



## **Background Screening Organization**

### **Accreditation Program Policies and Procedures**

Original Effective Date: December 22, 2009  
Current Revision Effective Date: December 2023

## **I. Mission Statement**

The Background Screening Organization Accreditation Program (BSOAP or the Accreditation Program) has been developed by, and is a program of, the Professional Background Screening Association (PBSA or the Association). The governing body for the Accreditation Program is the Background Screening Credentialing Council (BSCC or the Council).

The Accreditation Program advances professionalism in the screening profession through the promotion of thoughtful industry practices and legal compliance, the development of Standards that protect data subjects, the evaluation of organizations that apply for accreditation, and the awarding of accreditation to organizations deemed to meet the requirements of the BSOAP Standards.

These Background Screening Organization Accreditation Program Policies and Procedures (Policies and Procedures) apply to the Accreditation Program and to all organizations accredited by the Council (Accredited Organizations).

### **Purpose**

The BSCC of PBSA is established to act as the governing body for the BSOAP.

The BSCC will:

1. Develop and update the BSOAP Standard and supporting documentation that helps ensure quality in background screening.
2. Review the BSOAP Standard and make suggestions for updates based on legislative concerns, industry standards, external feedback and applicability to the overall program. Consider the input of key stakeholders and other members of the community of interest in developing new clauses or revising existing ones.
3. Perform other duties as outlined in the BSOAP Policies & Procedures.

## **II. Organization of the Council**

The PBSA Board of Directors will have oversight authority over the BSCC to ensure that all credentialing programs developed and operated by the Council are conducted in a fair and equitable manner. PBSA oversight authority will include a requirement that the operation and financial policies and procedures of Council shall be approved by the PBSA Board until such time that PBSA agrees to grant final approval authority for these Policies and Procedures to the Council. The Council will provide regular status reports to PBSA Board of Directors regarding all credentialing activities that are not subject to confidentiality protections. At the discretion of the PBSA Board, the Association's individual certificate programs may fall under the direction of the BSCC. During the application of the BSOAP Policies and Procedures, Council may engage legal counsel as necessary.

### **A. Composition of the Council**

The Council shall consist of a minimum of seven but no more than 13 members, with attributes as follows:

1. There shall be one public member who is:
  - a. An end-user or other individual who utilizes the screening profession (i.e., an individual in human resources, a staffing organization, or security professional). Such individual may, but is not required to, be an Affiliate member of PBSA;
  - b. not a Regular or Associate member of PBSA or of the screening profession;
  - c. not an employee, member of the governing board, owner or shareholder of or consultant to an organization that either is accredited or could apply for accreditation by the BSCC;
  - d. not a spouse, parent, child, or sibling of an individual identified in a), b); or c)
2. There shall be at least one Regular member of PBSA who is from an organization in the screening profession;
3. There shall be at least one member providing screening representation from outside the U.S.;
4. There shall be at least one member providing U.S. screening population representation;
5. There shall be at least one member representative from the tenant screening population of the Association;
6. There shall be at least one member representative from the Associate Member population of the Association;
7. The Chair will be one of the members of the Council;
8. The Chair of the Council will vote only to break a tie;
9. The Incoming Chair will be one of the members of the Council;
10. Additional members including the following:

Three current members of the Association's Board of Directors. These three Council members may also fulfill the requirements noted above in Sections II.A.2 - II.A.6. At all times the number of Council members who are also Association Directors shall be limited to three members.

11. Vacancies on the Council may be left open or may be filled at the discretion of the Chair in conjunction with the Board, so long as the minimum of seven members is maintained.
12. Any member of the Council who experiences a change in his or her employment must notify the Association's Executive Director in writing as soon as reasonably

possible. Such notice shall include; (a) the effective date of the change, (b) whether the individual intends to remain in the screening industry, (c) whether the individual would like to remain on the Council, (d) the individual's new position (when applicable). Upon the Council member's good faith request to remain on the Council, such Council member will retain his or her position on the Council for the duration of the "elected term". Council members in transition shall not be required to pay membership dues during a transition period. If at any time the individual does not wish to remain on the Council or becomes employed outside of the industry, s/he shall immediately notify the Executive Director in writing. It is possible under these circumstances that the Council could have a nonstandard composition during a transition period (e.g., more than one Council member from a single member company, however at no time shall there be more than three Association Directors serving on the Council as outlined in II.A. 10. above).

## **B. Qualifications for Membership on the Council**

1. No more than one representative from a company or related companies (parent company, subsidiaries, and affiliates) may serve on the Council at any given time, and
2. The Council's membership shall, to the maximum extent possible, reflect the diversity, in terms of geography and scope of operation, of the screening profession.
3. The Chair shall have served at least one year on the BSCC before assuming the role of Chair.

## **C. Nomination Process for Council Members**

1. The Chair will identify the need for Council member(s) and Incoming Chair roles as they arise and communicate the need to Staff.
2. Staff will post an open call for potential BSCC member candidates to all current BSCC members and PBSA members.
3. Staff will post an open call for potential Incoming Chair candidates to current BSCC members.
4. All responses will be returned to Staff.
5. Chair and Staff will review submissions to ensure BSCC Composition and Qualifications for Membership are met. If appropriate, Chair and Staff will work with the Leadership Development Committee and other PBSA contacts to identify prospects and/or to invite candidates.
6. Incoming Chair candidates will be presented to the BSCC for vote. New BSCC Members will be selected by the Chair.
7. Proposed Incoming Chair and new BSCC Member appointments will be approved by the PBSA Board of Directors as noted in the following Section D.

#### **D. Relationship with PBSA**

1. The appointment of members to the BSCC is contingent upon approval from the PBSA Board of Directors.
2. The Council, together with the PBSA Board, following public comment and response, as provided for in these Policies and Procedures, shall have the final decision-making authority to develop and revise Standards for the Association's credentialing programs and approve each credentialing process. The Council shall have the ability to make final decisions regarding the awarding of accreditation or certificate credentials.
3. The PBSA Board will have oversight authority over the Council to ensure that all programs developed and operated by the Council are conducted in a fair and equitable manner.
  - a. PBSA oversight authority will include a requirement that the operation and financial policies and procedures of the Council shall be approved by the PBSA Board until such time that PBSA agrees to grant final approval authority for these policies and procedures to the Council.
  - b. The Council will provide regular status reports to the PBSA Board regarding all activities that are not subject to confidentiality protections.
  - c. PBSA will provide Staff and financial support for credentialing programs. The Council will be expected to propose an annual budget for the operation of all programs. The PBSA Board will exercise final authority in approving such budgets and the accompanying fee schedules for the credentialing program(s).

#### **E. Orientation for New Members of the Council**

The yearly coordination of the orientation of new Council members shall be the responsibility of the Staff in conjunction with the Chair.

Information to be included in the orientations shall include, but not be limited to, overview of Policies and Procedures, Accreditation Standards, blank application materials, minutes of previous meetings, and various other reports/documents deemed necessary and appropriate to orient new Council members to their responsibilities and the operation of the Council.

#### **F. Dismissal from the Council**

Any member of the Council may be removed from Council by a two-thirds vote of the remaining Council members for engaging in any conduct contrary to the best interests of the BSCC. By exception to the voting requirement, a Council member may be removed in the case of an attendance policy violation, as outlined in G.8 below.

## **G. Roles and Responsibilities of the Council Members and the Chair**

The roles of all Council members are as follows:

1. Review each BSOAP Standard at least every three years;
2. Periodically review the goals and mission of the Council;
3. Periodically review all policies and procedures and propose changes in these documents to meet the ongoing needs of the Accreditation Program;
4. Periodically review accreditation fees and propose modifications as deemed necessary;
5. Proactively seek process improvements;
6. Vote (with the exception of the Chair) on accreditation decisions;
7. Participate in subcommittees of the Council;
8. Attend scheduled meetings: (Council members shall not have more than two unexcused absences per year, where an unexcused absence is any absence without notice to the Chair or Staff greater than four absences for any reason within the year are grounds for dismissal).
9. Review recommendations from the Ethics Committee of an Accredited Organization's alleged non-compliance with the Accredited Organization Code of Conduct or a BSOAP Standard and make a final determination;
10. Selection and oversight of BSOAP third-party Auditor.

The role of the Chair of the Council is as follows:

1. Call meetings of the Council;
2. Preside at meetings and prepare agendas in conjunction with Staff;
3. Serve as an official spokesperson for the Council;
4. Prepare an annual report summarizing the work of the Council;
5. Appoint chairs of Council's committees;
6. Along with Staff, review complaints brought against Accredited Organizations and work with the BSOAP BSCC Ethics Committee to suggest appropriate action, if warranted, to the Council; and,
7. Only vote to break a tie.

The role of the Incoming Chair of the Council is as follows:

1. Perform the duties of the Chair in the absence of the Chair; and
2. Perform such other duties as may be assigned by the Council.

#### **H. Terms of Office and Appointments**

1. Members shall serve two-year terms, with the option to renew the term based on the needs of the Council and the willingness of the member, with the support and discretion of the Chair/Incoming Chair;
2. There are no limits on the number of consecutive terms a Council member may serve;
3. The Chair, Incoming Chair, and Immediate Past Chair roles will each be a one-year term.

#### **I. Confidentiality and Conflicts of Interest**

Access by the Council members to the information submitted as part of the accreditation process shall be limited to only those specific responses and clauses which are needed to assess an Applicant's accreditation eligibility and/or those responses and clauses under appeal. All of the items of information submitted by an Applicant to the accreditation Auditor shall be kept confidential and accessible only to the Auditor and Staff unless released otherwise by the Applicant.

All Council members and committee members will sign a confidentiality and conflict of interest statement in the form determined by Staff. All Council members must agree to recuse themselves from consideration of any application or review where there is a personal or professional affiliation that might be perceived to compromise the impartiality of the Council member by notifying Staff or the Executive Director.

All information created or obtained during the review of an accreditation application may be used only by the Staff/Council member(s)/Auditor(s) in the conduct of their assessment activity and shall not be disclosed to any other individuals except when expressly authorized by the Council. All Applicant identifying information shall be redacted from any accreditation application materials provided to Council members; to the fullest extent possible, the Council's accreditation decisions shall be made on a "blind" basis, i.e., in a manner such that the Council members do not know the identity of the company under consideration.

#### **J. Committees**

The Council shall develop standing and ad hoc committees to achieve its mission and goals. The chair of each committee must be a Council member. The Chair of the Council shall appoint all committee chairs for a one-year term which may be renewed at the discretion of the Chair and willingness of committee chair.

Committee chairs appoint the members of their committees with the approval of the Chair. Except where indicated otherwise, committee membership may include professionals other than Council members. Standing committees shall include the following:

### **Ethics Committee**

The BSCC Ethics Committee is responsible for enforcement and review of the Accredited Organization Code of Conduct. Such review shall be on a regular basis and no less than every three years. The Ethics Committee is also responsible for reviewing issues whose subject matter falls within the Accredited Organization Code of Conduct, BSOAP Standard, or BSOAP Policies and Procedures and preparing a recommendation based upon its findings to the Council. Any other general ethical matters (those outside the scope of the BSCC) related to an Accredited Organization shall be referred to the PBSA Ethics Committee. The Ethics Committee shall be comprised of the Current BSCC Chair, BSCC Immediate Past Chair, PBSA Board Liaison or their respective designees, and the Executive Director of PBSA. The BSCC Ethics Committee may utilize additional outside resources as necessary, including but not limited to outside counsel. In the event the BSCC Ethics Committee is unable to resolve a matter or if a potential overlap exists between its jurisdiction and that of the PBSA Ethics Committee, it reserves the right to escalate it to the PBSA Ethics Committee for resolution.

