**Draft PDS-01 Addendum 56, HERS Modeler QA**

*Modify the following sections of Chapter 9 as shown by strikeout (delete) and underline (add)*

**Chapter 9-** RESNET NATIONAL STANDARD FOR QUALITY ASSURANCE

# General Provisions

* 1. Purpose

This chapter outlines the responsibilities of RESNET and Quality Assurance Providers and minimum tasks associated with quality management systems used to comply with these Standards.

# Definitions and Acronyms

See Appendix B- Glossary of Terms.

# RESNET Oversight of Quality Assurance Process

* 1. RESNET Oversight of Quality Assurance Designees

RESNET will be responsible for oversight of the work performed under these Standards by approved Quality Assurance Designees.

* 1. Review of Rating Quality Assurance Provider Quality Assurance Reviews

RESNET shall review 100% of the annual Rating Quality Assurance Provider Quality Assurance Reports submitted by Quality Assurance Designees.

* 1. Quality Assurance File Review

RESNET will centrally administer quality assurance review of ratings using data in the National RESNET Registry.

# Quality Assurance Requirements for Rating Quality Assurance Providers

* 1. The quality assurance process specified in this Section shall only be carried out by a RESNET certified Quality Assurance Designee.
	2. Quality Assurance by Rating Quality Assurance Providers
		1. Rating Quality Assurance Providers are responsible for completing an annual submission of their Quality Assurance results to RESNET. RESNET shall annually notify Rating Quality Assurance Providers of the date submissions are due and the content of each submission. The time frame for which data is provided for the annual submissions shall be the calendar year i.e. the twelve month period from January 1st through

December 31st. Rating Quality Assurance Providers will have at least thirty (30) days from notification from RESNET of the annual submission due date until the submissions are due.

* + 1. RESNET shall develop a "RESNET Quality Assurance Checklist" that is to be used by Quality Assurance Designees for the purpose of verifying a Provider's compliance with the individual requirements for Providers set forth in the RESNET Standards. The Quality Assurance Designee shall review the Rating Quality Assurance Provider's compliance with the items on the checklist annually.
	1. Quality Assurance of HERS Raters and Ratings
		1. Ratings included in QA File and QA Field reviews.
			1. For QA File and QA Field reviews, the HERS Rater's "annual total of ratings" shall mean all ratings entered into the National RESNET Registry (based on "date registered") for a calendar year, i.e. the twelve month period from January 1st through December 31st.
			2. Ratings selected for QA File and QA Field review may be registered in the previous quarter but the annual total required is always based on the total number of ratings registered in a calendar year.
		2. HERS Rater Quality Assurance File review (QA File review)
			1. QA File review of RESNET Flagged Files. Quality Assurance Designees shall review ratings with apparent errors flagged by the RESNET QA File review for further Quality Assurance review, investigating the specific issues of concern and working with the HERS Rater and Rating Quality Assurance Provider to correct any errors.
			2. For each HERS Rater, the Provider's Quality Assurance Designee shall be responsible for an annual QA File review of the greater of one (1) rating or ten percent (10%) of the HERS Rater's annual total of Confirmed or Sampled Ratings. When determining the number of ratings to review for a HERS Rater, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 ratings x 10% = 10.1 means that 11 ratings shall be reviewed.

904.3.2.3 Parties included in QA File review. The QA File review shall assess the rating as a whole and any feedback shall be shared with all HERS Raters/RFIs/HERS Modelers participating in the rating.

904.3.2.4 HERS Modelers. For HERS Raters utilizing HERS Modelers, the Quality Assurance Designee shall ensure that a QA File review is completed on a minimum of one (1) rating on a completed home per year. The HERS Modeler QA File reviews may fulfill all of the HERS Rater's annual QA File review requirement.

~~904.3.2.3~~904.3.2.5 QA File reviews shall be conducted on an ongoing basis as appropriate for the volume of ratings being completed and submitted to the National RESNET Registry, and at a minimum quarterly.

~~904.3.2.~~4904.3.2.6 The QA File review completed by a Quality Assurance Designee shall consist of, at a minimum, the following:

~~904.3.2.4.1~~904.3.2.6.1 Ratings shall be selected using a nonbiased selection process from the entire pool of ratings available at the time of the review for each HERS Rater. It may be necessary to first select ratings that represent any particular area of concern in either the rating or construction process. Once it is ensured that ratings from these areas of interest will be included in the quality assurance process, a nonbiased selection process can then be applied such as random selection. Special effort should be taken to make certain that the selected ratings are as representative as possible of the ratings being completed, i.e. new and existing homes, geographic location, builder, trade contractor, variety of floor plans, variety of assisting HERS Modelers and RFIs, etc., which, in some instances, may require more than the minimum (1) rating or ten percent (10%).

~~904.3.2.4.2~~904.3.2.6.2 While Section 102.1.4.11 and 303.3.7 require that HERS Raters submit energy simulation files for every rated home to their Providers, the QA file review does not require that Raters submit quality assurance data files, as defined in Appendix B, to their Provider and/or Quality Assurance Designee for every home that is rated. Only quality assurance data files for the ratings selected for quality assurance shall be required to be submitted for review by the Provider's Quality Assurance Designee.

~~904.3.2.4.2~~904.3.2.6.3 For of each Confirmed Rating, confirm that the values entered into the HERS Rating Software for all Minimum Rated Features are supported by actual on-site field-verified test data;

~~904.3.2.4.2~~904.3.2.6.3.1 At minimum, the Rating Provider shall collect, review, and maintain (for a period of 3 years) the following supporting documentation for each file QA:

Date and time of the inspection/test

The name of the Certified Rater or RFI conducting the inspection/test Plans (or alternative documentation showing building dimensions) EEP Verification Checklist

RESNET Home Energy Rating Standard Disclosure

Photos of the following building features where applicable to the rated Dwelling Unit. Where photos lack sufficient detail1, the Quality Assurance Designee shall require additional supporting documentation.

Building assemblies as required by ANSI/RESNET 301 Appendix B Inspection Procedures for Minimum Rated Features.

All heating, cooling, and service hot water equipment including nameplate/model number

Dwelling Unit Mechanical Ventilation System including nameplate/model number and controls

Infiltration test result or automated test report

Duct leakage test result(s) for each system

Dwelling Unit Mechanical Ventilation System test result(s) for each system

The building's front, back, right, left elevations

Appliances (refrigerator, dishwasher, washer, dryer) including nameplate/model number

1. (Informative Note) For example, where equipment is located in narrow utility closets that prohibit clear photo of nameplate/model number, or when the building feature required is not present at the time of inspection.

