporting identification of existing system, component, or practice failures</i></p>	<p><i>Where the inspector believes that photographs are not practically achievable, but a particular element/energy using device is present, site notes shall explain why the photographic evidence is not available. The QAA shall form a view as to whether the claim is reasonable. In this regard, the QAA needs to record reasons why the absence of photographic evidence has been accepted.</i></p> <p><i>Photographs shall be dated within the image to avoid the use of stock images.</i></p>
Supplementary calculations undertaken by the ACI	
Additional evidence to justify the inclusion of recommendations	

APPENDIX D: Auditing Time Limits

From:	To:	Max. Time Limit	Exceptions	Sanctions
Scheme first requests audit evidence	Evidence uploaded to iQ-Energy	15 Working Days	5 working day extension for illness, hols, etc	Suspension if failure to upload
Evidence received	Auditing completed	15 Working Days	Circumstances beyond our control	
Audit feedback (failure)	Lodgement of replacement report	10 Working Days	Appeals received within 10 working days	Suspension if not re-lodged
Audit feedback (failure)	Identification of targeted audits	10 Working Days	Targeted audits will be sent following the end of appeal period	
Target request for audit evidence	Evidence uploaded to iQ-Energy	5 Working Days	5 working day extension for illness, hols, etc	Suspension if failure to upload
Audit feedback (failure x2)	Remedial Action	Assessors will automatically be suspended if they fail both targeted audits, pending completion of remedial action.		

APPENDIX E: NDEA Auditing Process