### **Policies and Procedures Committee**

The Policies and Procedures Committee will review the Policies and Procedures at least every three years and make any recommendations to the Council. The Policies and Procedures Committee shall include at least one BSCC member and a subset of BSCC members. The Policies and Procedures Committee may utilize additional outside resources as necessary, including but not limited to outside counsel.

### **Accreditation Standard Committee**

The Accreditation Standard Committee will review each BSOAP Standard's clauses and Audit Criteria at least every three years and make any recommendations for revisions to the Council. The Standard Committee will be responsible for developing the interpretive guidance needed to explain a clause or criteria to potential Applicants or stakeholders. The Accreditation Standard Committee shall include at least one BSCC member and a subset of BSCC members. The Accreditation Standard Committee may utilize additional outside resources as necessary, including but not limited to outside counsel.

## **III. Council Operations**

### **A. Standard**

The Council is responsible for developing and updating the BSOAP Standards and supporting documentation to achieve the goals of the accreditation program. The BSOAP Standards shall be made up of clauses grouped into various sections.

Organizations must demonstrate conformity with all clauses in the Standard to achieve and maintain accreditation.

The process for review and approval of any new or updated clauses is as follows:

1. Initial Review/Recommendations for Change - The Standard Committee will review the Standard and make suggestions for updates based on legislative activity, industry standards, external feedback, and applicability to the overall program. The Committee's suggestions will be submitted to the Council for



review and approval. The Committee's suggestions which are approved by the Council will be presented to the PBSA Board of Directors for approval and then prepared for public notice. The changes will be documented or identified in such a manner as to be easily recognizable by the reader as changes to the Standard.

2. Post for Public Review/Comments. Sufficient public notice will be provided for any new or updated clause(s), and a period of at least 30 days will be required for public input on any proposed changes to a Standard or Audit Criteria ("Comment Period"). The primary contact for each PBSA voting member in good standing, together with non-member companies in the industry generally known to the Council, will receive a letter via first class or electronic mail outlining the Comment Period, the process for submitting comments and the process by which the Council will review and address comments, as well as directions on where and how to locate accreditation materials on the PBSA website.
3. Posting of Comments Received - Within five business days of the close of the Comment Period, Staff will publish all comments which have been received on the portion of the PBSA website dedicated to the BSOAP. Any comments that are delivered to PBSA after or outside of a Comment Period will be forwarded to the Council for review at the next scheduled Standard review cycle.
4. Response to Comments - Within 30 days of the close of the Comment Period, the Council will publish a written response to the comments on the portion of the PBSA website dedicated to the BSOAP. The response may include indication that specific clause(s) may be under review.
5. Council and Board Votes - Following the response period, the Council shall vote and make a recommendation to the PBSA Board of Directors for final Clauses. The PBSA Board of Directors shall review and execute a final vote on the matter.
6. Posting of Any New/Updated Standard - After preparing a final version of any of the clauses or associated Audit Criteria, the new Standard and Audit Criteria, if amended, will be posted on the PBSA website ([www.thepbsa.org](http://www.thepbsa.org)). Email notification of the posting will be made to each primary voting member of PBSA in good standing and all currently Accredited Organizations.

Upon approval by the Board of Directors, all Accredited Organizations will be notified of the changes. Accredited Organizations will have up to one year, or as specifically defined by the Council, from the date of notice or publication on the PBSA Website to conform and attest to conformity with any new Standard. Organizations in the process of seeking accreditation shall be given a specific amount of additional time to be defined by the Council to achieve conformity.

Interested organizations should refer to the PBSA website for a current copy of each BSOAP Standard.

#### **IV. Accreditation Policies & Procedures**

## **A. Jurisdiction**

The Accreditation Program as described herein is applicable to specific regions and disciplines and will be open to organizations which can demonstrate conformity to the clauses contained in the respective Standard. Accredited Organizations which have a presence in other countries or organizations which conduct other types of screening, other than for those which they are accredited, may not publicize or otherwise imply that they are accredited in any other jurisdiction, or for any other type of screening, than their granted accreditation(s).

## **B. Accreditation Process**

**The following steps are part of the BSCC accreditation process:**

1. The organization desiring to be accredited must obtain and review the BSOAP Standard and Audit Criteria to which they wish to be accredited. A current version of each BSOAP Standard and Audit Criteria is available at [www.thepbsa.org](http://www.thepbsa.org).
2. The applicant organization may apply for accreditation under a Standard where it meets eligibility requirements as follows:
  - a. The organization must have provided, for at least one year, services under the BSOAP Standard for which they seek accreditation.
  - b. The applicant organization must currently and regularly be engaged in the business of providing background, employment or employment-related screening services.
  - c. The applicant organization must comply with applicable BSOAP Standards, BSOAP Policies and Procedures, and all other relevant policies adopted by the Council, including without limitation, policies regarding the use of the Council's accreditation logos.
  - d. The applicant organization must not have any unresolved PBSA or BSCC complaints or grievances of any kind.
  - e. The applicant organization must not have any unresolved government action related to any BSOAP Standard.
3. The applicant organization must conduct a readiness review of its operations before submitting its application. The applicant organization should not submit its application until it believes it is in conformity with all of the BSOAP Standard Clauses and Audit Criteria and that it can document conformity in an acceptable fashion. Questions may be posed to PBSA Staff regarding the accreditation program, who will work with the BSCC to provide a response to the question, if applicable. Questions should not be directed to individual BSCC members nor the Auditor.
4. After the internal readiness review is complete, and the applicant organization

has deemed itself ready to proceed, they must complete and submit a Letter of Intent (LOI) and Application to Staff. For reaccreditations, no LOI is needed and only an Application is required. The LOI will signal confirmation that the organization understands the timelines and requirements of the accreditation process. The Application will be the official submission from the applicant organization that it is seeking accreditation. Each Application must be accompanied by a non-refundable application fee\* (see 3 immediately below), as found in *Fee Schedule*. The application fee will be applied to the overall fee determined by the auditor. It is not a fee in addition to the stated audit fee. If an Application is submitted without the fee, it will not be reviewed or put into process. Staff will review the Application and and:

1. Confirm to the applicant organization that they meet eligibility requirements, and
  2. Assigned a unique identifying number used on all subsequent audit letters, votes, discussions, or other matters presented to the BSCC. Or:
  3. Advise the applicant that they are not eligible for accreditation (\*if staff determines that the applicant is not eligible for accreditation the application fee will be refunded, this is the only instance in which an application fee may be eligible for refund).
5. When the Application is deemed to meet eligibility, Staff will also notify the applicant organization of the final accreditation fee to be paid. This fee will include any additional locations, and complexity fees, as well as the remainder of the accreditation fee. This fee must be paid in full within 30 days of notification of the Application's acceptance for the process to proceed. If fees are not paid within this timeframe, the audit will be deemed incomplete and closed and the applicant will need to begin anew. If after paying the final fee, but before the initial kickoff call with the auditor is conducted, an applicant organization notifies PBSA Staff in writing that it is withdrawing its accreditation application, 100% of the fees paid will be refunded, excluding the non-refundable application fee.
6. Once the Application and full payment are received, the Application will be sent to the Auditor and, a kickoff call will be held with the applicant organization to cover how to submit their desk audit materials.
7. The applicant organization will have a period of six months from the acceptance of their Application to submit their desk audit materials, which shall include an updated application form including any changes since the initial submission., If materials are not submitted by the deadline, the audit will be deemed incomplete and closed. The applicant organization will need to start the process anew should it wish to reapply for accreditation at a later date, including resubmission of the LOI, Application and payment of an additional non-refundable application fee. If the applicant organization chooses not to proceed after the kick off call has been held, or fails to comply with the stated guidelines, no part of the fees which have been paid will be refunded.
8. The Auditor will conduct a desk review of the materials submitted by the applicant organization. The Auditor may request clarification of materials provided or additional information regarding the applicant organization's conformity with specific clauses. This review will cover all audit attributes as included in the Standard.

9. If, at any time during the desk audit, the auditor determines that the applicant organization is not sufficiently prepared for the desk audit, or continuation of the process will not result in a successful virtual audit, the applicant organization will be advised of this, and at the applicant organization's discretion, either:

1. be assigned a complexity fee, per the *Fee Schedule*, in addition to the already submitted application fee if they choose to continue the process. The applicant organization will be required to resubmit their desk audit materials when they are complete and ready for audit.

**Or**

2. Organization may voluntarily withdraw its application. This would terminate the accreditation process, and no part of the fees will be refunded.
  - a. If the organization would like to pursue accreditation in the future, they would be required to resubmit anew. Organizations may re-apply for accreditation after a period of one calendar year from the time the audit is terminated, after which time the organization will be responsible for submitting a new application and following the same process, including payment of fees as an applicant seeking initial accreditation. If the organization chooses to resubmit the audit materials with a new application, additional complexity fees may apply if the auditor again determines that the applicant organization is still not prepared for the desk audit.

10. After the Auditor has completed the desk audit, the applicant organization will be notified the desk audit is complete and a mutually agreed upon date, within 60 calendar days, will be determined for a virtual visit at the applicant organization's facility. Extensions may be granted for cause at the discretion of Staff or the BSCC.

11. The Auditor will conduct a one to two day virtual audit at the applicant organization's primary operating center and additional location(s) as determined at the discretion of the Auditor and Staff, if other location(s) are providing services to which the applicant organization is applying for accreditation. The Auditor will validate conformity with the applicable BSOAP Standard and Audit Criteria and verify the accuracy of materials submitted as part of the application and desk audit process.

\*NOTE: Audit locations may include U.S. locations and outside U.S. locations providing services under an applicable Standard. In extenuating circumstances, Auditor and PBSA Staff may determine that additional site audits are necessary. Fees for any additional site locations will be charged according to the *Fee Schedule* and must be paid before the audit proceeds.

12. Applicant organization must make available, by digital platform, representatives

from all of the applicant organization's pertinent locations. Each representative must be authorized to certify, and demonstrate to the satisfaction of the Auditor, that the applicant organization is in conformance with the relevant BSOAP Standard.

If applicable, the Auditor will make an effort to review all necessary documentation online during the virtual audit process to avoid taking or viewing proprietary information unsupervised.

13. The Auditor will prepare an initial Audit Findings Report which will be made available to the applicant organization within 14 calendar days of the conclusion of the site visit.
  - i. If the Auditor identifies any Opportunities for Improvement (OFI's), the applicant organization has 14 calendar days to respond to the Auditor with any additional information or documentation which addresses the concerns raised by the Auditor.
  - ii. If the Auditor identifies any Non-Conformities, the applicant organization shall have 14 calendar days to respond and affirm its intent to continue with accreditation. Following review and consideration of any additional information provided by the applicant organization, the Auditor will prepare a final Audit Findings Report. These timelines apply whether the applicant organization is applying for its initial Accreditation, its Reaccreditation, or its Interim Surveillance Audit (ISA).
  