~~904.3.2.4.2~~904.3.2.6.4 Confirm that paper and/or electronic files are being maintained and archived by HERS Raters for each rating and/or unique floor plan, including the HERS Rating Software Energy Simulation File and all supporting documentation required to validate the inputs into the rating software file (e.g., architectural drawings, threshold specifications, field data). These files shall be maintained a minimum of three (3) years;

*Sections 904.3.2.5 through remain unchanged except for numbering.*

~~904.3.2.5~~904.3.2.7 QA File review for Sampled Ratings. For Sampled Ratings, annually review sample sets, the sampling process, and the worst-case projected rating energy simulation files for ratings rated through sampling.

~~904.3.2.5.1~~904.3.2.7.1 The QA File review for sampled ratings shall include a review of the greater of one (1) file or ten percent (10%) of the projected worst-case energy simulation files for each new sampled community in order to confirm that minimum rated features and worst-case specifications have been entered into the rating software accurately. Energy simulation files for an existing sampled community shall receive a QA File review, at a rate of one (1) file or ten percent (10%) of the worst-case energy simulation files.

~~904.3.2.5.2~~904.3.2.7.2 The QA File review for sampled ratings shall include an analysis and confirmation that the sampling process, as defined in Chapter 6, is being properly followed, including sample set creation and the application of testing and failure protocols.

~~904.3.2.5.2.1~~904.3.2.7.2.1 QA File review of the sampling process shall be completed on the greater of one (1) sample set or one percent (1%) of the HERS Rater's annual total of sample sets. When determining the number of sample sets to review for a HERS Rater, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 sample sets x 1% = 1.01 means that 2 sample sets shall be reviewed.

~~904.3.2.5.2.2~~904.3.2.7.2.2 For each sample set QA File review, the quality assurance data file(s) shall be reviewed to confirm that data collected in the field (i.e. sample controls) are equal to or better than the minimum rated feature threshold specification inputs for the worst-case energy simulation file for the home(s) that received sample controls for the sample set.

~~904.3.2.5.2.3~~904.3.2.7.2.3If a discrepancy in minimum rated features is identified that requires more stringent threshold specifications for a floor plan, then the worst case projected rating energy simulation file for that plan and home, or for the entire set of homes (as appropriate), subject to sampling shall be reviewed.

* + 1. HERS Rater Quality Assurance Field review (QA Field review).
			1. Determining the number of ratings to receive QA Field reviews.
				1. HERS Raters. For each HERS Rater, the Provider's Quality Assurance Designee shall be responsible for an annual onsite QA Field review of the greater of one (1) rating on a completed home or one percent (1%) of the HERS Rater's annual total of ratings for which Confirmed or Sampled ratings were provided. When determining the number of QA Field reviews to complete for a HERS Rater, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 ratings x 1% =

1.01 means that 2 QA Field reviews shall be completed.

* + - * 1. Rating Field Inspectors. For HERS Raters utilizing RFI's, the Quality Assurance Designee shall ensure that a QA Field review is completed on the greater of one (1) rating on a completed home or one percent (1%) of each RFI's annual total of confirmed or sampled ratings the RFI assisted with. When determining the number of QA Field reviews to complete for an RFI, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 ratings x 1% = 1.01 means that 2 QA Field reviews shall be completed. The RFI QA Field reviews may fulfill all of the HERS Rater's annual QA Field review requirement, but only if the HERS Rater does not do field inspections on completed homes. When a HERS Rater also does field inspections on completed homes, they must have field QA at the same calculated rate of 1% using the above methodologies.
				2. Pre-drywall QA Field reviews. In addition to QA Field reviews on completed homes, for ratings on new homes, the Quality Assurance Designee may perform a pre-drywall QA Field review on each HERS Rater or RFI. Pre-drywall QA Field reviews can be used to meet the 1% QA Field review requirement for a HERS Rater or RFI in addition to the QA Field reviews on completed homes, and can replace 10%, but no more than 25%, of the total number of QA Field reviews (rounded up).
				3. For example, if a HERS Rater or RFI is required to have one (1) QA Field review, one (1) review can be on a completed home and one (1) additional QA Field review can be on the same or a different home before drywall is installed. If a HERS Rater or RFI is required to have two (2) to ten (10) QA Field reviews, one (1) pre-drywall QA Field review may be performed and can count towards one, but no more than one, of the QA Field reviews. If a HERS Rater or RFI is required to have eleven (11) or more QA Field reviews, two (2) pre-drywall QA Field reviews may be performed and they can count towards two, but no more than two, of the QA Field reviews.
				4. HERS Raters and RFIs are exempt from receiving a QA field review for pre-drywall or final inspections and/or testing if they have not performed inspections and/or testing of any minimum rated features for pre-drywall or completed homes within the calendar year. For example, if a HERS Rater of RFI have not completed any pre-drywall inspections within the calendar year, they are exempt from QA Field reviews for pre-drywall inspections.
				5. "Remote" QA Field reviews. All HERS Raters must annually receive a minimum of one (1) on-site, in-person QA Field reviews on the total annual confirmed or sampled ratings or inspections completed. All RFIs must annually receive a minimum of one (1) on-site, in person QA field review on the total annual pre-drywall or final field inspections completed. All other QA Field reviews, for completed and pre-drywall homes, may be performed using a "remote" QA Field review methodology specified by RESNET.
				6. Sampled Ratings. For the purposes of calculating the one (1) rating/home or one percent (1%) QA Field review requirement for HERS Rater and RFI sampled ratings, all the homes rated by a HERS Rater, or for which an RFI assisted, using sampling shall be considered and not just the number of homes tested and inspected. If at least two (2) homes are required for QA Field review, a maximum of one (1) of

the homes shall be a non-tested, sampled home. To ensure that Quality Assurance is being completed on HERS Raters and RFI's rather than builders, the balance of homes included in the QA Field reviews shall have received field testing and/or inspections.

* + - * 1. Quality Assurance Designees shall complete a minimum of 1% quarterly QA Field reviews of Rating Quality Assurance Provider's ratings, based on the total number of ratings registered by the Provider in the previous quarter, until all annual QA requirements for the Provider have been met for each Rater. QA field reviews are not required on every Rater every quarter.
			1. Requirements for QA Field reviews.
				1. HERS Raters. The QA Field review shall confirm the accuracy of all stages of the rating process (e.g. data collection, reporting, and energy simulation file creation and/or updating) for the rating receiving a QA Field review.

Collect dimensional measurements in the field for the home to evaluate the accuracy of those determined by the HERS Rater in the field or from plans, including conformance to the requirements set forth in Chapters 3 and 8 and Appendix A of these Standards.

Complete in the field all necessary performance testing and all necessary inspections of minimum rated features for the home to evaluate the accuracy of those determined by the HERS Rater, including conformance to the requirements set forth in Chapters 3 and 8 and Appendix A of these Standards.

Evaluate inputs entered by the HERS Rater into the energy simulation file for the rated home to determine conformance with data from 904.3.3.2.1.1 and 904.3.3.2.1.2 as well as Chapters 3 and 8 and Appendix A of these Standards.

