

GUIDE TO THE COMPLIANCE AUDIT PROGRAM FOR REGISTRANT FIRMS

VERSION 1.0
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**ENGINEERS &
GEOSCIENTISTS**
BRITISH COLUMBIA

PREFACE

This *Guide to the Compliance Audit Program for Registrant Firms* (referenced throughout this document as “this Guide”) provides the details of the Engineers and Geoscientists BC Compliance Audit Program for Registrant Firms (referenced throughout this document as “Firm Audit Program”), as defined in the Professional *Governance Act* (the “*Act*”) and the Engineers and Geoscientists BC Bylaws.

The Firm Audit Program is intended to be an educational and professional development process for the benefit of its Registrant Firms, as well as a proactive quality assurance check on their practices.

Under the *Act*, there are compliance audit programs for both individual Registrants and Registrant Firms. This Guide specifically describes the Firm Audit Program. For additional information about the Compliance Audit Program for Individual Registrants, please refer to the [*Guide to the Compliance Audit Program for Individual Registrants*](#).

The Firm Audit Program is intended to be fair, objective, instructive, and transparent to the Registrant Firm being audited.

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ABBREVIATIONS

ABBREVIATION	TERM
APRC	Audit and Practice Review Committee
BC	British Columbia
CAP	Corrective Action Plan
CAR	Corrective Action Request
IRCA	International Register of Certificated Auditors
OPI	Opportunity for Improvement
OQM	Organizational Quality Management
PPMP	Professional Practice Management Plan
PRR	Primary Responsible Registrant
RO	Responsible Officer
RR	Responsible Registrant

DEFINED TERMS

The following definitions are specific to this Guide. These words and terms are capitalized throughout the document.

TERM	DEFINITIONS
<i>Act</i>	<i>Professional Governance Act</i> [SBC 2018], c. 47.
Assessor	An individual appointed by the Audit and Practice Review Committee or its Officers to conduct compliance audits and/or practice reviews of Registrants; the title of compliance auditor is also used by Engineers and Geoscientists BC.
Bylaws	The Bylaws of Engineers and Geoscientists BC made under the <i>Act</i> .
Code of Ethics	The Code of Ethics of Engineers and Geoscientists BC set out in Schedule A of the Bylaws.
Corrective Action	Action taken to identify and eliminate root causes of non-conforming work to prevent the non-conformance from recurring.
Corrective Action Plan	A plan explaining how the Registrant Firm will remediate the root cause of non-conforming work and a required timeline to effectively implement the plan.
Document(s)	Includes any physical or electronic Record, including but not limited to a report, certificate, memo, specification, drawing, map, or plan, that conveys a design, direction, estimate, calculation, opinion, interpretation, observation, model, or simulation that relates to the Regulated Practice.
Engineers and Geoscientists BC	The Association of Professional Engineers and Geoscientists of the Province of British Columbia, also operating as Engineers and Geoscientists BC.
Firm	As defined in the <i>Act</i> , either: <ol style="list-style-type: none"> a) a government registrant; b) a legal entity or combination of legal entities that is engaged in a regulated practice, whether the practice occurs solely within the firm or in the provision of services to a person or entity outside the firm, unless the legal entity or combination of legal entities is exempted from this <i>Act</i> by regulation of the Lieutenant Governor in Council.
Guide	A Guide to a program or regulatory topic, published by Engineers and Geoscientists BC. These include Guides to quality management standards that in accordance with the <i>Act</i> and Bylaws define professional obligations related to specific processes and explain the minimum standards of practice, conduct and competence expected from Professional Registrants and Firms.
Major Non-Conformance	A situation in which, based on the evidence provided to the Assessor, <ol style="list-style-type: none"> a) there is systemic failure by a Registrant subject to a compliance audit to meet an applicable regulatory requirement(s), or b) there are reasonable and probable grounds to believe that a Registrant subject to a compliance audit may be engaged in the Regulated Practice in a manner that may pose a risk of significant harm to the environment or to the health or safety of the public or a group of people.
Minor Non-Conformance	A situation in which, based on the evidence provided to the Assessor, <ol style="list-style-type: none"> a) there has been a failure by a Registrant subject to a compliance audit to meet an applicable regulatory requirement(s), but such failure is not systemic, or

	b) there are no reasonable and probable grounds to believe that the Registrant subject to a compliance audit may be engaged in the Regulated Practice in a manner that may pose a risk of significant harm to the environment or to the health or safety of the public or a group of people.
Officer	An individual appointed by the Board of Engineers and Geoscientists BC, or by a committee authorized by the Board, to exercise certain powers or carry out certain functions.
Opportunity for Improvement	Suggested action proposed by an Assessor to a Registrant to improve the practice of the Registrant.
Permit to Practice	A certificate bearing a Permit to Practice number that is issued to a Registrant Firm by Engineers and Geoscientists BC and confirms that the Registrant Firm is entitled to engage in the Reserved Practice in British Columbia, subject to any suspensions, limitations, conditions, or restrictions on the Registrant Firm's registration.
Primary Responsible Registrant	When a Registrant Firm has more than one Responsible Registrant, the Primary Responsible Registrant is the individual acting as the main point of contact between the Registrant Firm and the Assessor(s).
Professional Practice Management Plan	A Document that is developed and maintained by a Registrant Firm and must meet the requirements set out in Section 7.7.3 of the Bylaws [<i>Professional Practice Management Plan</i>].
Professional Registrant	A Registrant who is registered in one of the following categories of Registrants: <ul style="list-style-type: none"> a) professional engineer; b) professional geoscientist; c) professional licensee engineering; d) professional licensee geoscience; e) life member prior to 1998; f) honorary life member.
Record (Document)	Any Document that is evidence of Regulated Practice activities, events or transactions, or is evidence that a Professional Registrant has met their professional and contractual obligations.
Registrant	As defined in Schedule 1, Section 5 of the <i>Act</i> , a Registrant means, as applicable: <ul style="list-style-type: none"> a) a professional engineer, b) a professional geoscientist, c) a firm that is registered with the regulatory body under this <i>Act</i>, if firms may be registered in respect of that regulatory body, or d) an individual or firm, as applicable, that is registered with the regulatory body as another category or subcategory of registrant in accordance with the bylaws of the regulatory body.
Registrant Firm	A Firm that is registered with Engineers and Geoscientists BC as a Registrant.
Regulated Practice	As defined in Schedule 1, Section 5 of the <i>Act</i> and prescribed by the <i>Engineers and Geoscientists BC Regulation</i> B.C. Reg. 14/2021: <ul style="list-style-type: none"> a) the practice of professional engineering, or b) the practice of professional geoscience.
Regulation	The <i>Engineers and Geoscientists Regulation</i> , BC Reg 14/2021.
Reserved Practice	Means the same as prescribed by the Regulation.
Responsible Officer	An individual who has been designated by a Registrant Firm pursuant to Section 5.12(13) of the Bylaws [<i>Registrant Firm</i>], must meet the criteria set out in Sections 5.12(14), (15), (16) and (17) of the Bylaws [<i>Registrant Firm</i>], and has the responsibilities set out in Section 5.12(18) of the Bylaws [<i>Registrant Firm</i>].