14. Applicant organization identifying information shall be redacted and such redacted version of the Auditor's final Audit Findings Report, will be prepared by Staff and submitted to the Council for review. The Council will review the redacted Audit Findings Report and render a decision regarding the application. In the event of an applicant organization with one or more non-conformities (including those non-conformities that may have been corrected) with the relevant BSOAP Standard, as determined by the Audit Report and reviewed by the BSCC, the applicant organization will either be granted 60 calendar days (the "remediation period") to demonstrate conformity, or be subject to denial of accreditation as provided in Section IV.E. A complexity fee may be assigned at the discretion of the auditors, staff or the BSCC. The remediation period begins the day PBSA notifies the applicant organization. The decision to grant a remediation period, or to deny Accreditation, will be at the sole discretion of the BSCC and will be based on the number and severity of any non-conformities. This remediation period, if granted, will also apply to any re-accreditation and allow that organization to continue to hold itself forth as Accredited until, or unless, a final decision to deny Accreditation is made. In the event that a remediation period is granted, the Applicant organization must successfully demonstrate conformance with all Sections of the BSOAP Standard, including those identified as non-conforming, in a manner prescribed by the Auditor in conjunction with the BSCC by the end of the remediation period. . Following the remediation period, the Auditor will update the Audit Findings Report for the BSCC to review and render a decision regarding the granting of accreditation. This decision will be forwarded to the applicant organization via mail or email within 14 calendar days of the conclusion of the Council meeting at which the decision is rendered. No verbal response information will be provided by the Council or Staff regarding Council accreditation decisions and the applicant organization will not receive a copy of

this report before it is sent to the Council. The Council will review the redacted updated final Audit Findings Report and render a decision regarding the application. In the event of an applicant organization with one or more non-conformities (including those non-conformities that may have been corrected) with the relevant BSOAP Standard, as determined by the Audit Report and reviewed by the BSCC, the applicant organization will either be granted one final 30 calendar day term (the “final remediation period”) to demonstrate conformity, or be subject to denial of accreditation as provided in Section IV.E. The final remediation period begins the day PBSA notifies the Applicant organization. The decision to grant a final remediation period, or to deny Accreditation, will be at the sole discretion of the BSCC and will be based on the number and severity of any non-conformities. This final remediation period, if granted, will also apply to any re-accreditation and allow that organization to continue to hold itself forth as Accredited until, or unless, a final decision to deny Accreditation is made.

15. Accredited Organizations may be granted accredited status for a period of five years, provided they successfully complete an Interim Surveillance Audit (ISA) during their third year of accreditation (see below). The dates for the Interim Surveillance Review and Reaccreditation shall be from the original date of accreditation for the organization. An Accredited Organization must comply with the BSOAP Accredited Organization Code of Conduct and, with the BSOAP Standard. If already accredited to an additional BSOAP or PBSA Standard, subsequent accreditations will require continued compliance with the Accredited Organization Code of Conduct and to the additional relevant Standard(s), until the next scheduled re-accreditation event. Accredited Organizations will be provided with a certificate, an approved press release for media distribution, and graphics/art work with the BSCC accreditation logo, including an explanation of limitations and proper use of this mark. Accredited Organization must execute a limited use licensing agreement pertaining to use of the logo for the duration of accreditation prior to the use of any mark. If an Accredited Organization undergoes a change identified in Section O, it must conform with all such requirements identified therein. Application, fee, and materials must be received by Staff and Auditor on or before the submission deadline noted.
16. If accreditation is denied, the applicant organization has the right to appeal. See Attachment 1 for a flowchart of the accreditation process.
17. Prior to the end of the third year of accreditation, the Accredited Organization must successfully complete an Interim Surveillance Audit (ISA). The Accredited Organization must submit written information for the ISA in order to ensure ongoing conformity with any BSOAP Standard and Audit Criteria to which they are accredited. The ISA will consist of a desk review emphasizing the provision of evidence that the Accredited Organization remains in conformity with the relevant BSOAP Standard, a review of progress on all recommendations from the initial decision, and identification of any material changes within the Accredited Organization. Staff will send a reminder to the Accredited Organization at the end of the second year of accreditation. Submission of an ISA application and ISA fees must be received approximately six months prior but no later than 60 calendar days prior to the end of the third year of the accreditation cycle. See Attachment #4 for a flowchart of the *3-Year Interim Surveillance Audit process* and Form #2 for the ISA application.

### **C. Fees and Charges**

Accreditation application fees, as shown on Attachment 2, *Fee Schedule*, are determined by the Council in consultation with the PBSA Board of Directors.

. Fees are not refundable after the commencement of substantive work by the Auditor, as determined by PBSA Staff. This would typically be considered after the initial kickoff call with the audit has occurred.

1. During the third year of accreditation, the Accredited Organization must undergo an Interim Surveillance Audit. Accredited Organizations must pay a non-refundable fee for this audit as provided on the *Fee Schedule*.
2. If, at any time during an Accredited Organization's period of accreditation, the Council determines that an additional audit of the Accredited Organization is necessary, the Council may require an audit and impose a Periodic Surveillance Fee, as defined in *Fee Schedule*.
3. All Accredited Organizations desiring to renew their accreditation shall apply during their fourth year of accreditation. A reaccreditation fee will be payable as outlined in B.4. above. The reaccreditation application process is identical to the initial accreditation application and audit with the exception of the need for an LOI.
4. The fees are payable to PBSA and do not include Auditor travel costs reimbursed directly to Auditor, nor the costs that an Accredited Organization might incur in modifying its services or programs to comply with the BSOAP Standard.
5. In some instances additional fees may be incurred (for example in instances where the appeals panel determines that additional resources such as audit or legal services are necessary). Should travel be required to resolve the appeal, any travel (transportation, lodging, per diem) for on-site review by auditor is separate and shall be paid directly by the organization. The BSCC will make every effort to advise of additional fee(s) as soon as practicable.
6. Unscheduled visits, which may be virtual, may be conducted in situations described in Section G. No fees are charged to an Accredited Organization for unscheduled visits unless there are auditor travel fees.
7. An applicant organization may be subject to additional fees based upon the circumstances of an audit. The applicant organization will be notified in advance of the additional fee(s) being incurred, and all additional fees charged will be due upon receipt.

### **D. BSCC Review Cycles**

Council meetings will generally be held monthly. Due to the confidential nature of the proceedings, Council meetings are not open to the public unless requested and approved. Applicant organization accreditation decisions will be made upon

presentation of the redacted version of the Auditor's final Audit Findings Report to the Council.

## **E. Accreditation Decisions**

The following accreditation decisions may be rendered regarding an applicant organization:

1. Accreditation - is granted for a period of five years to organizations that have demonstrated conformity with all clauses of the applicable BSOAP Standard, subject to successful completion of the Interim Surveillance Audit during the third year of accreditation and any additional inquiries from the BSCC or Auditor as necessary. An applicant organization not providing all services in a BSOAP Standard may be granted accreditation if it demonstrates it has addressed all policies and procedures should it determine to provide all services covered by the BSOAP Standard. An applicant organization not providing all services covered by a given BSOAP Standard may nonetheless achieve accreditation by demonstrating conformity with all provisions of the Standard as they relate to the covered services they do offer.
2. Accreditation Denial - may be rendered for applicant organizations that fail to demonstrate conformity with one or more clauses of any section within the BSOAP Standard. The applicant organization will be provided with information describing the non-conformities. Applicant organizations may re-apply for accreditation after a period of one calendar year, at which time the applicant organization will be responsible for submitting a new application and following the same process, including payment of fees, as an applicant organization seeking initial accreditation.
3. Deferral of Accreditation Decision– may be made if the results of the audit do not provide evidence that conformity has been achieved. In these cases, the BSCC may request an audit of a larger sample and/or propose an additional timeframe, aforementioned remediation period(s), during which the applicant organization must demonstrate conformity.

## **F. Reaccreditation Process**

BSOAP accreditation is for five years. To ensure ongoing conformity with the BSOAP Standard, an Interim Surveillance Review will take place in the third year of the accreditation cycle. This review, is designed to confirm the Accredited Organization maintains conformity with the BSOAP Standard. Application, fee and materials must be received by Staff and Auditor on or before the submission deadline noted. The dates for the Interim Surveillance Review and Reaccreditation shall be from the original date of accreditation for the organization.

An Accredited Organization seeking reaccreditation for an additional five-year term must do the following:

1. Application to Reaccredit

An Accredited Organization must submit a reaccreditation Application and non



refundable payment no later than eight months prior to the expiration of its current accreditation. Upon acceptance of the Application, the organization will be notified of the remaining fees to be paid. The reaccreditation application process includes a desk review and virtual audit(s) and all desk audit materials must be submitted no later than six months before the expiration of the original accreditation date. See Attachment #3 for a flowchart of the five-year reaccreditation process. Refer to the *Fee Schedule* for costs.

2. Evidence of Non-Conformity and Opportunity for Improvement

If evidence of a non-conformity is identified at any audit, the Accredited Organization may be provided an opportunity to submit a plan of correction with appropriate timelines (see Section IV.B.15). This will be based upon the severity and frequency of the non-conformity and the relationship to any previous non-conformities identified.

3. Remediation Period for Identified Non-Conformities

Non-conforming Accredited Organizations may be offered a remediation period as specified in Section IV.B.14, or as determined by the Council. Prior to reaccreditation, the organization must provide evidence of conformance to the satisfaction of the Council. Accredited Organizations that fail to resolve non-conformities may have their accreditation denied or revoked.

4. Reaccreditation Dates

The original date of accreditation will follow the application organization throughout its time as an accredited organization (i.e. if an application is originally accredited on January 1, 2030, it will be due for reaccreditation on January 1, 2035 regardless of any remediation period(s) granted or delays in the audit).

**G. Additional Audit Activity**

The Council may require additional audit activity based on a complaint or inquiry. These may include scheduled or unscheduled site visits, requests for additional documentation, or proof of conformity.

**H. Voluntary Withdrawal of Accreditation**

Accredited Organizations may withdraw from the Accreditation Program at any time. A signed letter by an authorized officer of the Accredited Organization must be sent notifying Staff of the Accredited Organization's intent to withdraw. Upon notice of intent to withdraw, Accredited Organization shall work with Staff to ensure all use of BSOAP marks and claims of accreditation cease. The withdrawal shall be effective as of the date indicated in the notification, unless otherwise specified. No accreditation fees are refunded in conjunction with voluntary withdrawals of accreditation. The organization remains liable to pay any fees due and owing to the Council as of the date of voluntary withdrawal. Any Accredited Organization with outstanding fees at the time of withdrawal shall not be permitted to re-apply for accreditation until any outstanding fees have been satisfied.

## **I. Use of Logo**

### **1. Authorized Use of Logo**

Only Accredited Organizations are authorized to use the BSOAP Accreditation Logo. An Accredited Organization may only use the approved logo in the form and manner as specified in the Statement of Use for BSOAP Logo, available via the PBSA website or Staff. No color and/or design elements may be altered in any way. Further, the logo may be used only by the Accredited Organization itself and may not be used by affiliated organizations, alliance partners or any other entity that has not been granted accreditation by the Council.

### **2. Misuse of Logo**

The BSOAP Accreditation Logo is the sole and exclusive property of PBSA and may be used only by PBSA and Accredited Organizations. Misuse of the BSOAP Accreditation Logo by any person or entity is unlawful and in violation of, inter alia, the Lanham Act. Misuse of the BSOAP Accreditation Logo is subject to civil actions to the full extent of the law and further sanctions as prescribed by PBSA.