* + - * 1. Rating Field Inspectors. The QA Field review shall confirm the accuracy of data collection and reporting by the RFI for the rating receiving a QA Field review.

As necessary, collect dimensional measurements in the field for the home to evaluate the accuracy of those that may have been determined by the RFI, including conformance to the requirements set forth in Chapter 8 and Appendix A of these Standards.

Complete in the field all necessary performance testing and all necessary inspections of minimum rated features for the home to evaluate the accuracy of those that may have been determined by the RFI, including conformance to the requirements set forth in Chapter 8 and Appendix A of these Standards.

* + - * 1. Pre-drywall. For homes receiving a QA Field review prior to the installation of drywall, the QA shall complete in the field all necessary performance testing and all necessary inspections of minimum

rated features for the home to evaluate the accuracy of those determined by the HERS Rater or RFI, including conformance to the requirements set forth in Chapter 8 and Appendix A of these Standards.

* + - * 1. Each rating selected for a QA Field review for each HERS Rater and RFI shall be randomly selected to ensure that a representative sample of all home types, locations and builders is achieved.
				2. Remote QA Field reviews. QA Field reviews not completed on-site, in-person by a Quality Assurance Designee, may be completed remotely using video technology and processes, protocols, and procedures approved by RESNET.
		1. Quality Assurance for Multifamily Projects
			1. In addition to the Quality Assurance requirements specified in this Chapter, quality assurance for multifamily projects shall include, at a minimum, the following:
				1. All dwelling units that are certified or qualified by the use of sampling shall be considered to be "Ratings". QA File and QA Field reviews shall be conducted on a percentage of all the dwelling units certified or qualified under sampling, rather than the percentage of tested and inspected dwelling units.
				2. If units within a multifamily building have multiple space conditioning configurations such that some units have ducts and other units do not, the Quality Assurance Designee shall choose a unit with ducts for QA Field review. Additionally, if the building has some units with ducts that are within conditioned space while others have ducts that are outside of the building envelope, the Quality Assurance Designee shall choose a unit with ducts outside of the envelope for QA Field review.
				3. For multifamily projects, when selected, QA Field reviews shall include a comprehensive inspection of all minimum rated features that are possible to be inspected within the selected units and within the building during the time of the QA Field review. This means that the Quality Assurance Designee shall inspect attic insulation via a common attic access where present, mechanical rooms that house common mechanical systems that serve multiple units, common ventilation systems, common laundry etc.
			2. If the annual rating volume of a HERS Rater is such that more than one QA Field review is required for that annual period's QA Field review quota (i.e. the HERS Rater completed more than 100 ratings during the annual period), no more than one QA Field review within a particular multifamily development shall count toward meeting the total QA Field review quota.
				1. Exception. If a Rater/RFI did not perform ratings on any other single or multifamily buildings for the calendar year and the multifamily building is 100 units or less, then pre-drywall and final QA Field reviews may be performed on the multifamily building that was rated.
				2. Exception. If a particular multifamily development contained more than 100 units. In such an instance, one QA Field review per every 100 units of that development shall count towards the annual QA Field review quota.
				3. Exception. If the HERS Rater had one or more RFI's who worked with them throughout the annual period, the Quality Assurance Designee may select multiple units within a particular multifamily

development to count towards the annual QA Field review quota for each RFI as long as those additional QA Field reviews represent work performed by each individual RFI during the annual period.

* + 1. Non-compliance of a reviewed rating shall trigger corrective action.
			1. A Quality Assurance Designees will conduct an evaluation using the RESNET QA Review Checklist to determine if the file or field QA review complies with the RESNET Standards or needs corrective action.
			2. Under the supervision of the Quality Assurance Designee, non-compliant rating(s) shall be corrected in order to come into compliance with RESNET technical Standards.
			3. The Quality Assurance Designee shall develop and implement a coaching action plan for the HERS Rater/RFI/HERS Modeler that addresses the underlying problems that led to the non-compliant rating. The coaching plan shall include mentoring the HERS Rater/RFI/HERS Modeler.
			4. The Provider shall initiate appropriate disciplinary action on the HERS Rater/RFI/HERS Modeler in accordance with the Provider's written HERS Rater/RFI/HERS Modeler disciplinary procedures.
			5. Multiple instances of non-compliance with QA File and/or QA Field review for a Rater, HERS Modeler or RFI shall trigger an increased rate of QA File reviews or QA Field reviews.
				1. When in the course of quality assurance review, as ratings outlined in 904.3.5.5.2 and 904.3.5.5.3, in a twelve (12) month period from January 1st through December 31st are found to be out of compliance by more than 5%, or the Quality Assurance Designee determines that field work (e.g. testing or inspections of minimum rated features) is being completed inaccurately or incompletely, the following, at a minimum, shall occur:

The Rater and/or RFI/HERS Modeler shall be placed on probation;

If the noncompliant ratings are due to errors found in QA File review, the Rater/HERS Modeler's File QA shall be increased to 15% ratings for the next twelve (12) month period. Round up to the next whole number when the percentage calculation yields a decimal point, e.g. 50 ratings x 15% = 7.5 means that 8 QA File reviews shall be completed;

When appropriate (e.g. the HERS Rater/RFI previously struggled with field compliance, a piece of equipment is used in the rating that is not commonly found in the market or used by a builder, field test results are out of typical range for the market, etc.), a QA Field review shall be completed by the Quality Assurance Designee on the ratings that were out of compliance by more than 5%;

If the noncompliant ratings are due to inaccurate or incomplete field work, the Rater and/or RFI Field QA shall be increased to 2% or 2 ratings whichever is larger for the next twelve (12) consecutive months . Round up to the next whole number when the percentage calculation yields a decimal point, e.g. 50 ratings x 2% = 1 means that 2 QA Field reviews shall be completed.

* + - * 1. The threshold for Raters and RFI's who performed work on fewer than 100 homes in the prior or current twelve (12) month period from January 1st through December 31st shall be "two (2) or more ratings";
				2. The threshold for Raters and RFI's who performed work on 100 homes or greater in the prior or current twelve (12) month period from January 1st through December 31st shall be "three (3) or more ratings or 1% of ratings, whichever is greater";
				3. If additional noncompliance or major errors are discovered during the period of increased File or Field QA, the Quality Assurance Designee shall review 100% of the next five (5) rating files submitted or field inspections conducted. If noncompliance or major errors continue to be discovered, the Rater may be suspended in accordance with the Provider's written HERS Rater/RFI/HERS Modeler disciplinary procedure.
	1. Significant Non-compliance by Rating Quality Assurance Providers.