Responsible Registrant	A Professional Registrant who has been designated by a Registrant Firm pursuant to Section 5.12(5) of the Bylaws [<i>Registrant Firm</i>], must meet the criteria set out in Sections 5.12(7) and (8) of the Bylaws [<i>Registrant Firm</i>], and has the responsibilities set out in Section 5.12(9) of the Bylaws [<i>Registrant Firm</i>].
Trainee	As defined in Section 1(1) of the <i>Act</i> , a Trainee means in respect of a Regulated Practice, means a person in training to engage in the Regulated Practice as a Registrant.

VERSION HISTORY

VERSION NUMBER	PUBLISHED DATE	DESCRIPTION OF CHANGES
1.0	August 26, 2024	Initial version.

1.0 INTRODUCTION

The *Act* authorizes Engineers and Geoscientists BC to establish an audit program to conduct random assessments of the conduct and competence of Registrants.

The purpose of the Firm Audit Program is to assess the overall compliance of Registrants with the regulatory requirements of the *Act*, Regulation, Bylaws, and standards of Engineers and Geoscientists BC, as well as those imposed by other relevant laws, codes, and standards. The process is also intended to educate Registrants on their regulatory requirements; it is intended to be a constructive process for those who undergo a compliance audit. Finally, the program is aimed to be a proactive way to help improve Engineers and Geoscientists BC's regulatory operations by identifying professional practice trends among Registrant Firms. This allows Engineers and Geoscientists BC to develop new resources and modify existing programs to address those trends which may impact the safety, health, and welfare of the public and the protection of the environment.

This Guide provides the details of the Firm Audit Program including how a compliance audit is initiated, what a Registrant Firm can expect from the process, and what decisions can be made by the Audit and Practice Review Committee (APRC) at the conclusion of a compliance audit.

Engineers and Geoscientists BC conducts compliance audits on the practices of both individuals and firms; the compliance audit program for individual Registrants is described in the [*Guide to the Compliance Audit Program for Individual Registrants*](#).

The compliance audit process is confidential, except in narrow circumstances where the Assessor or the APRC is required by superseding legal and ethical duties to report dangerous or illegal practice to another body, including Engineers and Geoscientists BC's Investigation Committee. These superseding duties include those described in Sections 58, 109 and 110 of the *Act*, Sections 8.2(4) and (5) of the Bylaws, and principle 9 of the Code of Ethics.

Except where obligated to do so in accordance with legal or ethical duties, Engineers and Geoscientists BC keeps all Records, information, and self-assessments collected from Registrants during compliance audits confidential.

1.1 PURPOSE OF THIS GUIDE

This Guide explains the Firm Audit Program and the process for carrying out a compliance audit. The objectives of this Guide are to explain:

- who the program applies to;
- initiation of a compliance audit;
- the process; and
- findings following a compliance audit and, if applicable, any additional reviews or investigations requested by the APRC.

1.2 BACKGROUND

Engineering and geoscience organizations have long been regulated across Canada. With the introduction of the *Act*, Engineers and Geoscientist BC now regulates Firms in addition to individual Registrants. Prior to the *Act*, the

Organizational Quality Management (OQM) Program was a voluntary program promoting quality management in engineering and geoscience organizations. When the OQM Program was discontinued, it had successfully certified more than 400 organizations since 2012.

The OQM Program helped to establish a culture of high standards in the engineering and geoscience industries and has enhanced public protection through greater accountability and reduced risk. Engineers and Geoscientists BC's current regulatory model for Firms is based on the OQM Program.

Engineers and Geoscientists BC has spent several years, guided by an advisory task force and working closely with Registrants, to develop a regulatory model that improves regulatory oversight, protects the public interest, and provides opportunities to Firms to improve their processes and reduce their risk. The regulatory model for Firms is based on three pillars: ethics, quality management, and continuing education. The requirements for the quality management pillar are similar to the requirements for OQM certification.

The regulatory model for Firms includes Firms in the private and public sectors that engage in the practice of professional engineering or geoscience, including Firms that only provide these services internally. The regulatory model for Firms includes sole practitioners as Firms, regardless of whether those sole practitioners are incorporated or unincorporated.

The Firm Audit Program is a new program under the *Act* and is distinct from the Practice Review Program. While the Firm Audit Program conducts a proactive, quality assurance approach with broad reviews of a Firm's practice, the Practice Review Program is reactive and deals with circumstances where there is reason to believe that the practice of a Registrant Firm or Professional Registrant does not meet required standards.

2.0 APPLICABILITY

2.1 WHO CAN BE AUDITED

All Registrant Firms, including sole practitioners who engage in Regulated Practice, are eligible for mandatory compliance audits once they have held a Permit to Practice for at least 12 months. Engineers and Geoscientists BC is committed to conducting an initial compliance audit for all Registrant Firms within the first five years following the launch of the Firm Audit Program. Following this, routine compliance audits will be systematically scheduled, guided by a risk assessment process that considers the findings from each Registrant Firm's initial compliance audit.

Many Registrant Firms have offices and projects in multiple jurisdictions, including outside of Canada. For multi-jurisdictional Registrant Firms, the main focuses of the compliance audit will be practice in British Columbia (BC) and practice by Engineers and Geoscientists BC Registrants, although other aspects of the Registrant Firms' operations may be examined.

The Firm Audit Program is independent from the Compliance Audit Program for Individual Registrants.

2.2 WHAT CAN BE AUDITED

The objective of a compliance audit is to verify that Registrant Firms have adequate documented policies and procedures in place to fulfill their professional responsibilities and to demonstrate the Registrant Firm's compliance with the provisions in the *Act*, Bylaws, and Code of Ethics. To verify compliance with the requirements, the

Assessor will review relevant Documents, including the Registrant Firm's Professional Practice Management Plan (PPMP), and conduct interviews with key staff to collect information about the applicable Regulated Practice(s). For more information on the process for submitting Documents, please see Section [3.3.2.5](#).