## **J. Complaints Regarding Accredited Organizations**

The Council will not intervene in general disputes between Accredited Organizations and their stakeholders, their clients, or other organizations. Council intervention is only considered if a concern is raised regarding an Accredited Organization's conformity with a BSOAP Standard or violation of the Accredited Organization Code of Conduct.

### **1. Introduction**

- a. All Accredited Organizations agree to comply with the Accredited Organization Code of Conduct, the BSOAP Standard to which they are accredited, and to be bound by and subject to these Policies and Procedures. Violations of the Accredited Organization Code of Conduct or the relevant BSOAP Standard may result in sanctions imposed under these Policies and Procedures.
- b. Multiple alleged violations of the Accredited Organization Code of Conduct or the BSOAP Standard may be consolidated, at the discretion of the Chair of the Council's Ethics Committee, into a single complaint (as such term is defined below).
- c. These Policies and Procedures shall apply to all complaints, allegations, inquiries, or submissions involving an alleged violation of the Accredited Organization Code of Conduct or relevant BSOAP Standard (hereafter referred to as "Complaint(s)") received by Staff or the Council about an Accredited Organization.
- d. The Council reserves the right to refer Accredited Organization

conduct to federal, state, or local government regulatory or law enforcement organizations when the Council deems it appropriate. Persons bringing complaints to the Council are not entitled to any relief or damages by virtue of this process. Complaints of a commercial nature (such as claims alleging defamation or unfair business practices) will not be considered by the Council unless they also involve alleged violations of the Accredited Organization Code of Conduct or one or more clauses of a relevant BSOAP Standard.

- e. In the event of legal or regulatory proceedings related to the complaint, the Council reserves the right to suspend any Council proceedings until the completion of the legal or regulatory proceeding.

## 2. Enforcement of Policies and Procedures in the case of a Complaint

- a. The Council is responsible for these Policies and Procedures; however, the Council's Ethics Committee (the "BSCC Ethics Committee") is delegated to enforcement.
- b. The Chair of the BSCC Ethics Committee (the "Chair") is specifically responsible for ensuring that these Policies and Procedures are enforced consistently and objectively.
- c. All BSCC Ethics Committee members, Council members, Staff, and other individuals engaged in investigations, or involved in making decisions on behalf of the Council with respect to any Complaint under these Policies and Procedures, shall be indemnified, held harmless, and defended by PBSA against any liability arising from such activities to the extent permitted by law, provided that such individuals (i) acted in good faith, with reasonable care, without gross negligence or willful misconduct, and (ii) did not breach any fiduciary duty owed to PBSA. No individual who has any personal or private business involvement in, or connection to, the alleged misconduct or any other conflict of interest shall be permitted to participate in the Complaint process. Any such involvement must be immediately disclosed by the individual to the BSCC Ethics Committee.

## 3. Complaints

- a. Complaints shall be made to Staff who shall acknowledge receipt and transmit to the Chair of the BSCC Ethics Committee or to any member of the BSCC Ethics Committee (collectively, "Complaint Recipients"). Complaints must be made in writing alleging a violation of the Accredited Organization Code of Conduct or the BSOAP Standard. The complaint may identify the person (Complainant), if such person is willing to be identified. A Complainant should be aware that due to the nature of some complaints, their identity may become known, even if the Complainant wishes to remain anonymous. A Complaint shall contain a comprehensive description of the nature and scope of the alleged violation and a citation to the particular section(s) or clause(s)

of the Accredited Organization Code of Conduct or relevant BSOAP Standard which was violated. All evidence received by a Complaint Recipient, or of which a Complaint Recipient becomes aware, shall be subject to mandatory written referral to the Chair of the BSCC Ethics Committee.

- b. Direct or indirect retaliation of any kind by anyone, including without limitation PBSA, its officers and directors, the Council, Staff, members, or agents, against any Complainant is strictly prohibited. This prohibition on retaliation shall be enforced strictly by the Council and the PBSA Board of Directors. Complaints or statements made which are knowingly false or are made with a reckless disregard as to the truthfulness of the same, are strictly prohibited. The BSCC will review any circumstances that give rise to any credible evidence brought before them to suggest that this prohibition is violated and will make a recommendation to the PBSA Board based on the same. In the event the BSCC or the PBSA Board determines that a violation of this prohibition has occurred, the individuals and companies responsible for the violation may be subject to appropriate disciplinary action up to and including revocation of accreditation, or expulsion from the Association.
- c. Upon receipt of the Complaint the BSCC Ethics Committee may conclude, that the Complaint: 1) contains facially unreliable or insufficient information, or 2) is patently frivolous or trivial. In such cases, such Complaint shall be dismissed without prejudice by the BSCC Ethics Committee. The BSCC Ethics Committee may defer to legal counsel for legal review prior to finalizing decisions of this matter. All such preliminary dispositions of Complaints shall be immediately reported in writing to the Chair of the BSCC. A copy of such disposition shall also be reported to the PBSA Executive Director.
- d. If a Complaint is preliminarily deemed potentially actionable, the Chair of the BSCC Ethics Committee shall see that written notice is provided to the Accredited Organization, advising Accredited Organization that an investigation is being initiated.

#### 4. Review of Complaint

- a. For each potentially actionable Complaint, the BSCC Ethics Committee shall authorize an investigation. The BSCC Ethics Committee may be assisted by Staff, provided that no Staff conflict of interest exists. The BSCC Ethics Committee may defer any of its duties herein to BSCC legal counsel. Both the Complainant and the Accredited Organization which is the subject of the charge, also may be contacted by the Committee, or its agents, for additional information with respect to the Complaint. Such persons and entities shall provide accurate and complete information in response to the BSCC Ethics Committee's requests. In addition, the BSCC Ethics Committee or BSCC legal counsel may contact other individuals having knowledge of the facts.

- b. Should the Complainant, or a representative of the Accredited Organization charged with a violation, be a member of the BSCC Ethics Council, such person may not participate in the BSCC Ethics Council's consideration of or determination with respect to the Complaint.
- c. If after review the BSCC Ethics Committee recommends that sanctions be imposed, Staff shall notify the Accredited Organization and send Accredited Organization a copy of the violation and the BSCC Ethics Committee's report. Staff shall advise that an investigation has been conducted and that a hearing will be held, providing the Accredited Organization with the proposed date and time for such hearing. The Accredited Organization may submit in writing to the BSCC Ethics Committee information contesting or relevant to the violation within 30 calendar days of receipt of the notice. The Accredited Organization shall have the right to review evidence to be presented at the hearing and that it may be represented by legal counsel. The Accredited Organization shall be sent a copy of these Policies and Procedures.
- d. All investigations and deliberations of the BSCC Ethics Committee are to be conducted in strict confidence, except when compelled by law or to parties essential to the review and investigation of the alleged misconduct. All investigations and deliberations of the BSCC Ethics Committee shall be conducted objectively, without prejudgment of any kind. An investigation may be directed toward any aspect of a Complaint that is relevant or potentially relevant.
- e. The hearing may be held by telephone or video conference, at the discretion of the BSCC Ethics Committee. The BSCC Ethics Committee shall, determine the rules of evidence and for oral presentations, as advised by PBSA's legal counsel. Written statements may be accepted as evidence, and witnesses may appear. The Accredited Organization may be represented by legal counsel at their sole discretion and expense.
- f. At any time during this process, the BSCC Ethics Committee may engage in discussions with the Accredited Organization for the purpose of achieving an acceptable resolution. Any such resolution is subject to approval by the Council.

##### 5. Determination

Upon completion of its investigation and the hearing, the BSCC Ethics Committee shall determine by majority vote whether there has been a violation of the Accredited Organization Code of Conduct or the relevant BSOAP Standard; and whether the BSCC should impose sanctions. The BSCC Ethics Committee shall provide a written summary of its findings, investigation, and recommendation to the Council for approval.

The Council may accept, reject or modify the BSCC Ethics Committee's

determination either with respect to the determination of a violation or the recommended sanction to be imposed, or may send the matter back to the BSCC Ethics Committee with instructions for further deliberations or actions. The Accredited Organization will not participate in the Council's deliberations.

The Council's decision shall be made by a majority vote at a meeting at which a quorum is present. If the Council agrees that a violation has occurred, the determination and imposition of a sanction shall be communicated in writing to the Accredited Organization; the Council's decision shall not be communicated to the Complainant.

If no violation has been determined, the Complaint shall be dismissed without prejudice and notice shall be provided to the Accredited Organization.

#### 6. Communication of Results to Organization

Accredited Organizations subject to complaints will receive written notification for the following:

- a. Violation: Written notice of the findings, determination and imposition of sanction(s).
- b. No Violation: Written notice that no violation has occurred, and the complaint is dismissed without prejudice.

#### 7. Sanctions

- a. The Council may impose sanctions upon an Accredited Organization determined to have violated the Accredited Organization Code of Conduct or a relevant BSOAP Standard. Sanction(s) must reasonably relate to the nature and severity of the violation, focused on correcting the conduct and deterrence of the same or similar conduct by others.
- b. Potential sanctions may include one or more of the following:
  - (1) Written reprimand to the Accredited Organization;
  - (2) If the Accredited Organization receiving the sanction is represented on the Council, such representative's membership on the Council may be suspended for a designated period;
  - (3) A remediation period, during which time the organization remains accredited;
  - (4) Suspension or revocation of accreditation for a designated period of time (combined with any remediation period, if desired);
  - (5) Loss of accreditation status and/or revocation from re-applying for accreditation;
  - (6) Recommendation by the Council to the PBSA Board of suspension from membership in, or permanent expulsion from,

PBSA membership.

- c. Sanctions shall not be imposed until the time for an appeal has expired or, in the event of an appeal, until the Organization has fully exhausted its appeal rights.
- d. If one or more sanctions are imposed, the Complaint shall be deemed to have been disposed of with prejudice. When suspension or revocation of accreditation is imposed, the Accredited Organization's name shall be removed from the publicly available list of Accredited Organizations, and such organization shall cease using or displaying the BSCC Accreditation Logo and shall not make claims to be an Accredited Organization during the period of suspension or revocation.

## 8. Resignation

If an Accredited Organization, which is the subject of a Complaint, voluntarily withdraws its accreditation during the Complaint process, the Complaint shall be dismissed without prejudice and without any further action. The organization may not re-apply for accreditation for a period of one calendar year from the effective date of its resignation. Staff shall communicate the organization's voluntary resignation to Council at such time as the organization re-applies for accreditation for Council review to determine if the organization is eligible to seek accreditation. See Attachment #5 for the *Complaint/Grievance Process*.

## **K. Appeals of Council Decisions**

### 1. Appealable Decisions

Appealable Decisions include the following:

- a. Denial of eligibility for accreditation
- b. Denial of accreditation
- c. Denial of reaccreditation (whether arising during a standard five-year renewal period or as the result of a merger/acquisition/change of control)
- d. Sanctions related to accreditation
- e. Revocation of accreditation

### 2. Written Request Required

Any Accredited Organization wishing to appeal a decision must submit a written request to Staff within 30 calendar days of the Accredited Organization's receipt of the written decision of Council. An Accredited Organization appealing a revocation of accreditation shall have an additional 30 calendar days to submit appeal documentation. The written documentation should specify the grounds on which the appeal is based. An Appeal Fee, as defined in *Fee Schedule*, is due and payable with the written appeals request. **The Appeal Fee will be refunded only if the ruling of the appeal is in favor of the Applicant.**

### 3. Appeal Process

The following process applies for all appeals. See Attachment #6 for a flowchart of the *Appeal Process*.