It is the expectation of RESNET that Providers fully comply with all the requirements set forth in these Standards. Discovery of one or more areas of non-compliance via the RESNET Quality Assurance process, reporting by a Quality Assurance Designee as part of the Provider's Quality Assurance process, or in the course of RESNET's research of an ethics or consumer complaint will result in the Quality Assurance Designee working with a Provider to come back into compliance. However, on occasion, there may be instances where actions by a Provider are truly egregious and, as such, would be deemed to be "significant non-compliance". This Section seeks to define the thresholds when actions by a Provider are deemed to be significant non-compliance, thereby requiring that the Quality Assurance Designee report the significant non- compliance to RESNET and additional action by RESNET may be taken.

* + 1. Significant non-compliance by Providers shall include, but not be limited to, the following:
			1. Failure to comply with multiple individual requirements, or requirements impacting multiple HERS Raters and/or ratings, for Providers set forth in the RESNET Standards and enumerated in a RESNET Quality Assurance Checklist;
			2. Failure of a Provider to comply with the RESNET Standards of Practice, Code of Ethics, or Conflict of Interest Disclosure;
			3. Failure to follow a Provider's written HERS Rater/RFI/HERS Modeler disciplinary procedures for known or obvious non-compliance with the RESNET Standards, Standards of Practice, Code of Ethics, or Conflict of Interest Disclosure.
		2. Reporting of significant non-compliance to RESNET.
			1. Quality Assurance Designees must report all significant non-compliance by a Provider to RESNET when it becomes known to the Quality Assurance Designee so that RESNET may assist the Quality Assurance Designee in working with a Provider to come back into compliance.
			2. Failure of a Quality Assurance Designee to report significant non-compliance issues may result in actions taken by RESNET as stipulated in Section 905.2.7.

# Quality Assurance Designee (QA Designee)

* 1. A Rating Quality Assurance Provider shall designate one and only one officer, employee, or contractor to be the Primary Quality Assurance Designee for the organization, responsible for quality assurance within the organization. This does not preclude a Provider from having more than one QA Designee on staff or as a contractor, as may be necessary for business models where QA Designees do Ratings. The Primary QA Designee shall have ultimate responsibility, on behalf of the QA Provider, for fulfilling the requirements listed in Section 904.10 and who shall be the single point of contact to RESNET regarding all Quality Assurance matters. All QA Designees shall meet each of the minimum requirements to be a QA Designee as stipulated in this Section.
	2. RESNET shall certify all Quality Assurance Designees and maintain a national registry of certified Quality Assurance Designees.
	3. Certification requirements to be a RESNET certified Quality Assurance Designee
		1. Meet the following requirements:
			1. Previous certification as a Home Energy Rater; and
			2. As a certified Home Energy Rater, complete confirmed ratings on a minimum of twenty-five (25) homes, five (5) of which must have received quality assurance field reviews in accordance with the RESNET Standards without significant non-compliance issues, or
			3. Complete QA Field reviews on a minimum of ten (10) homes and QA file reviews on a minimum of twenty (20) homes as either a Quality Assurance Designee or delegate (as previously allowed by RESNET) or under the supervision and mentorship of another Quality Assurance Designee.
		2. Passing the RESNET Quality Assurance Designee Competency Test with a minimum score determined by RESNET
		3. Attend and successfully complete a RESNET Quality Assurance Designee Training.
		4. The requirements of [905.3.1.2](#_bookmark0) and [905.3.1.3](#_bookmark1) must be met within twelve (12) months of passing the RESNET Quality Assurance Designee Test, or the individual must pass the test again prior to being recognized as a QA Designee.
		5. Submit an application to RESNET and be recognized as a qualified QA Designee.
	4. Professional Development for QA Designees
		1. All Quality Assurance Designees annually shall:
			1. Document attendance at the RESNET Conference or of RESNET approved CEUs; and
			2. Participate in a one-day in-person (or virtual) RESNET update and training.
		2. A Quality Assurance Designee must renew annually with RESNET to maintain certification.
	5. Responsibilities of Quality Assurance Designees.
		1. Complete all QA File and QA Field reviews for a Rating Quality Assurance Provider as required by these Standards.
		2. Serve as a liaison between RESNET and Rating Quality Assurance Providers, assisting with the following:
			1. Confirm that Rating Quality Assurance Providers are informed of all changes to the RESNET ANSI and non-ANSI standards.
			2. Querying RESNET on behalf of Providers if interpretive questions arise about technical or administrative issues regarding ratings.
			3. Ensure that Rating Quality Assurance Providers are properly following all RESNET technical and administrative requirements set forth in these Standards or stipulated in formal interpretations issued by RESNET.
			4. On behalf of RESNET, ensure that Rating Quality Assurance Providers are properly enforcing disciplinary actions for Raters/RFI's and/or adhering to any disciplinary actions imposed on a Provider by RESNET.
		3. Maintenance of quality assurance files;
		4. Complete annual submission of Quality Assurance results to RESNET in accordance with Section 904.2;
		5. Annually complete the RESNET Quality Assurance Checklist for Rating Quality Assurance Providers in accordance with Section 904.2;
		6. Maintain the Quality Assurance Data File for each rating that receives quality assurance review at a minimum containing the information required by Section 904.3. The Data Files shall be archived for a minimum of three (3) years
	6. RESNET Whistle Blower Protection Policy.
		1. A Rating Quality Assurance Provider shall not retaliate against a Quality Assurance Designee or HERS Rater in the terms and conditions of their status with the Provider for any of the following reasons:
			1. Reporting to a supervisor, to RESNET or to a federal, state or local agency what the Quality Assurance Designee or HERS Rater believes in good faith to be a violation of the RESNET Standards and/or a local, state or federal law; or
			2. Participation in good faith in any resulting investigation or proceeding;
			3. Exercising his or her rights under any state or federal law(s) or regulation(s) to pursue a claim or take legal action to protect the Quality Assurance Designee's or HERS Rater's rights.
		2. RESNET may take disciplinary action (up to and including revocation) against a Rating Quality Assurance Provider who in its assessment has engaged in retaliatory conduct in violation of this policy.
	7. Failure of a Quality Assurance Designee to fulfill their responsibilities. Failure of a Quality Assurance Designee to properly fulfill their responsibilities as specified in these Standards may include one or more of the following actions by RESNET:
		1. The Quality Assurance Designee being placed on probation;
		2. Removal of the Quality Assurance Designees' certification as a Quality Assurance Designee of RESNET;
		3. Removal of the Quality Assurance Designee from the National Registry of Approved Quality Assurance Designees;
		4. The Quality Assurance Designee may appeal an action taken by RESNET under this Section using the Appeals procedures stipulated in Section 911 of these Standards.