The Documents, Records, and interviews will provide the Assessor(s) with essential information about the Registrant Firm's policies and processes; however, Engineers and Geoscientists BC recognizes that there are limitations to the amount of information that an Assessor is able to collect during a compliance audit. Therefore, the compliance audit methodology has been developed with the following tools:

- data sampling;
- risk-based approach; and
- evidence-based approach.

2.2.1 DATA SAMPLING

Due to limitations on time and resources, compliance audits can only review a sample of a Registrant Firm's work. Data sampling is the process of selecting less than 100% of the items from the data set to evaluate evidence about a characteristic of the data set and to form a conclusion. Due to the limited number of compliance audit days available, data sampling will generally apply to all compliance audits.

2.2.2 RISK-BASED APPROACH

Assessors will use a risk-based approach, placing greater importance on matters that are more significant to Engineers and Geoscientists BC's

duty to protect the public interest with respect to professional practice and to the Registrant Firm's practice. For example, priority will be given to reviewing projects with larger scopes or more severe consequences of failure.

2.2.3 EVIDENCE-BASED APPROACH

During a compliance audit, a Registrant Firm will be required to submit their PPMP as well as any other relevant Documents that are part of their policies and procedures. As the compliance audit requires evidence to be presented in order for the Assessor to draw a conclusion, all decisions and recommendations will be based on the information submitted, shown, or discussed during the compliance audit.

2.3 AUDIT AND PRACTICE REVIEW COMMITTEE CRITERIA FOR FIRM SELECTION

The APRC began compliance audits of Registrant Firms in October 2022. The first compliance audit of each Registrant Firm is called an initial compliance audit, and once completed, a Registrant Firm will then be eligible for routine compliance audits.

The APRC's compliance audit selection criteria are based on the following objectives:

- a) Efficient use of resources – Engineers and Geoscientists BC is not able to audit every Registrant Firm in the first year of the Firm Audit Program being implemented.
- b) Risk-based selection—Engineers and Geoscientists BC considers data from complaints, investigations, practice advice, and other regulatory programs to identify risk factors for the entire population of Firms. The selection process is anonymized and mostly random, although Firms

matching at least one risk factor have an increased likelihood of selection.

- c) Legislative transition—prior to the introduction of the *Act*, Engineers and Geoscientists BC had the voluntary QQM Program, which has now been discontinued. Firms previously in the QQM Program audit cycle will continue.

Registrant Firms will be periodically selected for initial compliance audits using risk-based criteria and a random selection process. The selection is done in batches, with the size of each batch being based on available resources. Each batch of Registrant Firms selected should comprise approximately:

- a) 40% from industries most heavily represented in the investigation and practice advice data, which include: structural, geotechnical, sewerage, mechanical/HVAC, fire protection, electrical and civil engineering, equipment safety, manufacturing, natural resources, and building sciences; and
- b) 60% from industries and areas of practice that are not accounted for in paragraph (a).

It is not currently known whether Firm size (sole practitioners, small Firms, medium Firms, large Firms, and very large Firms) has any correlation with risk. Until better data is available, Engineers and Geoscientists BC will attempt to audit Registrant Firms in approximate proportion to the size distribution of the entire Registrant Firm population. Engineers and Geoscientists BC may make occasional additional random selections of Registrant Firms to more closely match the size distribution in the entire population.

As the program matures and more data is available, Engineers and Geoscientists BC will revisit the methodology for Registrant Firm

selection and optimize the Firm Audit Program to better serve its mandate to hold paramount the safety, health, and welfare of the public, including protection of the environment and health and safety in the workplace. Feedback on the Firm Audit Program is valuable. To facilitate this process, Engineers and Geoscientists BC will provide a Compliance Audit Feedback Form to Registrant Firms that have undergone a compliance audit. This will allow Registrant Firms to share their experiences of the audit process. A sample of this form can be found in [APPENDICES A](#) of this Guide.

2.4 AUDIT INTERRUPTION

A key value of the Firm Audit Program is establishing public confidence and trust through impartial and competent assessments. Therefore, deferral and postponement requests must be processed in an impartial manner.

2.4.1 DEFERRALS

Engineers and Geoscientists BC will notify Registrant Firms in writing, via email, when they are selected to undergo a compliance audit. A Registrant Firm can request a deferral of the compliance audit in writing. Such a request must include the reasons for the deferral request, the anticipated length of the requested deferral, and may include other information that supports the request for a deferral. The APRC may request additional information or records to support the request.

A deferral granted by the Engineers and Geoscientists BC audits manager has a maximum duration of six months. Deferrals requiring additional time beyond the six months are referred to the APRC for decision. The APRC deferral has a maximum duration of one year but can be renewed by submitting an additional deferral request that sets out the reasons for the

request and the anticipated length of the renewed deferral.

2.4.2 POSTPONEMENT

Occasionally, a Registrant Firm may have to postpone a scheduled compliance audit for good faith reasons. If possible, the Registrant Firm should request the postponement in writing to the Assessor as early as possible and preferably at least one week prior to the date of the scheduled compliance audit. This written request must include the reasons for the postponement and the anticipated length of the postponement.

If the assigned Assessor needs to postpone a scheduled compliance audit for good faith reasons, the audit manager will attempt to assign another Assessor to carry out the compliance audit as scheduled. If no substitute Assessor is available, the Registrant Firm will be notified as early as possible and preferably at least one week prior to the date.

In rare cases, true emergencies may require the postponement of a compliance audit with less than one week of notice to the Assessor or to the Registrant Firm. In such circumstances, the notification should be communicated as soon as practicable. Once the emergency has passed, alternate compliance audit dates are to be suggested by the postponing party. If the Primary Responsible Registrant (PRR) fails to contact the Assessor to reschedule the compliance audit, this will be brought to the audit manager's attention.

If the reason for the postponement request appears to be made in good faith and is not unduly disruptive to Engineers and Geoscientists BC operations, Engineers and Geoscientists BC will attempt to accommodate the postponement request.

2.4.3 EXTENSIONS

Once a compliance audit is in progress, there could be situations in which the Registrant Firm may need more time and/or has a reasonable explanation for why they cannot meet the stated

time-period for submitting the Documents or Records. In this case, the PRR can request an extension in writing via email. Extension requests will be reviewed by the Assessor, and, if applicable, by the audit manager, to determine the eligibility for an extension. The PRR will be notified if the extension has been approved or denied in a timely manner.

Examples of possible reasoning for requesting an extension can include:

- personal circumstance (medical issues, bereavement, travel, care for a dependent);
- operational circumstances (office relocation, technological issues, etc.); or
- other extenuating circumstances.