- a. Appeals Panel – The PBSA Executive Director will appoint an Appeals Panel consisting of three individuals. This Panel shall consist of one current member of the PBSA Board of Directors not currently on the Council, and two former members of the Council. No member of the Appeals Panel may have a conflict of interest with the Accredited Organization filing the appeal or the Complainant. The Appeals Panel may not include the Council member responsible for the initial review of the Audit Findings Report. The Appeals Panel will render a written decision within 60 calendar days of its appointment.
- b. Grounds for Appeal - Appeals may assert procedural error by the BSCC Ethics Committee or the Council or that the decision of the Council is not supported by sufficient evidence. Appeals regarding the content of the relevant BSOAP Standard will not be accepted; however, appeals regarding conformity with the relevant BSOAP Standard are acceptable.
- c. Appeal Decisions - The Appeals Panel may uphold the Council's decision or may refer the matter back to the Council for reconsideration in light of the Panel's findings regarding procedural or substantive error. A written copy of the Appeals Panel decision shall be sent to the appealing Accredited Organization. Decisions of the Appeals Panel are final.

## **L. Records**

### 1. Ownership of Records

All information submitted by an Applicant Organization or Accredited Organization related to these Policies and Procedures, any BSOAP Standard, or the Accredited Organization Code of Conduct becomes the property of the Council.

### 2. Retention of Records

Staff will maintain the following Accreditation Program records for Accredited Organizations for the period of accreditation or date of a decision to withdraw, deny or revoke accreditation plus seven years:

- Initial applications and self-evaluation materials;
- Reaccreditation applications and self-evaluation materials;
- Records of remediation decisions;
- Records of revocation of accreditation decisions or withdrawal of accreditation;
- Appeals records; and
- Archives of the BSOAP Standards and Audit Criteria with effective



dates.

Administrative records will be kept including the following:

- Minutes of Council meetings;
- Copies of all BSOAP Policies and Procedures; and
- Documentation of development and editing of clauses of the BSOAP Standard.

All Council members, Auditors and Staff shall be required to sign confidentiality statements. All records will be securely retained. Staff or volunteers who are not working on the Accreditation Program will not have access to any Accreditation Program materials.

#### **M. Release/Disclosure of Accreditation Information**

##### 1. Status of Accreditation

Staff will provide the names of all Accredited Organizations to anyone who enquires. The information is also published on the PBSA website. Staff will not confirm nor deny that a specific organization is involved in any phase of the accreditation process prior to its achieving accreditation.

The content of accreditation reviews is confidential. This information will only be disclosed to the Accredited Organization to which such information relates unless required by a court order, subpoena, or otherwise to the extent required by law. The Council will attempt to provide prior notice to the affected organization in the event of such a disclosure.

##### 2. Redaction of Proprietary Information

Documents submitted to the Staff or Auditor may be marked as “Proprietary and Confidential” by an Accredited Organization or Applicant Organization. The Accredited Organization or Applicant Organization may redact any proprietary information it deems necessary. However, the redaction of information may not be of such magnitude as to alter the Auditor’s ability to properly review and assess the organization’s preparedness for accreditation.

#### **N. Assistance during the Accreditation Process**

Each BSOAP Standard clause includes Audit Criteria to assist Applicants in preparing for audit. All questions should be directed to Staff and shall not be directed to individual Council members or Auditors.

#### **O. Circumstances Requiring Notice by Accredited Organizations**

The situations described below require an Accredited Organization to provide notice to Staff and may require payment of fees, as outlined in the *Fee Schedule*, audit, or evidence of conformity with the Standards.

##### 1. Change of Legal Name and/or Logo

In the event an Accredited Organization undergoes a logo change caused by a legal name change, d/b/a filing change or rebranding effort, the Accredited Organization is required to provide written notice of the same to PBSA Staff within 90 days of the effective date of the change. See Form 5.0 Notice of Logo and/or Name Change. Upon receipt of that notice (together with the updated logo for the newly named Accredited Organization), PBSA Staff will update the Accredited Organization's records accordingly. Review and approval of the BSCC are not required in this instance.

## 2. Change of Ownership and/or Control

The following steps are required when an Accredited Organization is going through a Change of Ownership or Control due to a merger, acquisition, or other legal transaction:

- **Initial Notice within 90 calendar days of Closing Date** - If an Accredited Organization undergoes a change of ownership or control as the result of merger, acquisition or other legal transaction, the Accredited Organization **must notify Staff within 90 calendar days after the change of control event via approved written form transmitted via US Mail or electronic mail to Staff.** See Form 6.0 - "Notice of Merger/Acquisition/Change of Control Review."
- A merger or acquisition where **both parties are currently accredited** will result in the continued accreditation of both organizations. If the branding and / or operations will be merged, they will remain accredited until the earlier of the next scheduled reaccreditation audit of either organization, at which time the auditor will do a full audit of both organizations as a merged organization, unless the parties wish to maintain separate accreditations. If the branding and operations of the parties will remain separate, each organization will follow their existing ISA and reaccreditation schedules.
- If the acquiring organization is **not accredited** and the acquired organization is accredited and will be maintaining operational control and their own branding, they will be granted continued accreditation status without prejudice or conditions and will follow their existing ISA and reaccreditation schedule. If the non-accredited acquiring organization will be absorbing operations and/or eliminating the acquired organization's branding, neither organization will be permitted to hold itself out as accredited (in this instance, the merged organization will be required to go through the complete initial accreditation procedure.)
- If an accredited organization acquires an organization that is **not accredited**, the acquired organization will not be able to hold itself out as accredited under its original brand. If the acquired organization will be absorbed into the accredited organization's operational control and branding, the acquiring organization will follow their existing ISA and reaccreditation schedule.

### 3. Notice of Legal Actions

If an Accredited Organization has been the subject of litigation or a governmental investigation which includes alleged violation(s) related to one or more clauses of the BSOAP Standard, they must provide written notice to Staff within 30 calendar days of the resolution, if the resolution is a finding of guilty, settlement, consent order or other action. Such written notice shall include a detailed description of the allegation, review, and confirmation of compliance with each BSOAP Standard, and shall note any distinctions or changes that have occurred due to the aforementioned allegation. Failure to provide such notice may result in suspension of the accreditation of the Accredited Organization, which may result in revocation if not resolved.

### 4. Upon Receipt of Notice

Staff shall review and determine if Auditor action is needed, upon the receipt of an Accredited Organization's notice. If so, the Auditor will determine the next steps, which may include a desk or virtual audit or additional information from the Accredited Organization. After completing its review, the Auditor will submit a written report to the Council. The final decision of the Council will be provided to the Accredited Organization, which must comply with any resulting directives. The Council has the authority to suspend, revoke or grant a continuation of the accreditation of the Accredited Organization at any time during the proceedings. For up to one year from the conclusion of the proceedings, the Council may require an interim surveillance audit or virtual audit. Staff or the Council may also, in their sole discretion, determine the above process may be completed through the use of legal counsel instead of the Auditor.

## **P. Glossary of Terms**

1. Accredited Organization – an entity who has been awarded Accreditation by the Background Screening Credentialing Council.
2. Accreditation - A conformity assessment process through which an organization or organization uses experts in a particular field of interest or discipline to define or recognize standards of acceptable operation/performance for organizations/entities and measure conformity with those standards.
3. Applicant Organization – An organization which is seeking accreditation from the Council; once accreditation is received, the Organization becomes an Accredited Organization.
4. Organization Code - The Accredited Organization Code of Conduct with which all Accredited Organizations must abide.
5. Audit Criteria - The criteria used to determine conformity with a clause of any BSOAP Standard.
6. Auditor – Third party partner engaged by PBSA to complete the desk and virtual audit requirements of the BSOAP program, as well as act as consultant on various

notifications and change notices required under the BSOAP.

7. Board - PBSA Board of Directors.
8. BSOAP - Background Screening Organization Accreditation Program.
9. BSCC - Background Screening Credentialing Council - the governing body for the program.
10. Change of Control - A legal event resulting in a change of legal, financial, decision-making and/or operational control of a legal entity.
11. Clause - Each component of the BSOAP Standard describing criteria with which to conform in order to achieve accreditation.
12. Council - BSCC or Background Screening Credentialing Council
13. Data Subject(s) - the term used for the individual referred to in a consumer report and background screening process. Localized terms may include consumer, applicant or candidate.
14. End User - The entity who uses the screening information supplied by the screening entity.
15. Final Remediation Period – a final set amount of time provided by the BSCC during the accreditation process to remedy any nonconformities identifying during the onsite audit process. This would come after the first remediation period in the case where the organization needs additional time to demonstrate conformity.
16. Letter of Intent - Letter to be submitted by an Organization as the first step and indication of its intent to apply for accreditation. As this applies to a Merger/Acquisition/Change of Control, it is the Letter to be submitted by an accredited organization as the first step after notification of Merger/Acquisition/Change of Control that indicates their intent to continue their ongoing accreditation through the merger/acquisition process and beyond.
17. Mergers & Acquisitions - Legal transactions involving corporate mergers and/or acquisitions (whether of stock or assets) in effect resulting in the consolidation of companies. To differentiate the two terms, a merger is the combination of two companies to form one, while an acquisition involves one company taking over another company.
18. Remediation Period – a set amount of time provided by the BSCC during the accreditation process to remedy any nonconformities identifying during the onsite audit process.
19. Staff - PBSA Staff shall include Executive Director, management, contracted partners and personnel assigned to PBSA.
20. Standard/BSOAP Standard - BSOAP Accreditation Standard. Used to define the Standard generally, as well as each additional Standard which may be created by

the BSCC.

21. Surveillance - As it relates to accreditation, the process of monitoring and review of an Accredited Organization for ongoing conformity with the BSOAP Accreditation Standard.
22. Termination Letter - The official form of notice submitted by an accredited organization to the BSCC requesting termination of accreditation.

These Policies and Procedures were approved on December 5, 2023.