# Quality Assurance Requirements for Third-Party Energy Efficiency Programs

* 1. See Appendix B- Glossary of Terms for definition of Third Party Energy Efficiency Program (EEP).
	2. Quality Assurance, as specified in Section 904, may be provided for EEP's by Quality Assurance Designees as part of the RESNET Quality Assurance process when RESNET and the EEP enter into a formal agreement. Where EEP Quality Assurance requirements are greater than specified in Section 904, those Quality Assurance requirements shall be specified in writing by an EEP and provided to RESNET for approval in order to be included in the RESNET Quality Assurance process.
		1. Unless formally authorized by RESNET, RESNET’s oversight of a QA Designee shall only cover areas covered in these Standards and in the RESNET Home Energy Rating Standards of Practice.
	3. Quality Assurance data files and the results of onsite verification of ratings files will be made available by Providers to EEPS only for the EEP's quality assurance initiatives and, additionally, only if the EEP has agreements with rating clients in the program that allow for HERS Raters to release rating information.
	4. EEP files will be inspected for quality assurance pursuant to Section 903.4 and shall include those items related to energy efficiency specific to the EEP that may be in addition to the Home

Energy Rating. Significant non-compliance by Providers shall be reported to EEP’s when they become known to RESNET.

# Quality Assurance Requirements for Contractor Education and Qualification (CEQ) Providers, Energy Smart Providers, Energy Smart Contractors, and Energy Smart Teams

* 1. RESNET Quality Assurance of CEQ Providers
		1. RESNET shall select a limited number of CEQ Providers and conduct an annual review of their Quality Assurance records.
		2. A CEQ Provider shall have the right to challenge the findings of RESNET’s quality assurance review.
		3. CEQ records that must be reviewed include the following:
			1. The CEQ’s Energy Smart Contractor Registry;
			2. The CEQ’s Energy Smart Contractor Agreements;
			3. Documentation of CEQ Provider’s initial training course and continuing education offerings for Energy Smart Contractors;
			4. Documentation of Energy Smart Contractor’s Designated Qualification Representative completing required training and testing;
			5. Documentation of the Representative’s continuing education;
			6. The CEQ’s Energy Smart Contractor complaint files;
			7. Documentation of disciplinary actions.
		4. In the case of an unresolved complaint brought to the RESNET Executive Director, it will be the responsibility of the CEQ to secure the Energy Smart Project files from the Energy Smart Project Manager and present them to RESNET.Failure of the Energy Smart Project Manager to provide adequate records shall result in sanctions up to and including a 60 day suspension of the Energy Smart Contractor designation.
		5. An on-site review by RESNET may be conducted if there are significant inconsistencies or errors in the reviewed CEQ files.
		6. Complaints against a CEQ Provider submitted by the Complaint Resolution Officer (CRO) to RESNET shall be addressed by the Executive Director. The RESNET Executive Director shall:
			1. Resolve the complaint in forty-five (45) calendar days.
			2. A complaint will be considered resolved once a Complaint Resolution Form has been submitted, signed by the party who filed the complaint and the CEQ Provider.
			3. A log of unresolved complaints shall be maintained by the RESNET Executive Director.
		7. CEQ Providers are subject to Probation, Suspension, and Revocation of Accreditation by RESNET in accordance with [Section 910](#_bookmark4) of these Standards.
			1. Suspension and Revocation of Accreditation of a CEQ Provider may result from the following: 907.1.7.1.1 The provisions described in 912.3;

907.1.7.1.2 Failure to ensure that the Energy Smart Contractor followed the complaint resolution process in the case of a complaint against the Energy Smart Contractor or failure to follow required disciplinary and corrective action with respect to a contractor;

* + - 1. RESNET shall comply with the due process and appeals procedures contained in [Section 911](#_bookmark5) of these Standards with respect to disciplinary actions against an accredited CEQ Provider.
	1. CEQ Provider Quality Assurance of Energy Smart Contractors
		1. The CEQ Provider shall annually verify that the Energy Smart Contractor’s representative is still with the company.
		2. Respond to complaints against Energy Smart Contractors.
		3. Follow written Energy Smart Contractor Disciplinary Procedures described in the CEQ Provider’s written policies and procedure for Energy Smart Contractors.
	2. CEQ Provider Complaint Resolution Procedures
		1. The CEQ Provider must conduct non-compliance resolution when a complaint is received about the work performance of an Energy Smart Contractor from any of the following: the client**,** Rater/Auditor, other Energy Smart Contractors**,** Final Verifier.
		2. Complaints shall be managed and resolved by the CEQ Provider’s CRO following the CEQ Provider’s Complaint Response Process.
		3. Each CEQ Provider shall retain records of complaints received and responses to complaints for a minimum of three (3) years after the date of the complaint.
		4. The Complaint Response Process shall include, at a minimum, the following:
			1. Consumer Complaint Form, available for submittal via the RESNET website. The form will be forwarded to the CEQ Provider to the attention of the CRO.
			2. It is the responsibility of the CEQ Provider to secure the documentation from the Energy Smart Project Manager or Final Verifier for review by the CRO.
			3. The CRO shall evaluate the complaint to determine if the contractor shall be deemed to be in non- compliance. Complaints must:
				1. Be related to either structural or major deficiencies (over $500) and must impact the energy efficiency of the home.
				2. Include the work contract(s) and copies of checklists denoting unresolved deficiencies.
				3. In the event the CRO cannot make a fair evaluation of the complaint based on the information submitted, the consumer shall have the option of hiring an independent Rater/Auditor to visit the site and submit his or her report and findings.
				4. The Energy Smart Contractor Complaint Resolution Process shall consist of the following: 907.3.4.3.4.1 The CRO will notify the contractor of the complaint and the contractor shall have forty five

(45) calendar days to resolve the complaint.

A complaint will be considered resolved once a Complaint Resolution Form has been submitted, signed by both the client and the party against whom the complaint was filed, and the resolution verified by the CRO.

If the complaint is not resolved in the allotted time, it will be considered unresolved.

* + - 1. Energy Smart Contractors with three (3) unresolved complaints within a 90 day period or with five (5) or more unresolved complaints at any given time shall have their certification suspended in accordance with the provisions of [907.3.5](#_bookmark2).
			2. A log of unresolved complaints shall be maintained by the CEQ Provider and must be made available to RESNET upon request.
		1. The minimum requirements for suspension of certification procedures are the following:
			1. First Offense: First time an Energy Smart Contractor has three (3) unresolved complaints within a 90 day period or has five (5) outstanding unresolved complaints, the CEQ Provider shall suspend the contractor’s certification for a period of not less than 30 days, and:
				1. Shall inform RESNET that the contractor’s certification has been suspended, and shall request that RESNET remove the contractor from the Directory.
				2. Shall require the contractor, prior to reinstatement, to complete two (2) hours of Continuing Education specific to conflict resolution or customer relations, or successfully resolve at least one of the 90

day old complaints and all of the complaints older than 90 days. CEQ Providers may provide exceptions for complaints that cannot be resolved.