2.4.4 CONDUCT

Initial and routine compliance audits can be terminated at the sole discretion of the

Assessor(s) if there are concerns surrounding:

- personal safety;
- uncooperative or unavailable Registrant Firms or Professional Registrants;
- unavailability of evidence to be sampled;
- the Assessor has reason to believe there is an immediate danger to the public; the environment, or a specific group of people, or
- a Registrant Firm or individual Registrant has made decisions or engaged in practices that may be illegal or unethical.

In this instance, the Assessor will notify the Responsible Registrant (RR) and/or any interviewees that the process needs to be stopped. Depending on the nature of the concern, the Assessor has an obligation to report any unsafe conditions to the audit manager and, if applicable, other relevant authorities.

3.0 COMPLIANCE AUDIT REQUIREMENTS

3.1 CONFIDENTIALITY

Records and information provided to the APRC or to an Assessor during a compliance audit are confidential, per Sections 109 and 110 of the *Act*. In most cases, such Records and information are protected from disclosure to anyone other than the APRC and Engineers and Geoscientists BC’s audit staff.

Despite this general protection, Section 110(3) of the *Act* requires the APRC to disclose Records and information:

1. to the appropriate parties to show that a person knowingly gave false information to the APRC; or
2. to an appropriate authority for the purpose of reporting a risk of significant harm to the environment or to the health or safety of the public or a group of people.

Principle 9 of the Code of Ethics also requires Registrants (including Assessors, Officers, Engineers and Geoscientists BC staff, and members of the APRC who are Registrants) to report to Engineers and Geoscientists BC and, if applicable, any appropriate authority, if the Registrant, on reasonable and probable grounds, believes that:

- a) the continued practice of a Regulated Practice by another Registrant or other person, including Firms and employers, might pose a risk of significant harm to the environment or to the health or

safety of the public or a group of people; or

- b) a Registrant or another individual has made decisions or engaged in practices which may be illegal or unethical.

As per Section 110(4) of the *Act*, where the APRC has reasonable grounds to believe that a Registrant’s conduct constitutes either:

1. professional misconduct;
2. conduct unbecoming a Registrant; or
3. incompetent performance of duties undertaken while engaged in the Regulated Practice,

then the APRC must—if it considers the action necessary to protect the public interest—notify the Investigation Committee, who will treat the matter as if it were a complaint.

Engineers and Geoscientists BC may also be required to disclose Records associated with a compliance audit to the Information and Privacy Commissioner of British Columbia, pursuant to Section 110(7) of the *Act*.

The aforementioned are examples, and do not constitute an exhaustive list of circumstances in which the confidentiality requirements at Sections 109 and 110 of the *Act* are superseded. There may be other circumstances in which Engineers and Geoscientists BC is required to disclose material related to or collected during a compliance audit.

Under no circumstances will the Assessor(s) enter into a non-disclosure agreement with an

auditee. There are legal and ethical obligations which may require the Assessor(s) to breach the confidentiality of the compliance audit process.

3.2 ROLES AND RESPONSIBILITIES

3.2.1 REGULATORY BODY

3.2.1.1 Engineers and Geoscientists BC Board

Through the Bylaws, the Engineers and Geoscientists BC Board has authorized the APRC to administer the Firm Audit Program. The APRC's responsibilities include setting the annual random selection criteria and the adjudication of compliance audit files.

3.2.1.2 Assessors

Assessors are appointed by the APRC or its Officers prior to carrying out compliance audits. Assessors for Firm compliance audits are Professional Registrants with, or eligible to be registered with, Engineers and Geoscientists of BC, who have been trained to conduct compliance audits. In addition to being Professional Registrants, Assessors are required to obtain certification through the International Register of Certificated Auditors (IRCA) at one of the following IRCA grades: Associate Auditor, Auditor, or Lead Auditor.

3.2.2 REGISTRANT FIRM

3.2.2.1 Responsible Registrant

A RR is a Professional Registrant who has been appointed by the Registrant Firm pursuant to Section 5.12(5) of the Bylaws. An RR must meet the criteria set out in Sections 5.12(7) and (8) of the Bylaws. Additionally, an RR must undertake the responsibilities set out in Section 5.12(9) of the Bylaws. A Registrant Firm may have more than one RR. For administrative purposes, one

RR will be designated as the PRR. The PRR will act as the main point of contact between the Registrant Firm and the Assessor. The PRR is responsible for submitting Documents required for the compliance audit and for facilitating audit logistics.

3.2.2.2 Responsible Officer

A Responsible Officer (RO) is an individual who has been designated by the Registrant Firm pursuant to Section 5.12(13) of the Bylaws, and who must meet the criteria set out in Sections 5.12(14), (15), (16) and (17) of the Bylaws, and has the responsibilities set out in Section 5.12(18) of the Bylaws. Unlike the RR, the RO does not need to be a Professional Registrant, however, the RO must be able to make binding decisions on behalf of the Registrant Firm.

3.2.2.3 Registrants

Professional Registrants and Trainees are expected to cooperate during compliance audits and interviews, and they must be listed on the Registrant Firm's roster.

3.3 COMPLIANCE AUDIT PROCESS

3.3.1 PROCESS SUMMARY

The compliance audit process is described by the following stages:

1. Initiation
2. Document review
3. Audit day
4. Compliance audit report
5. Post compliance audit activities

Each stage of the compliance audit process will be described in more detail in Sections [3.3.2](#) to [3.3.6](#). Once the initial compliance audit is closed, a Registrant Firm is eligible for routine compliance audits. Routine compliance audits are similar to the initial compliance audit, with

the addition of Registrant Firm projects being reviewed.

3.3.2 INITIATION

3.3.2.1 Compliance Audit Selection Timing

Registrant Firms are eligible for a compliance audit after they have had a Permit to Practice for 12 months. The selection process and criteria are outlined above in Sections [2.2](#) to [2.4](#).

3.3.2.2 Assessor Assignment

The audit manager, as directed by the APRC, will assign an Assessor to each compliance audit. The Assessor is then required to complete a conflict-of-interest declaration. If the Assessor identifies a conflict-of-interest, an alternate Assessor may be assigned by the audit manager. The audit manager will conduct a thorough and impartial review of the potential conflict-of-interest. If the reasons listed in the declaration are deemed to be real and mitigation is improbable, the audit manager will assign a new Assessor for the compliance audit. If mitigation for the reasons listed in the declaration is possible, the audit manager may elect to continue the compliance audit with appropriate mitigation.

3.3.2.3 Notification

The PRR will be notified via email that a compliance audit is being initiated. The email will contain information about the compliance audit including:

1. the name of the Assessor;
2. a link to the conflict-of-interest declaration;
3. a timeline for uploading Documents to the Registrant Firm's audit portal;
4. an explanation of the process; and
5. instructions on accessing the Registrant Firm's online audit portal.