## FEE SCHEDULE

**\*all fees subject to change at the discretion of the Council**

Service	PBSA Member Rate	Non-Member	Date Due	Notes
5-Year Accreditation Application -General OR US Standard (Initial and Reaccreditation)	\$6450.00 US*	\$9675.00 US*	*\$1500 non-refundable fee with application. Remainder within 30 days of invoice.	Includes application fee, desk review, and one-two day of virtual audit.
Bundled 5-Year Accreditation Application– Both General Standard and US Standard (Initial and Reaccreditation)	\$7450.00 US	\$11175.00 US	With both applications	Includes application fee, desk review, and one day of virtual audit.
Additional Location(s) (Initial and Reaccreditation)	\$2000 US for each additional location	\$3000.00 US for each additional location	Within 30 business days after notification by staff	At the discretion of the auditor, staff and/or BSCC if additional site visit(s) are required, additional fee per location will be added. Auditor and staff will make every effort to advise of additional fee(s) as soon as practicable.
-Additional Complexity (Initial and Reaccreditation)	\$1500.00 to \$4000.00 US	\$2250.00 to \$6000.00 US	Within 30 business days after notification by staff	If at the discretion of the auditor, staff and/or BSCC, the agency’s structure is complex or a change occurs during the accreditation process, additional fees will be added. Additionally, fees may be added if the agency is found to not be ready for the desk audit as determined by the auditor (See Section IV.B for details.) This fee will also be levied if auditor determined there are non conformities and a remediation period is granted. Auditor and staff will make every effort to advise of additional fee(s) as soon as practicable.
Year 3 Interim Surveillance Audit	\$2860.00 US	\$4290.00 US	With application	Includes desk review of submitted materials.
Bundled Year 3 Interim Surveillance Audit – Both General Standard and US Standard	\$2860.00 US	\$4290.00 US	With both applications	Includes desk review of submitted materials.
Legal Name Change or Legal Entity Change with No Change of Ownership or Control	\$0.00 US	\$0.00 US	Within 30 days of date of closing transaction	Use the letter of intent and notice forms referenced in the Policies and Procedures. If additional outside third party fees are incurred in the review process, the BSCC may charge those additional fees to the Accredited Organization.

## FEE SCHEDULE (Cont'd)

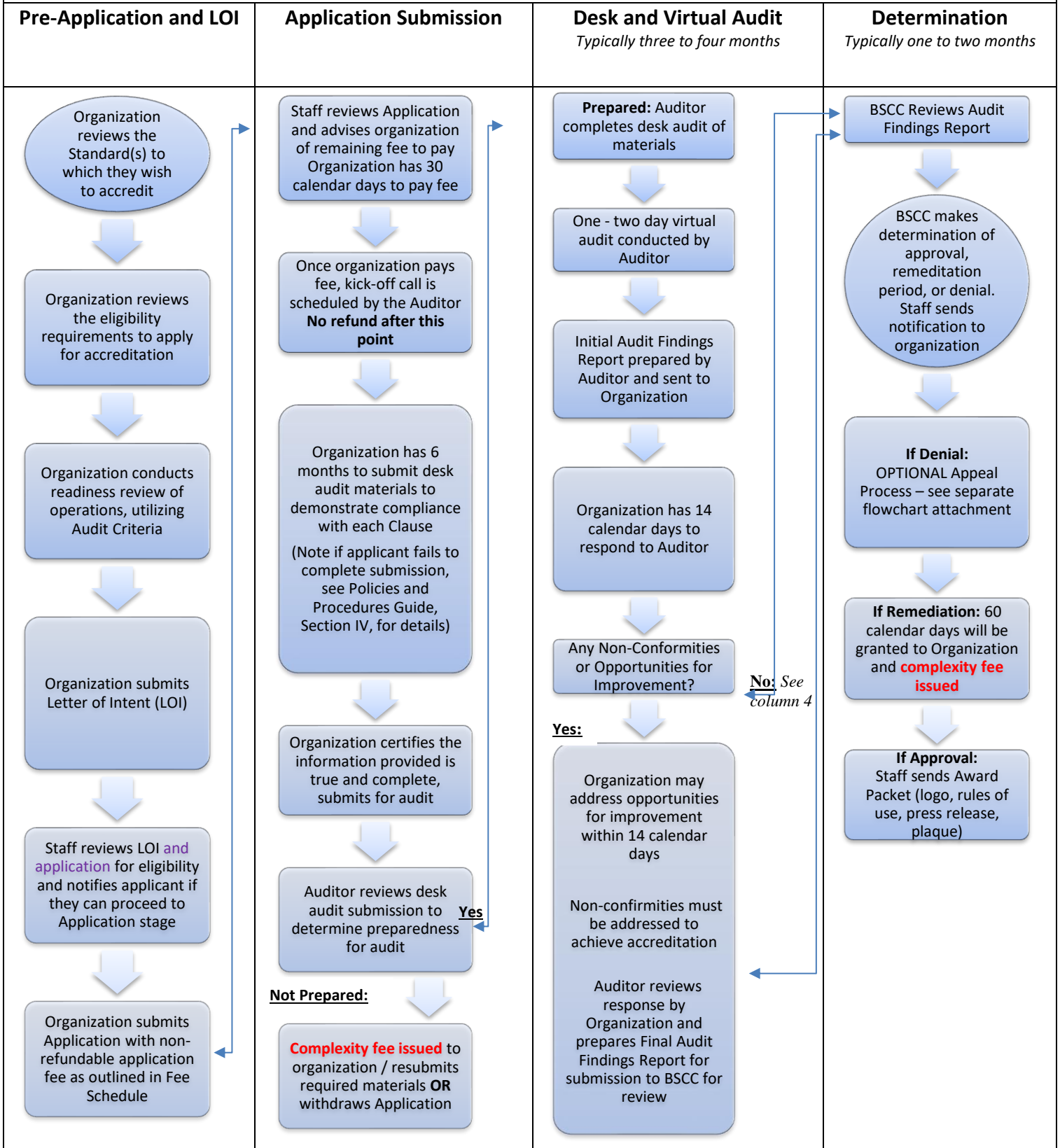
Service	PBSA Member Rate	Non-member	Date Due	Notes
Merger/Acquisition/Change of Control Review	\$750.00 US	\$4290.00 US	Within 180 days following closing date of transaction effecting the change of control.	Use the letter of intent and notice forms referenced in the Policies and Procedures. At the discretion of the auditor and/or BSCC, if additional site visit(s) are required, additional fee per location will be added. Auditor and BSCC will make every effort to advise of additional fee(s) as soon as practicable. Following successful completion of this audit--- the 3-year and 5-year audit schedules will be reset for this accreditation of this newly merged/acquisition/change of control entity.
Periodic Surveillance Audit	\$2860.00 US	\$4290.00 US	Within 30 days of notice	A periodic surveillance audit may be required at the discretion of the auditor and/or BSCC. May include desk review and/or virtual audit.
Appeals	\$1000.00 US	\$1500.00 US	Upon submission of appeal	See Section IV(C)(5) In some instances additional fees may be incurred (for example in instances where the appeals panel determines that additional resources such as audit or legal services are necessary). Any travel (transportation, lodging, per diem) for virtual review is separate and shall be paid directly by the organization. BSCC will make every effort to advise of additional fee(s) as soon as practicable.
Onsite Audit	TBD	TBD	Within 30 days of invoice	If auditor travel (transportation, lodging, per diem) is required for on site visit as outlined in Section G, fees are separate and shall be paid directly by the organization.

\* In rare circumstances auditor and/or BSCC may require engagement of outside counsel, in such instances fees for outside counsel will be passed through to organization.

Fee increases will apply to all organizations. Exceptions may be made for organizations who have submitted their application and desk audit material; however, no exceptions will be made for organizations who have only submitted a Letter of Intent (LOI)

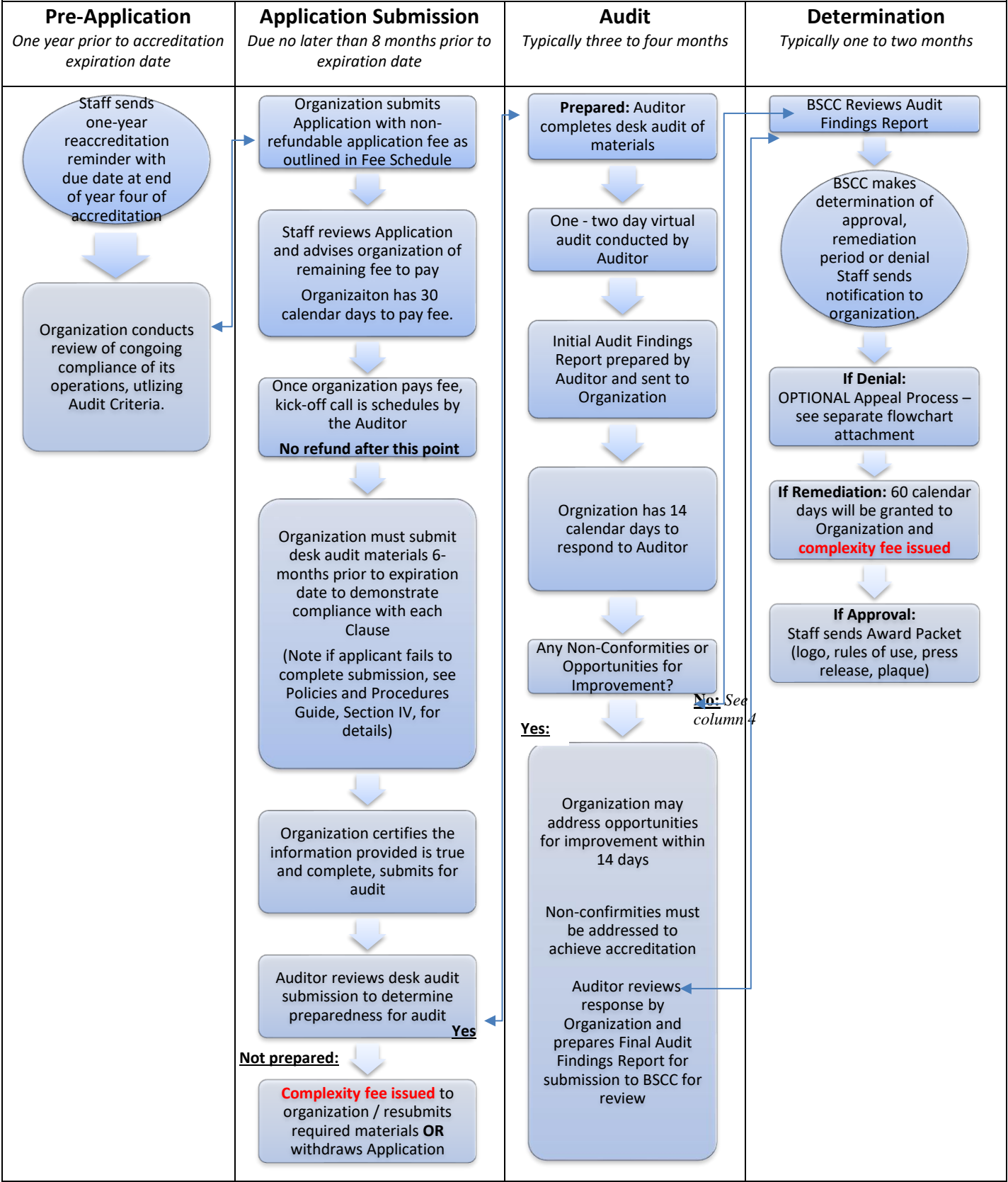
Circumstances outside the stated fee structure will be addressed individually.