* + - * 1. Shall inform RESNET when the contractor’s certification has been reinstated, clarify the resolution, or reasons for not being able to resolve the complaint, and shall request that RESNET reinstate the listing on the Directory.
			1. Second Offense: Second time an Energy Smart Contractor has three (3) unresolved complaints within a 90 day period or has five (5) outstanding unresolved complaints, the CEQ Provider shall suspend the contractor’s certification for a period of not less than 90 days, and:
				1. Shall inform RESNET that the contractor’s certification has been suspended, and shall request that RESNET remove the contractor from the directory.
				2. Shall require the contractor prior to reinstatement to complete three (3) additional hours of Continuing Education and successfully resolve at least one of the 90 day old complaints and all of the complaints older than 90 days. CEQ Providers may provide exceptions for complaints that cannot be resolved.
				3. Shall inform RESNET when the contractor’s certification has been reinstated, clarify the resolution, or reasons for not being able to resolve the complaint, and shall request that RESNET reinstate the listing on the Directory.
			2. Third Offense: Third time an Energy Smart Contractor has three (3) unresolved complaints within a 90 day period, or has five (5) outstanding unresolved complaints , the CEQ Provider shall suspend the contractor’s certification for a period of not less than twelve (12) months, and:
				1. Shall inform RESNET that the contractor’s certification has been suspended, and shall request that RESNET remove the contractor from the Directory.
				2. Shall require the contractor, prior to reinstatement, to complete three (3) additional hours of Continuing Education and successfully resolve all of the outstanding complaints. CEQ Providers may provide exceptions for complaints that cannot be resolved.
				3. Shall inform RESNET when the contractor has met the requirements of [907.3.5.3.2](#_bookmark3), clarify the resolution, or reasons for not being able to resolve the complaint. RESNET approval shall be required for reinstatement of certification and RESNET shall reinstate the contractor’s listing on the Directory if appropriate.
	1. Quality Assurance Provider Quality Assurance Review of Rater Final Verification of Energy Smart Projects
		1. Quality assurance of HERS Raters' Final Verifications of an EnergySmart Projects shall be performed by the Provider's Quality Assurance Designee.
		2. Quality Assurance File Review
			1. For each Rater/Auditor that performs Final Verification for an Energy Smart Project, the QA Provider’s QA Designee shall annually conduct QA File Review of the Final Verification documentation file(s) the greater of one (1) projects or ten percent (10%) of the Contractor's annual total of projects completed. When determining the number of projects to review for a Contractor, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 projects x 10% = 10.1 means that 11 projects shall be reviewed.
				1. Project documentation file(s) shall include

A copy of the original work scope and signed proposal; 907.4.2.1.1.2 Rater/Auditor and Contractor names and contact information; 907.4.2.1.1.3 Program sponsor name, completed final verification checklist; 907.4.2.1.1.4 Energy simulation software file;

907.4.2.1.1.5 All test out results.

* + - * 1. When the QA Provider’s QA Designee conducts the QA File Review, they shall review at least one (1) project documentation file for each Energy Smart Contractor and Energy Smart Team. The QA Designee shall equitably distribute the QA File Reviews of each individual Energy Smart Contractor’s or Team’s Projects.
			1. The QA Designee will confirm that each Energy Smart Contractor for the project has been approved by a RESNET-approved CEQ Provider as demonstrated by listing on the RESNET Energy Smart Contractor Directory.
			2. The QA Designee will verify the completion of the Rater Final Verification checklist.
				1. There must be consistency between the Final Verification Checklist and final test out results, copy of work scope, and signed proposal.
				2. Must include reported results of non-conformance by Final Verification.
			3. The QA Designee will review 10% of the Rater/Auditor Final Verifier energy simulation software file and projected estimated energy savings.
		1. Quality Assurance Field Review (QA Field Review)
			1. For each Rater/Auditor that performs Final Verification for an Energy Smart Project the QA Designee shall annually conduct QA Field Reviews of Energy Smart Projects at a rate of 1% of verified projects or one project, whichever is greater. QA Field Review shall include the greater of one (1) project or ten percent (10%) of each Contractor's annual total of projects completed. When determining the number of projects to review for a Rater and Contractor, round up to the next whole number when the percentage calculation yields a decimal point, e.g. 101 projects x 1% = 1.01 means that 2 projects shall be reviewed.
			2. The QA Designee shall confirm the results of the Final Verifier’s combustion appliance testing where applicable.
				1. Where there are vented combustion appliances that use indoor air to vent combustion gases, re-test Worst Case Depressurization in accordance with the QH Standard.
				2. Where any spaces contain combustion appliances, re-test for Carbon Monoxide in accordance with the QH Standard.
			3. The QA Designee shall review the work scope and signed proposal, and shall confirm installed measures are consistent with selected measures and work scope in accordance with the QH Standard.
			4. The QA Designee shall confirm the Final Verifier’s Estimate of Project Energy Savings as follows:
				1. Calculate an independent estimate of projected energy savings for the Energy Smart Project using the same RESNET-approved software used by the Final Verifier.
				2. Compare the Final Verifier’s final estimated energy savings against the QA Designee’s independent calculation of estimated energy savings.
				3. The QA Designee’s results must be no more than three percent (3%)(+/-) variation in the HERS Index from the HERS Index result as determined by the QA Designee.
		2. Non-Compliance and Resolution
			1. Reporting: Non-compliance of an Energy Smart Project with respect to installed measures or estimate of projected energy savings shall be reported to the CEQ Provider’s Compliant Resolution Officer (CRO).
			2. Discipline: Non-compliance of the Final Verifier’s Final Verification of an Energy Smart Project with respect to installed measures or estimate of projected energy savings shall result in additional action in accordance with the QA Provider’s written Disciplinary Procedures.
			3. Record-Keeping: Rating Providers shall maintain Quality Assurance records for every Energy Smart Project that has received Documentation or On-Site QA Review for a period of no less than three (3) years and that will include the following:
				1. Copy of work scope and signed proposal;
				2. Names and contact information of the Rater/Auditor, ES Contractors, and Final Verifier; 907.4.4.3.3 Program sponsor name;

907.4.4.3.4 Completed final verification checklist; 907.4.4.3.5 All test out results;

907.4.4.3.6 QA Review Results.

# Ethics and Appeals Committee

The Ethics and Appeals Committee shall have the responsibility of investigating ethics and consumer complaints and hearing appeals of an Application or Renewal Application that has been denied, or if a Provider has been placed on probation, or if a Provider's accreditation has been suspended or revoked. The Committee shall report to the RESNET Executive Director.

