QA and Certification Procedure

Aim:

The purpose of the Quality Assurance (QA) is, through a process of random checking and a minimum frequency of audit types, to provide a reasonable degree of confidence that the assessor has produced an assessment and rating in accordance with the procedures and processes defined within the scheme document. Through the QA process, Grønn Byggallianse ensures a consistent interpretation and application of the BREEAM methodology by competent persons.

Related documents

Certification process BREEAM-NOR – flowchart of the certification process

⑤ Registering QA

Updates project card
The project information in the certification system is updated with:
- New status
- Changes to names, addresses, scope etc. derived from the uploaded material

Invoices certification fee
Assessor organisation is invoiced according to PL 201.

Informs QA auditor
Makes QA auditor aware of new QA for auditing

Informs assessor on receipt and feedback schedule
The timescale is normally 30 working days.
Certification Manager can alter the timescale if needed. If the timescale is increased, the assessor is informed.

⑥ QA Part 1

Considers impartiality issues
QA auditor considers if he/she has a conflict of interest to the assessment. The procedure BREEAM-NOR Certification Impartiality is used for guidance. If in doubt, the QA auditor discusses the matter with the Certification Manager.

Examples of conflicts of interest considerations:
- Has the auditor any personal involvement in the assessment?
- Has the auditor been involved in any Technical Queries on the assessment? This is registered in Freshdesk.

If the QA auditor has a conflict of interest to the assessment, the QA audit is handed over to a different QA auditor.

Files uploaded data

The QA auditor ensures that the uploaded data is organised in the certification filing system and with a transparent and manageable structure.

Decides QA level and chooses issues to audit

The audit level of the assessor and the scheme decides the number and type of issues audited. When issuing a new manual (e.g. BREEAM-NOR 2021), all QA's will be full audits.

Below is a description of the conditions for assigning different audit levels for assessments and the audit procedure for each audit level.

Description of audit levels				Criteria for audit level		
Audit level	**% issues**	**Min no. of issues**	**Additional issues audited**	**QA team experience (this scheme version)**	**Assessor's certification history**	**Assessor's QA result in last 2 audits**
Partial audit	15%*	5	Minimum standards for rating level Pass	$\geq$ 4 full audits performed	> 2 certifications completed	< 10% Major NCs
Full audit	40%*	10		< 4 full audits performed	$\leq$ 2 certifications completed	> 10% Major NC's

*These issues are picked from the assessment report using a random number generator

The QA auditor is free to increase the audit level and the number of issues selected based on own judgement but can never decrease the level or number issues. The table below shows instances where this is to be considered:

Consider increasing audit level when:	Consider adding issues for auditing when:
the assessment score is exceptionally high, i.e. over 90%	the assessor repeatedly shows lack of understanding of a certain issue
the assessment score is close to lower certification level	the design stage QA has comments to check an issue specifically in the post-construction audit
the assessment has extraordinary elements which suggest the need for an increased audit level	Any other concerns the QA auditor or Grønn Byggallianse may have
a partial audit has more than 50% NC's on the audited issues*	
the QA auditor or Grønn Byggallianse have any other reason for increasing audit level	

*the assessor will then have to re-qualify for partial audit level on future assessments.

Performs administrative audit and QA

QA and Certification Procedure

All assessments are subject to an administrative audit, carried out using the Administrative Audit Checklist in the QA report. If needed, the QA auditor contacts the assessor to clarify errors discovered in this audit.
The QA auditor checks the assessor report and the evidence using the QA Checklist. The documents must concisely show how the assessor justifies his/her approval of the credits. If this is not clear, the QA assessor issues non-conformances or observations.

If the QA auditor is not certain of the correct response to the findings, he/she will discuss this with Certification Manager or other relevant personnel in Grønn Byggallianse.

The QA auditor uses the QA report template for the relevant manual.
The QA report should give a precise and informative analysis of the QA result. The QA auditor should not indicate personal opinions or be a consultant to the assessor on solutions.
General NCs which are not credit specific, shall be written in the "Summary" section and added to the total number of NCs.
All NC's of the same type under one issue is counted as one NC.
If a minor NC for one issue is of the same nature as a NC for another issue, it will not be added to the total number of NC but is indicated in brackets like this: (minor NC).

Non-Conformances and observations are identified using the following system:

Type of feedback	Definition	Examples (not an exhaustive list)
Major Non-Conformance	In the event of an audited issue failing the QA because of a significant error, a *'Major Non-Conformance'* will be identified. This will occur where a considerable technical error is identified which must be addressed prior to certification.	- The evidence shows clear noncompliance with the BREEAM criteria, or does not address a criterion at all. - An assessor states that criteria is not met but feels an exception should be made. No technical query was raised for confirmation prior to submission for QA/certification.
Minor Non-Conformance	In the event of an audited issue failing the QA because of a less significant error a *'Minor Non-Conformance'* will be identified. This will occur where a procedural or minor technical error is identified which must be addressed prior to certification.	- The evidence appears technically correct but there is a difficulty in confirming its validity, e.g. a letter without the name of the author, signature and letterhead. - Where the assessment is lacking a suitable audit trail for validating the assessment. For example, the evidence is a very lengthy document such as a specification and the detail confirming compliance with the criterion cannot be located.
Observation	In the event of an audited issue not failing on a technical or procedural basis but requiring an advisory comment to be raised it will be identified as *'Observation'*. Assessors should be aware of these comments for next-stage assessments or future projects to avoid potential non-conformances in future assessments but is not required to address the issue prior to certification.	- Incomplete or poorly referenced evidence within the assessment, leading to a difficulty locating and validating the assessment, but is eventually located by the auditor and no additional findings are raised once evidence reviewed. - The evidence is provided in an uncontrolled format (e.g. editable Word document).