The PRR is required to complete the conflict-of-interest declaration to identify any real or

potential conflict with the assigned Assessor. If a conflict-of-interest is identified, the audit manager will follow the same process as identified in Section [3.3.2.2](#) of this Guide.

3.3.2.4 Preparing for Audits

In preparation for the compliance audit, Registrants should reference the following resources available on the Engineers and Geoscientists BC website:

1. [Preparing for Your Compliance Audit](#) free webinar;
2. [Regulation of Firms Permit to Practice Manual](#); and
3. [Quality Management Guides](#).

Registrants should also review the list of published [Professional Practice Guidelines and Advisories](#) to ensure they are familiar with and meet the intent of any publications that are relevant to their area of practice.

3.3.2.5 Submission of the Initial Compliance Audit Questionnaire and Documents

The PRR must complete the compliance audit questionnaire and upload it through the Registrant Firm's audit portal, along with the PPMP and all other relevant Documents. To ensure that the Assessor(s) has all the required information, it is advised that the compliance audit questionnaire be completed with as much detail as possible.

The Registrant Firm's PPMP is the most critical Document submitted, as it outlines the policies and procedures that the Registrant Firm follows. Regardless of how the information is presented, the overarching requirements for all Registrant Firms are dictated by the following:

- The *Act*;
- The Regulation;
- Engineers and Geoscientists BC Bylaws, including but not limited to sections:

- 7.3 - Standards of Competence – Quality Management Requirements;
- 7.3.1 – Standard for Use of Professional Practice Guidelines;
- 7.3.2 – Standard for Retention and Preservation of Complete Project Documentation;
- 7.3.3 – Standard for Field Reviews;
- 7.3.4 – Standard for Checks;
- 7.3.5 – Standard for Independent Review(s) of Structural Designs;
- 7.3.6 – Standard for Independent Review(s) of High-Risk Professional Activities or Work;
- 7.3.7 – Standard for Issuance of Manual Seal, Authenticating Documents, and Use of Permit to Practice Number; and
- 7.3.8 – Standard for Delegation and Direct Supervision;
- Section 7.6 – Continuing Education Program; and
- Schedule A – Code of Ethics.

Failure to upload the required Documents within the stated time-period (unless a reasonable explanation or deferral request is submitted in advance) may result in suspension, cancellation, or a referral to the APRC.

3.3.2.6 Routine Compliance Audits Additional Documents

In addition to the Documents requested in Section 3.3.2.5 of this Guide, Registrant Firms are required to submit a list of projects that have been carried out since their Permit to Practice was obtained. The notification email will explain how the Documents and BC project list submission should be done and what information is needed for each project.

3.3.3 DOCUMENT REVIEW

Once the conflict-of-interest form is completed by the PRR and all the required Documents are uploaded to the Registrant Firm’s audit portal, the Document

review will take place. The Assessor may follow-up directly with the PRR to request additional information and/or to question any information that is unclear or missing.

The following criteria will be used to verify compliance by the Assessor:

- the declared industries and areas of practice;
- the accuracy of the roster;
- the accuracy of the designated RR and RO;
- the *Act*;
- the Bylaws of Engineers and Geoscientists BC;
- ethical standards;
- standards of competence and quality management requirements; and
- continuing education requirements.

It is the Assessor’s responsibility to thoroughly review all the Documents provided by the Registrant Firm and to verify information through the interview with the PRR.

Once the Assessor has completed the Document review, an interview with the RR(s) will be scheduled to resolve any outstanding issues or discrepancies with the information. This will provide the Assessor with the opportunity to gather additional evidence of the Registrant Firm’s compliance with the applicable requirements.

3.3.4 AUDIT DAY

The audit day starts with an opening meeting where the audit plan and details are presented by the Assessor. This is followed by an interview with the RR(s) to ensure there is clear understanding of the audit’s scope and objectives, and to promote open communication between the Assessor and the RR(s). The audit day concludes with a closing meeting where the audit findings are shared with the RR(s). It is not uncommon for personnel other than the RR(s) to attend an opening meeting; the PRR can invite other staff as applicable.

3.3.4.1 Opening Meeting

Before an Assessor begins interviewing the RR(s), they will give a brief presentation, also known as an opening meeting. The opening meeting will provide those in attendance with an introduction to the compliance audit process, the regulatory framework on which it is based, and what to expect from the compliance audit report.

3.3.4.2 Preparation for Interview(s) During Initial Compliance Audits

The Assessor will contact the PRR to arrange a time for the interview; if the Registrant Firm has more than one RR, the Assessor will schedule an interview for each RR. An interview will typically occur virtually as a videoconference, unless otherwise discussed with and agreed to by the Assessor.

Prior to the interview, the Assessor may request additional Documents to help resolve any outstanding issues from the Document review. The PRR must provide all requested materials within the timeframe outlined by the Assessor.

3.3.4.3 Interview(s) During Initial Compliance Audits

An interview is an open and respectful conversation between the Assessor and the RR(s). During the interview with the RR(s), the Registrant Firm's PPMP and any other provided Documents will be discussed in conjunction with any issues observed by the Assessor(s) during the Document review. RRs being interviewed must cooperate with and facilitate the compliance audit process, ensuring that they provide all necessary, relevant, and required information to the Assessor. Since most of the interviews are done in the form of videoconference, it is not uncommon for Assessors to ask the RR(s) to share their screen in order to provide examples of how they conduct professional work for the Registrant Firm.

The priorities for the Assessor when interviewing the RR(s) include but are not limited to:

- verifying that supplied information is complete, accurate, and up to date;
- confirming that policies and procedures comply with the *Act*, Regulation, Bylaws, and required standards of Engineers and Geoscientists BC;
- verifying that all policies and procedures are being implemented by the Registrant Firm;
- confirming compliance with ethical standards of Engineers and Geoscientists BC, including the Code of Ethics;
- verifying that there are policies and procedures in place for all the standards of competence listed in section 7.3 of the Bylaws;
- confirming compliance with the Continuing Education Program; and
- answer any questions raised by the RR(s).

3.3.4.4 Preparation for Interviews During Routine Compliance Audits

Engineers and Geoscientists BC's information database will generate a randomly selected list of 20 percent of the Professional Registrants from the Registrant Firm's roster.

The Assessor will contact the PRR to arrange interview(s) with the randomly selected Professional Registrant(s). It is the responsibility of the PRR to ensure all the Professional Registrant(s) selected have access to relevant Documents and project files.

Since routine compliance audits often require in-person interactions, additional items may be needed, such as:

- safety or orientation requirements for entry to the Registrant Firm's facilities;
- arrangements for transportation within the Registrant Firm's facilities (if required); or
- detailed schedules in the event of a multi-day compliance audit.