**ATTACHMENT 1  
INITIAL ACCREDITATION PROCESS**

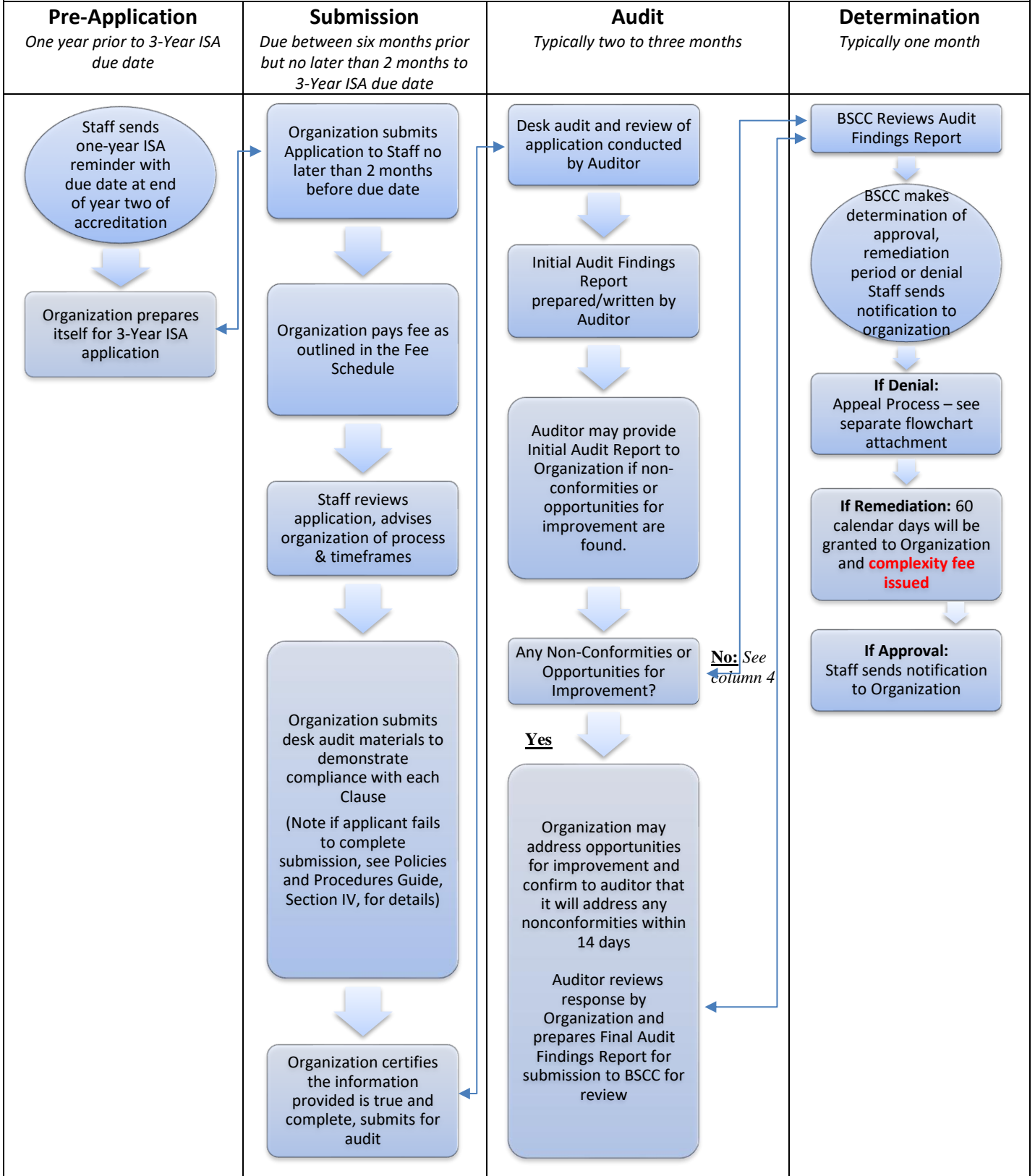




**ATTACHMENT 3  
REACCREDITATION PROCESS**

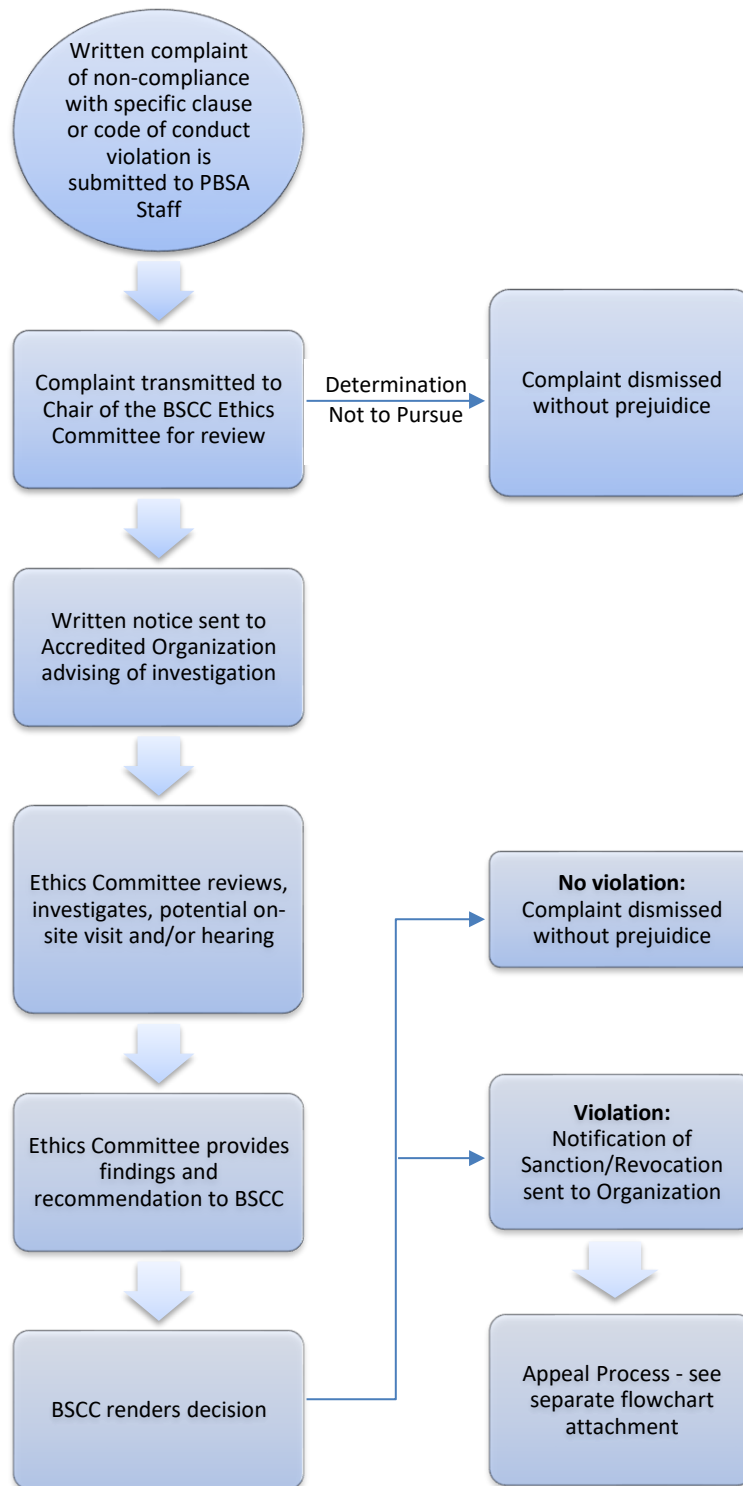


**ATTACHMENT 4  
INTERIM SURVEILLANCE AUDIT (ISA) PROCESS**

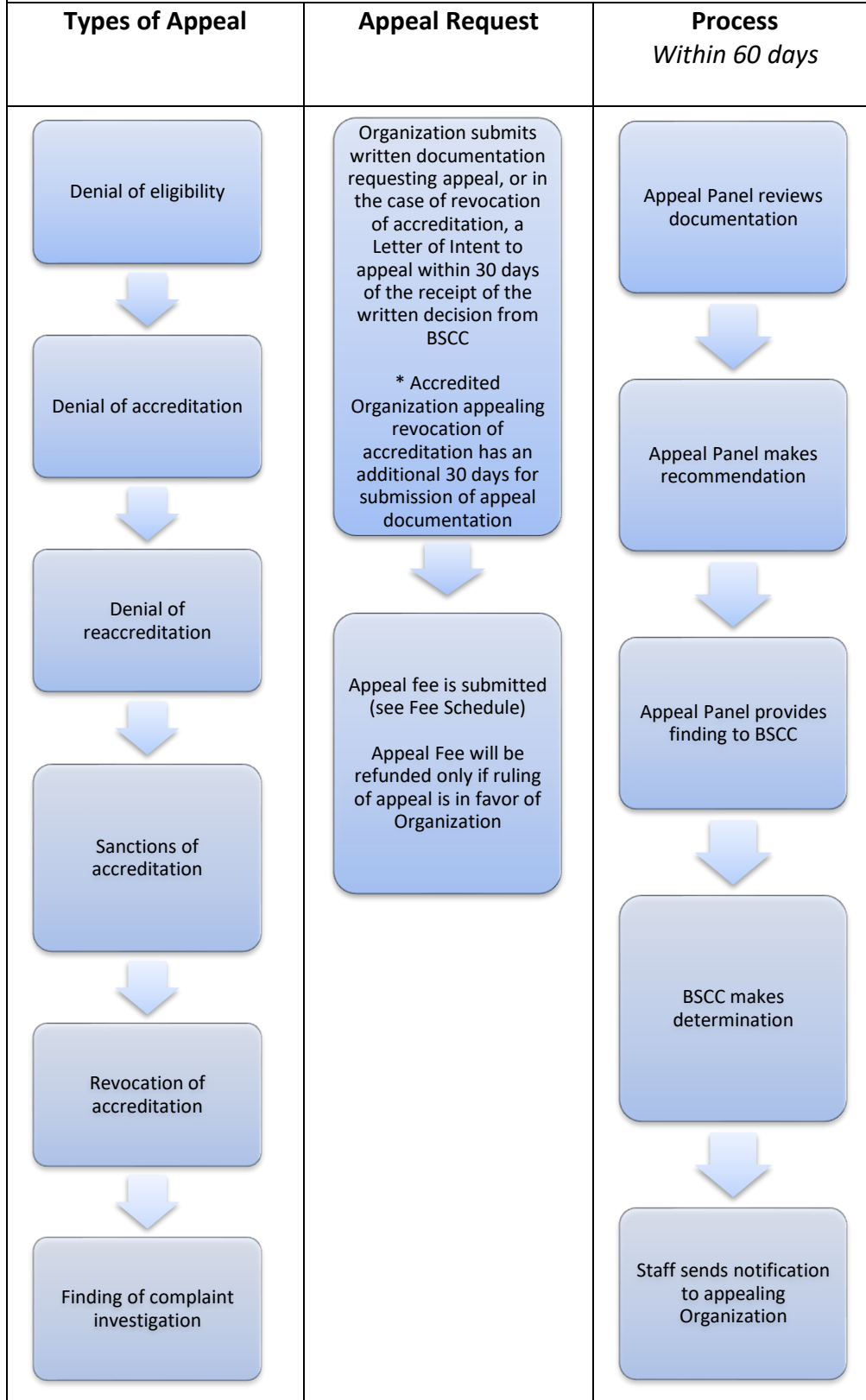


**ATTACHMENT 5  
COMPLAINT/GRIEVANCE PROCESS**

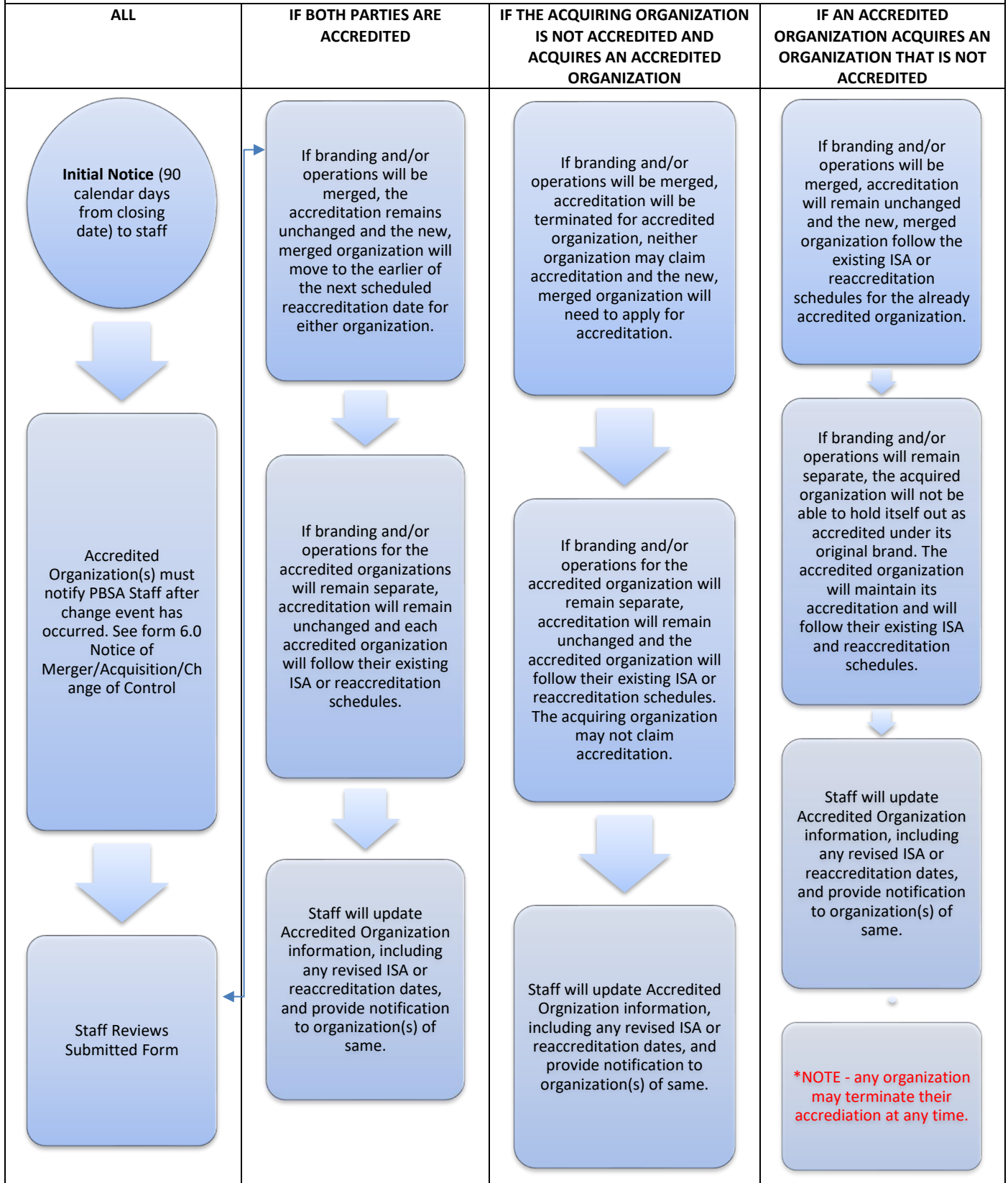
**Process**  
*Within 60 days*



**ATTACHMENT 6  
OPTIONAL APPEAL PROCESS**



**ATTACHMENT 7  
CHANGE OF OWNERSHIP AND/OR CONTROL**



**FORM 5.0**  
**NOTICE OF ADMINISTRATIVE CHANGE FOR ACCREDITED ORGANIZATION**  
**(i.e. to logo, legal entity name, doing business as name, internal legal structure – but no operational or ownership change)**

[COMPANY LETTERHEAD]  
Month, Day, Year

PBSA  
110 Horizon Drive, Suite 210  
Raleigh, NC 27615

**Re: BSCC Notice of Administrative Change for Accredited Organization**

To whom it may concern:

Please accept this letter as an official notice on behalf of the above-named accredited organization of an administrative change, including specifically the following (check all that apply and attach requested information):

- Change to Accredited Organization Logo – please attach the old and new logo
- Change to Accredited Organization Legal Name (no operational change) – please attach state legal filings for the old and new legal name
- Change to Accredited Organization Doing Business As or Trade Name – please attach state legal filings for the old and new doing business as or trade name
- Change to Internal Legal Structure Only (e.g., affecting who the parent company is to the Accredited Organization, without a change to the overall ownership or control of the Accredited Organization) – please attach a description or illustration of the old and new legal structure including impact on the accredited organization, if any.

As part of this Notice, the undersigned represents, attests, and certifies to the following:

- ACCREDITED ORGANIZATION NAME is currently an active accredited member of PBSA in good standing.
- I have personally reviewed the BSOAP Policies and Procedures, the BSCC Organization Code of Conduct, the Accreditation Standard with Audit Criteria, and the Merger/Acquisitions Toolkit.
- We have conducted our own internal review and believe that we are in substantial conformity with all clauses and measures and that no further virtual/virtual audit to establish conformity is required by the BSOAP policies and procedures as a result of the above administrative changes.

- In compliance with the BSOAP process, ACCREDITED ORGANIZATION NAME has attached the documents requested above in support of its request for an administrative change to be made.

Sincerely,

OFFICER'S SIGNATURE  
OFFICER'S PRINTED NAME  
OFFICER'S TITLE  
COMPANY NAME

**FORM 6.0**  
**NOTICE OF MERGER/ACQUISITION/CHANGE OF CONTROL LETTER**

**Notice of Transaction**

This form is to be completed whenever a currently accredited organization undergoes a legal transaction or event that will have an impact on their ownership or control. Every accredited organization is required by Section IV (O) of the Background Screening Organization Accreditation Program Policies and Procedures to provide notice of a merger/acquisition/change of control by completing this form.

**ACCREDITED ORGANIZATION'S CURRENT (PRE-TRANSACTION) INFORMATION**

Accredited Organization's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State/Province, Zip/Postal Code: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Primary Contact Title: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

Primary Contact Direct Phone: \_\_\_\_\_

**OTHER ENTITY INFORMATION**

The following legal entities or individuals are involved in the above described legal transaction or event. If more than one legal entity besides the currently accredited organization is involved in the legal transaction or event, please complete the following for each entity involved and attach the same to this document.

Other Entity's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Primary Contact Title: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

Primary Contact Direct Phone: \_\_\_\_\_

Other Entity's Current Accreditation Status:

- Not Currently Accredited
- Initial Term of Accreditation
- Seeking Re-Accreditation
- Re-Accredited
- Accreditation Terminated

**NATURE OF LEGAL TRANSACTION OR EVENT**

**Please check all that apply:**

- Transfer of ownership
- Change in key personnel
- Transfer of legal control
- Transfer of financial control
- Transfer of operational control