* 1. **Committee membership.** The Ethics and Appeals Committee shall be chaired by a member of the RESNET Board of Directors. The Chair shall be approved by the RESNET Board. Nomination of Committee members shall be made by the Chairman. The Committee shall be composed of a minimum of five (5) members, but no more than seven (7) members including the chairman. The Committee shall consist of a minimum of two (2) Home Energy Raters and a minimum of two (2) representatives of Provider organizations.
	2. **Committee Responsibilities.** The Ethics and Appeals Committee shall have the responsibility of investigating ethics and consumer complaints and hearing appeals of an Application or Renewal Application that has been denied, or if a Provider has been placed on probation, or if a Provider's accreditation has been suspended or revoked within 30 business days.

# Ethics and Compliance Complaints

* 1. Filing of Ethics and Compliance Complaints
		1. Ethics complaints may be filed for violation of the RESNET Code of Ethics.
		2. Compliance Complaints may be filed for failures to comply with the RESNET Standards
		3. Complaints shall document the alleged violation(s) or compliance issue(s).The complaint shall also be specific about which section(s) of the Code of Ethics or the RESNET Standards have been violated. To be considered, the full and complete complaint shall be submitted on the RESNET’s online ethics or compliance complaint form posted on the RESNET web-site and contain the following information:
			1. The name of the complainant and contact information;
			2. The name of the party that is the subject of the complaint;
			3. A complete description of the alleged violation(s);
			4. A recitation of all the facts documenting the complaint;
			5. Copies of all relevant documents.
	2. Investigation of Complaints
		1. RESNET has a tiered approach to investigation of complaints; RESNET makes an initial determination and all parties have the right to appeal the decision to the RESNET Ethics and Appeals Committee. Furthermore, a provider has the right to appeal any decision made by the Ethics and Appeals Committee to the RESNET Ethics Panel per section 910.2.3. Upon receipt of a complaint, RESNET shall assign a case number and RESNET staff shall review the evidence submitted. The Chair of the Ethics and Appeals Committee shall be informed. RESNET staff shall consider the documentation contained in 909.1.3 in making a determination to proceed or dismiss the complaint.
		2. In cases where RESNET staff finds the documentation submitted does not meet the minimum standards for an ethics or compliance complaint, the complaint may be dismissed. Both parties shall be notified of RESNET staff's finding by electronic mail.
		3. Upon a decision by RESNET staff that the complaint should proceed to the next step, RESNET shall send a copy of the complaint by electronic mail to the subject of the complaint immediately. The respondent has 20 business days to submit a full and complete response to the complaint. All relevant information and documentation shall be included in the response. The response shall be in writing and sent to RESNET by electronic mail.
		4. Upon receipt of the response, RESNET shall within thirty (30) business days of receiving the complaint, take action on the complaint. The action may include, but is not limited to:
			1. Dismissal of complaint;
			2. Require that steps be taken by the subject of the complaint to correct the problem; and/or
			3. Specify sanctions under Section 912 (Probation, Suspension and Revocation of Accreditation) of this chapter.
		5. All parties to the complaint shall be informed by electronic mail of the RESNET's action.
		6. Actions shall be subject to appeal in accordance with Section 913 of these Standards.
		7. All complaints, responses, and supporting documentation received by RESNET shall be handled in strict confidence by RESNET staff, the Ethics and Appeals Committee and the RESNET Appeals Panel.

# Probation, Suspension, and Revocation of Accreditation

* 1. Notification.

RESNET shall provide written notification to Providers of any decisions under this section. All notices shall be sent by certified mail, or other method which provides evidence of delivery. All notices shall clarify the procedures being followed, as stipulated in this Standard, and include, where applicable, a statement of the Provider’s rights to appeal under [Section 911](#_bookmark5) of this chapter.

* 1. Probation

If RESNET determines at any time that a Provider has failed to adhere to the accreditation requirements set forth in these Standards, RESNET shall notify the Provider of the specified deficiencies and shall require that specific corrective action, set forth in the notification, be taken within a specified time after the date set forth in such notification. A notice of probation may be appealed under [Section 911](#_bookmark5) of this chapter.

* + 1. Types of probation:
			1. Administrative Probation. Results from violations found through a Provider’s QA process, RESNET quality assurance monitoring or through the RESNET complaint resolution process. RESNET shall notify the Provider of the specified deficiencies and shall require that specific corrective action, set forth in the notification, be taken not later than twenty (20) business days after the date set forth in such notification. Probations resulting from these violations shall remain confidential. These violations may include but not limited to:
				1. Failure to submit to RESNET any material information required to be submitted by the Provider, in accordance with obtaining or maintaining accreditation;
				2. Failure by a Rating Quality Assurance Provider to make changes/updates to a Provider’s Policies and Procedures;
				3. Failure by a Rating Quality Assurance Provider to adhere to requirements for quality assurance of Raters that causes a minor deficiency in the QA of one or more Raters;
				4. Failure by a Rating Quality Assurance Provider to adhere to requirements for Rater certification and re-certification;
				5. Failure by a Rating Quality Assurance Provider to enforce corrective action requirements for Raters having non-conforming QA results;
				6. Failure to adhere to one or more provisions of the RESNET Standards.
			2. Disciplinary Compliance Probation.

More serious compliance violations found through a Provider’s QA process, RESNET quality assurance monitoring or through the RESNET complaint resolution process. RESNET shall, at its discretion, make a final determination regarding the necessity of posting a probation resulting from these violations on the RESNET web site. These violations may include but are not limited to:

* + - * 1. Failure to correct the terms of an administrative probation during the time period defined in the issuance of probation;
				2. Investigated and validated ethics or compliance complaints against a Provider;
				3. Failure by a Rating Quality Assurance Provider to follow complaint resolution process regarding actions of the Provider or their Raters;
				4. Failure by a Rating Quality Assurance Provider to follow a Provider’s Rater/RFI Disciplinary procedures.
				5. Misrepresentation of any accreditation or certification status in marketing materials, or services offered or actually provided, for which the Provider organization does not possess the appropriate RESNET accreditation or affiliated individuals do not possess the appropriate RESNET certification;
				6. A Rating Quality Assurance Provider knowingly registering fraudulent ratings to the National RESNET Registry;
				7. Willful misconduct;
				8. A Provider shall at a minimum be placed on Disciplinary Probation if they have been placed on Administrative Probation twice within twelve months.
				9. Rating Quality Assurance Providers placed on Disciplinary Compliance Probation by RESNET will be subject to a fine set by the RESNET Board of Directors.
	1. Suspension
		1. At the discretion of RESNET, any Provider accredited by RESNET may have their accreditation suspended in any of the following circumstances but are not limited to:
			1. A Provider has had more than one (1) Disciplinary Probation violation within a twelve-month period;
			2. Failure to correct the terms of a Disciplinary Probation during the time period defined in the notice of probation;
			3. Submission of false information to RESNET in accordance with obtaining or maintaining accreditation;
			4. Misrepresentation of any accreditation or certification status in marketing materials, or services offered or actually provided, for which the Provider organization does not possess the appropriate RESNET accreditation or affiliated individuals do not possess the appropriate RESNET certification;
			5. A Rating Quality Assurance Provider knowingly registering fraudulent ratings to the National RESNET Registry;
			6. Willful misconduct;
			7. A Provider shall at a minimum be placed on suspension if they have any Disciplinary Probation violations within twelve months of reinstatement from a suspension.
		2. RESNET shall notify the Provider that their accreditation has been suspended and, unless the Provider chooses to appeal, the Provider shall be removed from the RESNET Provider Directory.
		3. RESNET shall post Providers whose accreditation has been suspended. The Provider’s suspension listing shall be removed when the Provider successfully complies with the terms of the suspension.
		4. RESNET shall electronically inform accredited QA Providers, Rating Software Providers, Rater Instructors/Assessors and Home Energy Raters of a QA Provider’s accreditation suspension.
			1. Prior to reinstatement, the Provider shall:
				1. Successfully resolve the issue(s) that resulted in the Provider being suspended; 910.3.4.1.2 Inform RESNET in writing as follows:

That issue(s) that resulted in the Provider being suspended have been successfully resolved;

Stating the steps taken to resolve the issue(s);

Stating the steps that will be taken to prevent the issue(s) from occurring again in the future; and

Requesting that RESNET reinstate the Provider’s listing on the Directory.

* 1. Revocation
		1. At the discretion of RESNET, any Provider accredited by RESNET may have their accreditation revoked in any of but not limited to the following circumstances:
			1. A Provider has had more than two (2) Disciplinary Probation violations within a twelve month period;
			2. In the event that deficiencies stipulated in a notice of suspension have not been remedied within the period set forth in such notice;
			3. Pursuant to any of the express provisions of Section 103.3.5 non renewal;
			4. Provider goes out of business;
			5. Upon expiration of a Provider’s right to appeal a suspension of accreditation pursuant to Section 912 of this chapter;
			6. Fraud.
			7. A Principle of the organization has been convicted of or has admitted to a felony or is listed on any state or federal sex offenders list, when deemed by RESNET to impact performance or industry reputation.
		2. RESNET shall notify the Provider that their accreditation has been revoked and, unless the Provider chooses to appeal, the Provider shall be removed from the RESNET Provider Directory.
		3. RESNET shall post Providers whose accreditation has been revoked. The Providers revocation listing shall be removed when the Provider successfully complies with the terms of the revocation.
		4. RESNET shall electronically inform accredited QA Providers, Rating Software Providers, Rater Instructors/Assessors and HERS Raters of a QA Provider’s accreditation revocation within 30 business days after a decision by the committee.
	2. Probation/Suspension/Revocation Due Process

RESNET shall comply with the following due process procedures in considering any probation, suspension or revocation actions against an accredited Provider.

* + 1. RESNET may, at its discretion, initiate a probation, suspension or revocation action against an accredited Provider by providing the Provider written notice of the action. Such notice shall inform the subject Provider of the entire basis and justification for the action.
		2. Providers have the right to appeal a probation, suspension or revocation action in accordance with [Section 911](#_bookmark5) of this chapter.
		3. Upon the expiration of the notice to appeal period, failure to submit appeal documentation, as stipulated in [Section 911](#_bookmark5), or the conclusion of the appeals process in which a Provider’s appeals are unsuccessful. RESNET will remove the Provider’s name and any directory listing from the RESNET website and post their probation, suspension or revocation status on the RESNET website with other Providers and Raters who are under probation, suspension or revocation, and will, at a minimum, inform the EEP of their suspended/revoked status.

# Appeals

* 1. Procedures
		1. Appeals shall be made first to the RESNET Ethics and Appeals Committee, then to the RESNET Ethics and Appeals Panel.
		2. Within five (5) business days after receipt of an appealable action by RESNET, the Appellant shall notify the RESNET Executive Director of their intent to appeal. The Appellant shall then have ten (10) business days after the date of notice to submit appeal documentation to the RESNET Executive Director.
		3. Appeals shall include all relevant information and documentation and be sent in writing by electronic mail to the RESNET Executive Director.
		4. During the appeals process, all parties to the appeal may petition the RESNET Ethics and Appeals Committee for a stay of action upon expiration of the appeals process. A decision on the petition shall be rendered by the hearing body not later than ten (10) business days after receipt of the petition. In the event that additional information is requested, an extension of ten (10) business days may be applied in order to allow the appellant sufficient time to respond.
		5. Within twenty (20) business days of receiving the appeal, the Ethics and Appeals Committee shall render a decision on the appeal. In the event that additional information is requested, a one-time extension of ten (10) business days may be applied in order to allow the appellant sufficient time to respond.
		6. Within five (5) business days after receipt of the decision of the RESNET Ethics and Appeals Committee, the Appellant shall notify the RESNET Executive Director of their intent to appeal the decision of the RESNET Ethics and Appeals Committee to an independent hearing by a RESNET Ethics Appeal Panel. The Appellant shall then have ten (10) business days after the date of notice to submit appeal documentation to the RESNET Executive Director.
			1. A hearing shall be scheduled at a time convenient to all participants within a thirty (30) day period. At least a ten (10) business days' notice shall be provided.
			2. The Ethics Appeal Panel shall comprise three (3) voting members and one alternate who have not been directly involved in the dispute and who will not be materially or directly affected by the result of the decision made in the appeal.
			3. At least two (2) persons shall be selected by the Appellant and at least two (2) persons shall be selected by RESNET as represented by the RESNET Executive Director, the RESNET Standards Manager and a member of the RESNET Board of Directors who will not be materially or directly affected by the result of the decision made in the appeal.
			4. In cases where the Appellant does not wish to appoint any persons to the Ethics Appeal Panel, RESNET as represented by the RESNET Executive Director, the RESNET Standards Manager and a member of the RESNET Board of Directors shall appoint the members of the Ethics Appeal Panel.
			5. All decisions of the Ethics Appeal Panel shall be determined by a two thirds (2/3) majority. The Appellant shall have the burden of proof to demonstrate the fault of the RESNET Ethics and Appeals Committee decision. RESNET shall have the burden of proof to demonstrate that all actions taken were in compliance with the due process procedures of this standard.
		7. Within thirty (30) business days of the date of a hearing, the RESNET Ethics Appeal Panel shall render a written decision on the appeal. In the event that additional information is requested, a one-time extension of ten (10) business days may be applied in order to allow the Appellant sufficient time to respond.
		8. All parties to the appeal shall be informed by electronic mail of the decision.
		9. All appeals documentation received by RESNET shall be handled in strict confidence by RESNET staff, the Ethics and Appeals Committee and the Board of Directors.