The Assessor is responsible for communicating any technology or logistical requirements to the PRR, and the PRR is responsible for ensuring these requirements are met.

3.3.4.5 Interview(s) During Routine Compliance Audits

Similar to the interviews conducted during initial compliance audits, interviews during routine compliance audits will also seek to confirm that the information in the PPMP and any other Documents provided are accurate. Prior to the interviews starting, the PRR will be asked to submit a list of projects that have been carried out since the Registrant Firm's Permit to Practice was issued. Assessors will select some of those projects to focus on during interviews. The PRR must be prepared and have the Documents readily available and retrievable for the requested projects. The PRR and/or any other critical staff being interviewed must cooperate with and facilitate the compliance audit process, including by ensuring that they provide all necessary, relevant, and required information to the Assessor.

3.3.4.6 Closing Meeting

The purpose of the closing meeting is to provide a preliminary synopsis of the findings that will be contained in the compliance audit report. A closing meeting is optional for the initial compliance audit, however, mandatory for the routine compliance audit.

The closing meeting is held once all interviews are complete. During the meeting, the Assessor will provide a brief presentation summarizing the compliance audit findings. As with the opening meeting, the PRR can invite other staff.

The final compliance audit report is generally issued within 10 business days of the closing meeting, although the timeline will vary depending on the size of the Registrant Firm and the number of interviews conducted.

3.3.5 COMPLIANCE AUDIT REPORT

3.3.5.1 Completion of Compliance Audit Report by the Assessor

After the Document review and interviews are completed, the Assessor will develop a

comprehensive compliance audit report detailing their findings. The PRR will be notified by email when the compliance audit report has been issued. After reviewing the compliance audit report, the PRR is required to acknowledge receipt of the compliance audit report through the Registrant Firm's audit portal.

3.3.5.2 Outcomes of the Compliance Audit

The compliance audit report will summarize the activities of the compliance audit. If the compliance audit report contains no audit findings or only identifies Opportunities for Improvement (OFIs), the Registrant Firm is considered to be in full compliance. The APRC and the Registrant Firm will receive a copy of the Assessor's compliance audit report, and the Assessor will close the compliance audit file.

If the Assessor's compliance audit report contains audit findings, the Registrant Firm is considered to be in non-compliance. The compliance audit report would include at least one Major Non-Conformance(s) or Minor Non-Conformance(s).

Each type of audit finding is summarized and described in more detail in Table 1 below.

1. **Major Non-Conformance(s):** This is a failure to meet an applicable regulatory requirement(s) on a systemic scale, and/or a finding for which the Assessor has reason to believe there is a significant risk of harm to the environment or to the health and safety of the public or a group of people. If a Major Non-Conformance is identified, the Assessor is required to send a copy of the report to the ARPC.
2. **Minor Non-Conformance:** This is a failure to meet an applicable regulatory requirement(s) which is not systemic, and for which the Assessor does not have reason to believe there is a significant risk of harm to the environment or to the health and safety of the public or a group of people.

3. **OFI(s):** This is an observation that can help improve professional practice, processes for the Registrant Firm, and mitigate risk(s). OFIs are extremely useful and seen as value added to Registrant Firms. OFIs are typically written when:

- there is not enough evidence to support a conclusion that a requirement has not been met;

- a process can be done more effectively or efficiently, and the Assessor wishes to share best practices; or
- there is an opportunity to mitigate risk that may result in future non-conformance.

The next section will provide more details about the actions required from the Registrant Firm in response to findings from a compliance audit.

Table 1 - Outcomes of the Compliance Audit

OUTCOMES OF THE COMPLIANCE AUDIT	SUMMARY
In Compliance	Compliance audit report contains no audit findings or only identifies an OFI(s).
Non-Compliance	Compliance audit report contains audit findings.
TYPES OF COMPLIANCE AUDIT FINDINGS	
Major Non-Conformance	A systemic failure to meet an applicable regulatory requirement(s), and/or a finding that presents significant risk of harm to the environment or the public. A Major Non-Conformance requires that the compliance audit report be sent to the APRC.
Minor Non-Conformance	A failure to meet an applicable regulatory requirement(s), which is not present in a systemic scale nor does its present significant risk of harm to the environment or the public. A Minor Non-Conformance requires the Registrant Firm to submit a CAP(s) to the Assessor within 30 days of receiving the compliance audit report.
Opportunity for Improvement (OFI)	An observation(s) that can help improve professional practice, processes for the Registrant Firm, and mitigate potential future risk(s). The Registrant Firm is required to acknowledge OFIs in the Registrant Firm's audit portal.

3.3.6 POST COMPLIANCE AUDIT ACTIVITIES

This section describes the activities that follow the submission of the compliance audit report, and what actions are required for Engineers and Geoscientists BC to formally close a compliance audit. As stated earlier in this Guide, there are three different types of audit findings and, depending on the type of finding, the Registrant Firm will be required to take action in order to remain in compliance with established requirements. In broad strokes, Major Non-

Conformances and Minor Non-Conformances require a response.

3.3.6.1 Corrective Action Requests

When a finding is classified as a Minor Non-Conformance, this finding must be corrected prior to closing the compliance audit file. The Assessor will address these non-conformances in the compliance audit report through a Corrective Action request (CAR); this is a request from the Assessor to the Registrant Firm to rectify a situation. Each CAR will summarize the Assessor's finding and list the regulatory requirement(s) that have not been met.

The Registrant Firm is then required to respond to the CAR with a Corrective Action Plan (CAP). A CAP explains how the Registrant Firm will remediate the issue(s) and the timeline needed for this change to be effectively implemented. The submission of a CAP is done through the Registrant Firm’s audit portal. Once submitted, the Assessor will review the CAP(s) and can take one of the following actions:

1. Request more information in order to understand and/or address any deficiencies prior to accepting or rejecting the proposed CAP.
2. Approve the CAP(s); if applicable, the Assessor will request evidence of the CAP implementation, when all evidence is provided and the Assessor deems satisfactory implementation, each CAR will be closed.
3. Reject the CAP(s); the Assessor will then follow-up with the PRR.
4. If a CAP is not submitted in the specified timeline, and if the Registrant Firm is not responding to follow-up attempts, the Assessor can refer the compliance audit report file to the APRC for their review.

For a Minor Non-Conformance, the Registrant Firm has 30 days to submit their CAP(s) to the Assessor. However, if the finding is a Major Non-Conformance, there are additional considerations, see Section [3.3.6.2](#).

