Professional Development Audit Process

Introduction to Professional Development Audits

Ongoing professional development is one of the foundational principles of the EnviroCert certification programs. EnviroCert International has established minimum professional development requirements for their registrants. These requirements are specified in each program’s Certification Procedures and Standards, Article II, Section 5. The goal of these requirements is to ensure that registrants are continually improving and updating their knowledge, skills, and abilities.

The purpose of this Professional Development Audit Process is to specify a methodology for monitoring registrant compliance with these professional development requirements and to provide feedback to the EnviroCert International Board of Directors regarding the efficacy of that methodology. This process is owned and administered by EnviroCert International, Inc. This assures that the audit process is consistent across all EnviroCert International certification programs.

Important Note!
This process contains provisions whereby an official complaint can be opened against unresponsive registrants or registrants who have not complied with program professional development requirements.

Overview of the Process

The PDH Audit Process begins with the development of a Schedule of Audits and the naming of an Audit Committee. The process ends with the collection of post-audit feedback from auditees. The audit process is comprised of the following five stages:

I. Schedule of Audits and Audit Committee
II. Selection of Auditees
III. Pre-Audit
IV. Audit

V. Post-Audit

Process Description

I. Schedule of Audits and Audit Committee
   A. Description
      This stage of the process is performed at least once each year and may be revised
      during the year. The Schedule of Audits (SA) is developed in this stage. The SA specifies
      the number of audits on an annual basis. It provides direction to the Administrative Office
      staff for performing audits. Additionally, members of the Audit Committee are identified
      during this stage. The function of the Audit Committee is to determine an audit's status
      when staff review cannot determine whether a registrant is in compliance with
      professional development requirements.
   B. Constraints
      1. The total number of registrants audited must be at least 1% of the eligible
         registry.
      2. The Schedule of Audits must be available by December 31st each year.
      3. Incoming Audit Committee members must be specified by December 31st each
         year.
   C. Inputs
      1. Certification Procedures & Standards, Article II, Section 5 (authority to perform
         audits).
      2. Accepted industry practice.
      3. Historical audit data (numbers of audits performed, # in compliance, etc.).
      4. Post-audit feedback gathered from previous auditees (from questionnaires in
         Stage 5).
D. Outputs

1. Schedule of Audits (used by CESSWI Administrative Office staff and the Audit Committee)

2. Membership of Audit Committee

E. Actions

1. The EviroCert International Executive Director collaborates with the Administrative Vice Chairs of each certification program under the leadership of the EnviroCert International Administrative Vice Chair to develop the SA.

2. The ECI Board of Directors specifies the members of the Audit Committee. The membership of Audit Committee should minimally include the Technical Vice Chairs from each certification program plus one at-large registrant from each program.

3. Incoming Audit Committee members are briefed by Executive Director on their duties and the handling of sensitive information. Note that Audit Committee meetings will generally be conducted by teleconference or other electronic means on an as-needed basis.

II. Selection of Auditees

A. Description

Specific registrants are selected to be audited for compliance with Professional Development requirements. Registrants should generally be selected on a random basis according to the Schedule of Audits. However, staff may submit a request in writing to the Audit Committee for specific registrants to be audited. Each such request must be accompanied with specific reasons for the request. The Audit Committee may approve or deny such requests.

B. Constraints
1. Registrants selected to be audited must have completed at least one entire PDH period.
2. Registrants will be audited for one complete PDH Period.
3. Registrants holding multiple certifications may be simultaneously audited for each certification that they hold.

C. Inputs

1. Certification Procedures and Standards, Article II, Section 5
2. Lists of eligible registrants (electronic format queried from database)
3. Approved selection criteria (see Constraints of this stage)
4. Schedule of Audits (number of audits)

D. Outputs

1. List of registrants to be audited
2. Requests by staff to audit specific registrants
3. Official responses from Audit Committee either granting or denying requests to audit specific registrants

E. Actions

1. Staff submits requests for specific registrants to be audited to the Audit Committee.
2. The Audit Committee determines the disposition of requests for specific registrants to be audited.
3. Using approved selection criteria, staff creates a list of auditees.
4. The EnviroCert International Executive Director monitors the process to ensure that audits are completed as specified in the Schedule of Audits.

III. Pre-Audit

A. Description

Auditees are officially notified that they are being audited. In cases of extenuating
circumstances (such as, extreme health issues or call to active military duty), auditees may request an extension of time to submit audit materials. Cases where auditees are not responsive will be referred to the Audit Committee for disposition.