Failed audit:

See SD 601 for details.

Grønn Byggallianse keeps a record on all failed audits. If an assessor were on a partial audit cycle, he/she will be put on full audits after the failed audit and will have to re-qualify for partial audits.

Writes and files QA report
The report is sent to the assessor using a standard e-mail indicating the next step in the process. The QA report and checklist are stored in the certification system file structure for the assessment.

Evaluates need for FAQ or manual changes
If the QA auditor sees any needs for clarification or changes to the manual, he/she will inform BREEAM-NOR responsible. Examples can be:
- Repeated NC's on certain issues due to unclear explanations in the manual
- Questions from assessors during the QA process
- Unclarity discovered by the QA assessor when consulting the manual to perform QA

Registers input for case studies information bank
During the QA process, the QA auditor should note down best practice examples from the assessments. This can be:
- Credits achieved which are not regularly taken
- Technical solutions that are not common or innovative
- Organisational or process systems in the assessment that are considered best practice examples of a BREEAM process

Identifies poorly performing assessors
The QA auditor informs the Certification Manager if an assessor performs poorly. The Certification Manager logs this in the NGBC improvement log and addresses the problem in communication with the QA auditor and the assessor. A log for the poorly performing assessor is established and stored in the file *1 Fortrolig person\Oppfølging revisorer*

Examples of poorly performing assessors can be:
- Assessor with repeatedly high number of non-conformances
- Assessors showing low level of understanding of the intentions of the manual issues
- Assessors who repeatedly do not follow certification procedures as described in SD 601 and related documents.

Updates project card and statistics
The QA auditor changes the assessment status on the project card in the database. All NC's and other relevant statistical data is recorded in the certification statistics records.

⑧ QA Part 2

Reviews resubmission report and evidence
The QA auditor checks the re-submission report and evidence to see if it is clear how the assessor justifies his/her approval of the credits.

The QA auditor can answer direct questions from the assessor regarding the NCs. The QA auditor is not allowed to guide the assessor in detail on acceptable solutions. Any clarifications i.e. by e-mail or phone, is to be documented and filed in the certification filing system.

Upholds or closes NCs

If the documentation is still not clear, the QA assessor upholds the non-conformance and asks the assessor for more documentation.

When the non-conformances are clarified to the QA auditor's satisfaction, the NC's are closed. All NCs must be closed before the assessment is recommended for certification.

Identifies poorly performing assessors

The QA auditor informs the Certification Manager if an assessor performs poorly during the process of closing NC's. The Certification Manager logs this in the NGBC improvement log and addresses the problem in communication with the QA auditor and the assessor. . A log for the poorly performing assessor is established and stored in the file *1 Fortrolig person\Oppfølging revisorer*

Examples of poorly performing assessors can be:
- Assessor who repeatedly needs many re-submissions in order to close NC's
- Assessors showing low level of understanding of the intentions of the manual issues
- Assessors who repeatedly do not follow certification procedures as described in SD 601 and related documents.

Writes QA report and files QA report and evidence

The QA auditor writes a QA report using the report template. If there are outstanding NC's, the resubmission report identifies these and sends the report to the assessor. When all NC's are closed, the QA auditor writes a QA report concluding that all NC's are closed.

All resubmission documentation is filed on the assessment folder in the certification filing system in a separate resubmission folder.

Produces certificate

The certificate is produced using the certificate template. The template must not be changed without consulting the Certification Manager and BRE.

The QA personnel uses the assessor report and the certification data base as a basis for the certificate. If there are discrepancies in the information, the QA personnel contacts the assessor for clarification.

The certificate is filed in the certification filing system. The assessor then informs the Certification Manager that the assessment is ready for Certification decision.

Updates project card

After forwarding the assessment for certification decision, the QA auditor updates the project status in the certification data base.

⑨ Certification decision

Performs QA and certificate control

The Certification Manager controls the QA process and the certificate using the QA and Certificate Control form. This to ensure consistent and correct QA audits.

If the Certification Manager is the QA auditor or has a conflict of interest, other designated personnel will carry out the control.

Approves QA and certificate

If all documentation is OK, the Certification manager approves the QA and the certificate by signing the QA and certificate control form.

If the control uncovers unclear elements, the Certification Manager will discuss this with the QA auditor. Together they will decide the actions to be taken in order to approve.

Administrative personnel sends it to the assessor per e-mail. The following documents and links are to be attached:

- The final QA report
- Certificate
- Feedback questionnaire
- Case studies template

Updates project card

Certification manager updates the assessment status in the certification data base.

Plans QA auditor corrective actions if needed

If the QA and certificate control identifies areas of the QA auditor's work that requires attention, the Certification Manager will in co-operation with the QA auditor discuss corrective actions. All corrective actions are recorded in "Forbedringslogg Grønn Byggallianse".