3.3.6.2 Adjudication by the Audit and Practice Review Committee

When a compliance audit finding is classified as a Major Non-Conformance, the compliance audit report is forwarded to the APRC for review. Prior to sending the report to the APRC, the Assessor will first send the compliance audit report to the Registrant Firm and provide an opportunity for it to send a response or comment based on the report. Next, the audit manager will send both the compliance audit report and the Registrant Firm’s comments to the APRC. The APRC will review the information and make one of the following decisions:

1. Prescribe Corrective Action(s) to the Registrant Firm to be completed in a specified time period.
2. Authorize a practice review.
3. Disclose Records or Documents to the Investigation Committee pursuant to Section 110(3) of the *Act* or notify the Investigation Committee, pursuant to Section 110(4) of the *Act*.
4. Close the compliance audit file.

Written confirmation of the APRC’s decision, along with the compliance audit report, will be sent to the Registrant Firm.

If the APRC prescribes Corrective Action(s) and the Registrant Firm completes the Corrective Action(s) within the specified time-period, the APRC will close the compliance audit file and notify the Registrant Firm in writing.

In addition to the above, the Assessor may recommend the initiation of a practice review of the Registrant Firm on the basis of any information obtained or assessments made during the compliance audit to the APRC.

3.3.6.3 Closing the Compliance Audit File

The compliance audit file, and therefore the compliance audit cycle, can only be closed when all CAP(s) have been submitted and accepted by the Assessor, and all OFIs have been acknowledged by the Registrant Firm within the audit portal. The only other route for closing a compliance audit file is if this is decided by the APRC during their own review. The compliance audit process is summarized below in Table 2.

3.4 RETENTION OF COMPLIANCE AUDIT FILES

Compliance audit files retained by Engineers and Geoscientists BC are confidential. Files submitted by the Registrant Firm for the purpose of the initial or routine compliance audits—including all responses to

Assessor reports—are kept indefinitely and securely in the Engineers and Geoscientists BC Document storage systems. Once the compliance audit is closed, all handwritten notes must be uploaded to the SharePoint server and destroyed along with any physical working copies as per Engineers and Geoscientists BC’s post-audit Document destruction procedures.

Compliance audit enquiries under the *Freedom of Information and Protection of Privacy Act* should be directed to Engineers and Geoscientists BC’s Privacy Analyst by email at privacy@egbc.ca.

Table 2 - Compliance Audit Process Steps

COMPLIANCE AUDIT PROCESS STEPS	SUMMARY
<u>Step One:</u> Initiation	<p>The Registrant Firm is:</p> <ul style="list-style-type: none"> • selected for a compliance audit; • assigned an Assessor; • emailed information about the compliance audit; and • required to complete a conflict-of-interest declaration, upload the completed questionnaire, the PPMP, and any additional relevant Documents.
<u>Step Two:</u> Document Review (and Project Review)	<ul style="list-style-type: none"> • The Assessor performs a review of the questionnaire and Documents. • For routine compliance audits, the Registrant Firm is also required to submit a list of projects.
<u>Step Three:</u> Audit Day	<ul style="list-style-type: none"> • An opening meeting is conducted to introduce the participants to the compliance audit process. • The Assessor conducts interviews with the PRR and/or other critical personnel. • A closing meeting is carried out to summarize the compliance audit findings.
<u>Step Four:</u> Completion of Compliance Audit Report by the Assessor	<ul style="list-style-type: none"> • The Assessor develops a comprehensive compliance audit report detailing the compliance audit findings. • The compliance audit findings are classified by the Assessor into Major Non-Conformances, Minor Non-Conformances, and/or OFIs, as described in Section 3.3.5.2 above. • The Major Non-Conformances and Minor Non-Conformances will include the findings and the reference to the specific Bylaw requirements that have not been met by the Registrant Firm. Some audit findings may include a recommendation from the Assessor that adds direct guidance and/or value to the Registrant Firm's processes or professional practice.
<u>Step Five:</u> Compliance Audit Report	<ul style="list-style-type: none"> • The compliance audit report is sent to the Registrant Firm for review and acknowledgement. • The Registrant Firm is required to acknowledge the receipt of the compliance audit report. • If the compliance audit report includes a Major Non-Conformance, the Registrant Firm will have the opportunity to provide a written response to the Assessor with respect to the issues identified in the compliance audit report.
<u>Step Six:</u> Registrant Firm Action	<ul style="list-style-type: none"> • OFIs – require acknowledgment in the Registrant Firm’s audit portal. • Minor Non-Conformance(s) – the Registrant Firm will submit a CAP(s) to the Assessor, who will then review the CAP(s) and act as described in Section 3.3.5.2 above. • Major Non-Conformance(s) – the file is referred to the APRC. The Registrant Firm is permitted to provide a written response to the Assessor with respect to the issues

	<p>identified in the compliance audit report within a specified time period. The APRC will review the compliance audit report and any written response from the Registrant Firm and make one of the decisions as described in Section 3.3.6.2 above.</p>
<p><u>Step Seven:</u> Compliance Audit File Closure</p>	<ul style="list-style-type: none"> • Once all audit findings are resolved, the compliance audit file will be closed. • The Registrant Firm will receive notification of the file closure.

4.0 COMPLIANCE

4.1 HOW TO COMPLY WITH THE COMPLIANCE AUDIT PROCESS

The *Act* empowers Engineers and Geoscientists BC to administer the Firm Audit Program, and Sections 8.7(9) and (9.1) of the Bylaws requires Registrant Firms to participate in the compliance audit process by:

- designating one PRR to coordinate the Registrant Firm's participation in the compliance audit as well as communications on behalf of the Registrant Firm;
- completing and submitting the conflict-of-interest declaration form;
- submitting the PPMP;
- completing and submitting the compliance audit questionnaire;
- responding to requests and answering all questions from the Assessor(s);
- providing access to all requested information, files, or Records in the Registrant Firm's possession or control, including but not limited to information, files, or Records related to the Registrant Firm's quality management program, continuing education program, PPMP, code of conduct, and compliance with the Bylaws, applicable professional practice guidelines, practice advisories, and policies of Engineers and Geoscientists BC;
- facilitating office and site visits, in person or virtually, by the Assessor or any person designated by the Assessor, including taking reasonable steps to arrange for office and site access, any necessary personnel, and any

- information required to comply with applicable health and safety legislation during the site visit;
- ensuring compliance with any request by an Assessor to conduct interviews of individuals employed by or under contract with the Registrant Firm, either in person or virtually; and
- attending scheduled meetings with the Assessor (e.g., opening and closing meetings).

Failure to cooperate with the compliance audit process may result in the suspension of a Registrant Firm's Permit to Practice registration with Engineers and Geoscientists BC.