B. Constraints
1. All audit notification letters must be mailed by May 30 of each calendar year.
2. Requests for an extension of time must be:
   a. Submitted in writing to the EnviroCert International Executive Director
   b. Postmarked within thirty (30) days of receipt of the audit notice
3. Registrants must submit their Professional Development documentation to the Administrative Office within sixty (60) days of receipt of the audit notice.

C. Inputs
1. List of registrants to be audited — from Stage 2
2. Schedule of Audits — from Stage 1
3. Certification Procedures and Standards, Article II, Section 4 (penalties for unresponsive registrants)
4. Complaint and Hearing Procedure

D. Outputs
1. Official audit-notification letter to auditees
2. Letters granting or denying requests for extension of time to send audit materials
3. Notices to the Audit Committee regarding unresponsive registrants
4. Official complaints against unresponsive registrants

E. Actions
1. Staff sends official audit-notification letters to auditees using a method that includes delivery confirmation. *(The EnviroCert International Executive Director will specify the exact method to be used.)* The letter must include a copy of the
appropriate sections of the Certification Procedures and Standards and a copy of this Process Description.

2. Administrative Office receives requested audit materials from registrants.

3. EnviroCert International Executive Director determines status of requests for extension of time to send audit materials.

4. Audit Committee determines action to take against unresponsive registrants. This may include opening an official complaint using the Complaint and Hearing Procedure.

IV. Audit

A. Description

Professional development materials received from auditees are audited for compliance with certification program requirements. If staff review shows that the registrant is in compliance with professional development requirements, an appropriate letter is sent to the registrant. If the staff review can not determine compliance status, audit materials are forwarded to the Audit Committee to determine the final status of the audit. If the Audit Committee finds that the registrant has not complied with Professional Development requirements, the Committee may open an official complaint against the registrant.

B. Constraints

1. The Audit Committee must close the status of any audit forwarded to them within 60 days of receipt of the audit materials.

2. All audits must be officially closed by December 31 of each calendar year.

C. Inputs

1. Professional development materials received from auditees

2. List of examples and non-examples of satisfactory evidence of professional development (what constitutes evidence - needs to be developed)

3. Certification Procedures and Standards, Article II, Section 5 (PDH Requirements)
4. Certification Procedures and Standards, Article II, Section 4, Item B, No. 2
   (submitting incorrect info to Admin Office - signing-off on PDH requirements on annual renewal notice)
5. Professional Development category list (PDH categories and limits)
6. Document Retention Policy (disposition audit materials)

D. Outputs
   1. Official audit-results letters to auditees
   2. Official complaints against registrants
   3. Notice of Audit Closure & an official notice from the Audit Committee that closes an audit that was sent to them

E. Actions
   1. Staff reviews audit materials for compliance with program requirements
   2. Staff sends audit materials to the Audit Committee — for cases when staff can not determine compliance status
   3. Staff sends audit-results letters to auditees
   4. Audit Committee submits official complaints against registrants found to be in non-compliance with professional development requirements
   5. Audit Committee issues Notice of Audit Closure to Administrative Office staff
   6. Staff files audit materials according to the Document Retention Policy

V. Post-Audit
   A. Description
      This stage begins when an official audit-results letter is issued by staff or when a Notice of Audit Closure is issued by the Audit Committee. Feedback is collected from auditees regarding their audit experience. All audit records are appropriately updated and filed.
   B. Constraints
1. For audits where staff review determines that the registrant has complied with Professional Development requirements, the questionnaire should be included with the audit-results letter.

2. For audits that are forwarded to the Audit Committee, the questionnaire should be mailed after the Notice of Audit Closure is received.

3. The post-audit questionnaire should include questions about the registrant's experience with the audit process and about PDH requirements.

C. Inputs
   1. Document Retention Policy (disposition of post-audit questionnaires)
   2. Official audit results letters
   3. Notice of Audit Closure (issued by Audit Committee to staff - in case of non-compliance)

D. Outputs
   1. Completed post-audit questionnaires
   2. Historical audit data

E. Actions
   1. Staff sends post-audit questionnaires to auditees.
   2. Administrative Office receives completed post-audit questionnaires from auditees
   3. Staff records post-audit questionnaire data
   4. Staff stores post-audit questionnaires according to the Document Retention Policy
   5. Staff updates official records to show the audit is complete