- Addition of operation centers or facilities
- Change in physical location(s) of operations
- Change in service-delivery platform
- Change in operational processes
- Change in control of information security
- Change in control of operational facility
- Change in client on-boarding process and/or service agreement

**Please indicate the intended outcome of the transaction:**

- Accredited organization will merge branding / or operations with another accredited organization
- Accredited organization will maintain separate branding and/ or operations with another accredited organization
  
- Accredited organization acquired by and will merge branding and/ or operations with nonaccredited organization
- Accredited organization acquired by and will maintain separate branding and/ or operations with nonaccredited organization
  
- Accredited organization acquires and will merge branding and/ or operations with nonaccredited organization
- Accredited organization acquires and will maintain separate branding and/ or operations with nonaccredited organization
  
- Other – explain: \_\_\_\_\_

**IF ORGANIZATIONS ARE MERGING OPERATIONS/BRANDING, PLEASE PROVIDE SURVIVING ENTITY INFORMATION**

As a result of this transaction, the following legal entity will survive the legal transaction or event identified above. If no change to the Accredited Organization’s Entity Information is made as a result of this legal transaction or event, simply mark “No change.”

Surviving Entity’s Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Primary Contact: \_\_\_\_\_  
 Primary Contact Title: \_\_\_\_\_  
 Primary Contact Email: \_\_\_\_\_  
 Primary Contact Direct Phone: \_\_\_\_\_

**FORM 9.0  
REQUEST FOR TERMINATION OF ACCREDITATION**

[COMPANY LETTERHEAD]

Month, Day, Year

PBSA  
110 Horizon Drive, Suite 210  
Raleigh, NC 27615

Re: Request for Termination of Accreditation

At this time, we would like the following organization(s) to be removed from the PBSA LIST OF ACCREDITED COMPANIES immediately.

ACCREDITED ORGANIZATION NAME #1 TO BE REMOVED:

---

ACCREDITED ORGANIZATION NAME #2 (where applicable) TO BE REMOVED:

---

I am a current officer fully authorized to act on behalf of COMPANY NAME.

We are fully aware and are taking immediate action to ensure that in addition to having our name removed from the PBSA LIST OF ACCREDITED COMPANIES on the PBSA website, we must remove all references to this accreditation on all company marketing materials, letterhead, websites, and any other place it may exist.

Sincerely,

OFFICER'S SIGNATURE  
OFFICER'S PRINTED NAME  
OFFICER'S TITLE  
COMPANY NAME

**FORM 10.0**  
**Change of Physical Office Location(s)**

This form is to be completed whenever a currently accredited organization moves, or closes, one or more of their physical office locations, including its headquarters or any operating offices where services under the Standard are being completed, **OR** if the organization establishes a new or additional office location where services under the Standard will be completed.

Accredited Organization's Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Primary Contact Title: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

Primary Contact Direct Phone: \_\_\_\_\_

Provide ALL Office Location(s)  
(Attach separate sheet if necessary.)

*Location 1:*

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

- Unchanged since last audit
- Closed location as of \_\_\_\_/\_\_\_\_/\_\_\_\_
- New location since last audit, new as of \_\_\_\_/\_\_\_\_/\_\_\_\_

*Location 2:*

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

- Unchanged since last audit
- Closed location as of \_\_\_\_/\_\_\_\_/\_\_\_\_
- New location since last audit, new as of \_\_\_\_/\_\_\_\_/\_\_\_\_

*Location 3:*

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

- Unchanged since last audit
- Closed location as of \_\_\_\_/\_\_\_\_/\_\_\_\_
- New location since last audit, new as of \_\_\_\_/\_\_\_\_/\_\_\_\_

## **LIST OF ATTACHMENTS AND APPROVED FORMS**

**\*Numbering retains historical use and is not sequential**

Fee Schedule

Attachment 1 – Initial Accreditation Process

Attachment 3 – Reaccreditation Process

Attachment 4 – Interim Surveillance Audit (ISA) Process

Attachment 5 – Complaint / Grievance Process

Attachment 6 – Optional Appeal Process

Attachment 7 – Change of Control Process

Form 5.0 - Notice of Administrative Change for Accredited Organization

Form 6.0 - Notice of Merger/Acquisition/Change of Control Letter

Form 9.0 – Request for Termination of Accreditation

Form 10.0 - Change of Physical Office Location(s)