The PRR, on behalf of the Registrant Firm, must also:

- review and acknowledge the compliance audit report within the required time period; if the Registrant Firm has any concerns or disagreements, the PRR must submit these in writing via a supplemental letter to the Assessor separate from the compliance audit report;
- acknowledge in the Registrant Firm's audit portal any OFIs recorded by the Assessor within the required time period;
- submit any CAP(s) requested by the Assessor within the required time period;
- complete any Corrective Actions prescribed by the APRC (if applicable) within the required time period; and
- comply with any decisions made by the APRC (if applicable).

Failure to complete these requirements may result in the compliance audit file being referred to the APRC for further action, which could include authorization of a practice review or referral of the compliance audit file to the Investigation Committee.

4.2 RECOMMENDATIONS FOR REGISTRANT FIRMS

The Firm Audit Program is intended to be a positive experience for all Engineers and Geoscientists BC Registrant Firms. For most Registrant Firms, the result of a compliance audit will be to implement improvements in the Registrant Firm's PPMP processes to eliminate the causes of non-conformances, prevent their recurrence, and provide opportunities for continuous improvement. Assessors not only perform compliance audits to verify adherence to Regulation, but they also offer valuable

advice and guidance on how to meet these requirements effectively. Assessors are also able to suggest remedial tools and resources for Registrant Firms to improve their Registrants' practice and their understanding of their obligations.

Engineers and Geoscientists BC encourages Registrant Firms to use the compliance audit process as a learning experience that can help improve their practice. Registrant Firms that are honest, forthright, and bring a continuous improvement mindset to their audits are likely to see the greatest benefit from the compliance audit process.

5.0 REFERENCES

5.1 LEGISLATION AND REGULATION

Engineers and Geoscientists Regulation [B.C. Reg. 14/2021]

Professional Governance Act [SBC 2018], Chapter 47

5.2 REFERENCES

Engineers and Geoscientists BC. 2024. Bylaws of Engineers and Geoscientists BC. Burnaby, BC: Engineers and Geoscientists BC. [accessed: 2024 June 27]. <https://www.egbc.ca/About/Governance/Legislation-Bylaws>

Engineers and Geoscientists BC. 2023. Guide to the Compliance Audit Program for Individual Registrants. Version 1.0. Burnaby, BC: Engineers and Geoscientists BC. [accessed: 2024 June 27]. <https://www.egbc.ca/getmedia/cf5ba026-bbf8-4cd6-8b8a-64faad38ade3/Guide-Audit-Program-Individuals-V1-0-FINAL-VERSION.pdf.aspx>

Engineers and Geoscientists BC. 2021. Regulation of Firms Permit to Practice Manual. Version 1.1. Burnaby, BC: Engineers and Geoscientists BC. [accessed: 2024 June 27]. <https://www.egbc.ca/getmedia/09c328d3-4cbe-4898-a8e3-722468cff04a/EGBC-Regulation-of-Firms-Permit-to-Practice-Manual-V1-0.pdf.aspx>

Engineers and Geoscientists BC. 2022. Preparing for Your Compliance Audit [Video]. <https://apps.egbc.ca/knowledge-centre/8f375b75-00fc-46d2-b148-ef49e0c02f96/>

6.0 APPENDICES

Appendix A: Compliance Audit Feedback Form.....21

APPENDIX A: COMPLIANCE AUDIT FEEDBACK FORM

Engineers and Geoscientists BC is inviting Registrant Firms who have undergone a compliance audit to share their feedback. The feedback received will help Engineers and Geoscientists BC improve and further optimize the Compliance Audit Program for Registrant Firms, as it is still a new process for Registrant Firms and Assessors alike. The feedback provided will remain confidential and will not influence or impact any future compliance audits that the Registrant Firm, or its Registrants, may undergo. Registrants who participated in the audit can complete the feedback form through the Registrant Firm’s audit portal.

Please note that this survey form has been automated using our MRM system. As a result, only firms with the Audit Closed status will receive a link to complete the survey. The Firm Audit Team does not process surveys submitted on paper or through other means.

REGISTRANT FIRM INFORMATION			
Name of Firm:		Permit to Practice Number:	
Responsible Registrant(s) Name(s):		Responsible Officer:	
Type of Firm:	<input type="checkbox"/> Sole Practitioner	<input type="checkbox"/> Small-to-Medium Firm	<input type="checkbox"/> Large Firm (>200 employees)
Practicing in:	<input type="checkbox"/> BC only	<input type="checkbox"/> Elsewhere in Canada	<input type="checkbox"/> Outside of Canada
Previously Organizational Quality Management (OQM) Certified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

COMPLIANCE AUDIT PROCESS FEEDBACK	
Type of Compliance Audit:	<input type="checkbox"/> Initial <input type="checkbox"/> Routine
Compliance Audit Delivery Type:	<input type="checkbox"/> Virtual <input type="checkbox"/> In-person <input type="checkbox"/> Virtual and In-person
General Comments regarding the Compliance Audit Process: <i>Note: Please refrain from including any personally identifiable information in this comments box.</i>	

Please rate your experience with the compliance audit process on a scale of 1 to 5, with 1 being the lowest and 5 being the highest.						
Clarity of communications around the purpose, process, and expectations of the compliance audit	1	2	3	4	5	N/A
Ease of scheduling the compliance audit	1	2	3	4	5	N/A
Videoconference platform/technology used	1	2	3	4	5	N/A
Timeliness of receiving the compliance audit report	1	2	3	4	5	N/A
Ease of completing the Corrective Action Plan(s) (CAP(s))	1	2	3	4	5	N/A
Do you have any recommendations for resources that might be more helpful in explaining the audit process and expectations from Registrant Firms? <i>Note: Please refrain from including any personally identifiable information in this comments box.</i>						
Additional Comments: <i>Note: Please refrain from including any personally identifiable information in this comments box.</i>						

ASSESSOR TEAM FEEDBACK						
Please rate the Assessor performance throughout the audit process on a scale of 1 to 5, with 1 being the lowest and 5 being the highest.						
Professional conduct	1	2	3	4	5	
Communication skills including the ability to explain information clearly	1	2	3	4	5	
Ability and willingness to address questions	1	2	3	4	5	
Knowledge of compliance audit program	1	2	3	4	5	
Additional Comments: <i>Note: Please refrain from including any personally identifiable information in this comments box.</i>						

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DECLARATION

I understand that by completing the Compliance Audit Feedback Form, I am providing information on a voluntary basis that will be used to further improve the Compliance Audit Program for Registrant Firms.

Name:			
Title and/or Designation:		Survey Completed on:	

